

Using the Magnet Model Improved Dissemination and Understanding at York Hospital of Key Nursing Sensitive Indicators

Gregory M. Gurican, RN, BSEE, MSNE, MBA, ASDN; and Michelle A. DeStefano, RN, MPA, NEA-BC



PURPOSE:

- To describe use of Nursing Dashboard Reports to disseminate key patient outcome metrics, which are meaningful, translatable, understandable, and which can be articulated by the staff.
- To improve communication processes based on Magnet principles to simplify and enhance the Nursing Dashboard reports of patient outcomes.
- To display and disseminate patient outcome data through the use of redesigned Performance Improvement bulletin boards.
- To standardize PI Bulletin Board formats and content to provide uniformity from nursing unit to nursing unit, while enabling the staff to provide patient-specific outcomes data.

STRATEGY:

- Redesign of the existing Nursing Dashboard to reflect the three key Magnet domains of Administrative Practice; Professional Practice; and Professional Development.
- Standardize the domains across all nursing units and Service Lines at YH; and, provide a template for layout and display of information on the PI Bulletin Boards to clearly delineate information presented to the Staff.

NURSING DASHBOARD RECONFIGURATION:

AFTER REDESIGN	
Fiscal Year:	Definitions / Data Source
Professional Practice - Patient Clinical Outcomes	Nurse Sensitive Indicators (NSIs):
No. of Hospital Acquired Pressure Ulcers	Reported to Patient Safety Safety Reporting System (SRS)
Hospital Acquired PU Incidence Rate (%)	Total Number of Hospital Acquired PUs / Admissions(Finance Report)
Total Number of Fall Events	Total Number of Falls reported to the RM-SRS system
No. of Falls with Injury (FI), Severity Impact Score > no harm	Number of Falls with Injury (FI) reported to the RM-SRS system
Patient Falls c Injury Rate/1000 Pt. Days (Target = NDNQI Benchmark)	No. of Reported Injury Falls [SRS]*1000 /Patient Days [Finance]
Total Patient Falls - Rate of Occurance/1000 Pt. Days	Total No. of Reported Falls [SRS] * 1000 / Total Patient Days [Finance]
Rate of UTI Occurrences per 1000 Catheter Days	Total No. of Catheter UTIs * 1000 / Total No. of Foley Catheter Days (Inf. Control)
PATIENT SATISFACTION:	NSIs
Pt. Satisfaction r/t Nursing Care	NRC Question ID 21815 "trust in Nurses?"
Pt. Satisfaction r/t Pain Management	NRC Question ID 18911 "staff do everything to help with pain?"
Pt. Satisfaction r/t Pt. Education	NRC Question ID 18879 "nurses explain things to you?"
Pt. Satisfaction r/t Overall Care	NRC Question ID 18943 "Would you recommend friends and family?"
PRODUCTIVITY & WORKLOAD	Actual HPPD is the NSI
Actual Hours per Patient Day	Productive HPPD
Actual RN Hours per Patient Day	Productive HPPD - Actual
% Licensed/Unlicensed Staff	SKILL MIX Index is a NSI
Percent RNs	Actual Number of RNs/Total Number of Direct Care Staff
Professional Development Outcome Indicators	
% of RN Staff - BSNs	ANSOS and/or HR Reports
% of RN Staff having National Certifications	ANSOS and/or HR Reports
Administrative Outcome Indicators	
Turnover Rate based on Terminations from the Unit	# of Terminations /Average # of Employees for the indicated period.
Vacancy Rate based on Actual Filled Positions vs. Budgeted Positions	(# Bgt FTEs - # Act Ftes / # Bgt FTEs) * 100. A negative % = an FTE variance over Bgt.

STANDARDIZED DESIGN OF P.I. BULLETIN BOARDS

FALL EVENTS	NURSING MODEL (RBC)	Patient Satisfaction	Unit-Specific PI Outcomes
1. Fall Events Calendar	Relationship Based Care	NRC/Picker	Graphic Results
2. Falls Action Plan/PI (E.g. 2hrs Rounds)	1. RBC Scorecard 2. Graphic Results	1. House-wide Color Matrix 2. Blue Book Graphs (If applicable) 3. Unit Actions Plans (If applicable)	FY QTR-1 Project FY QTR-2 Project FY QTR-3 Project FY QTR-4 Project
Nursing Sensitive Indicators (NSIs)		RN Satisfaction Results	Unit-Specific Annual PI Plan
NEW Dashboard Report (11" x 17" format)		(NDNQI)	
Falls	Pressure Ulcers	1. CY-08/CY-09	
Fall Rate	HAPU Rates	Comparison Analyses (8.5" x 14" format)	
Injury Falls	CaUTIs	2. Action Plans (Sleeved and hanging)	
Injury Fall Rate	CaUTIs Rate		
Total HPPD	RN-HPPD		(Sleeved and hanging)

EVALUATION:

- By restructuring the Nursing Dashboard reports into the Magnet Domains and standardization of PI Bulletin Board displays the facility was able to create improved visibility and understanding of key nursing indicators affecting patient outcomes.
- Staff are more readily able to see and understand trends, which then lead to the creation of Action Plans for continuous improvement.

IMPLICATIONS FOR PRACTICE:

Any facility can take advantage of reorganizing its outcome data to align with Magnet program domains and principles for improved outcomes.