

An Effective Strategy to Teach Nurses and Managers how to Use Benchmarked Data to Improve Care Processes and Outcomes

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Purpose

- To educate nursing staff and leadership about key elements of NDNQI reports to enable reading, interpreting and using benchmarked data to improve patient care processes and outcomes

Course Content

- Title: *Using Benchmarked Data*
- Taught by PhD-prepared clinical nurse researcher
- Targeted to staff nurses and managers
- Quarterly report content tailored to each participant's care unit
- Focus on reading tables of Falls data and determining realistic goals for improvement
- One hour continuing education given to attendees

Course Evaluations

- Average rating on meeting course objectives 4.8-5.0
- Overwhelmingly positive about the user-friendliness of content and learner confidence in ability to make sense of and use data
 - "I was glad to have this information as it has never been explained to me. This gives me a reference and has provided me with needed information."
 - "You clarified the presentation of the quarterly reports making them much easier to decipher."
 - "I really enjoyed this class. I know what to do with these reports now!"
 - "Great explanation using common terms for average individuals. I will be able to communicate this to the staff after this class."
- Pilot projects reflect application of principles by managers and staff in creating, implementing and evaluating improvement plans using benchmarked data

Applying Course Content on a Medical-Surgical Unit

- 33 bed medical surgical unit
 - Manager and several staff RNs attended *Using Benchmarked Data* class
- NDNQI Total Falls and Falls with Injury indicators are a component of this unit's goals and of the individual unit employee performance improvement goals
- Fall rates and nursing scorecard are displayed on the Quality Board located in the staff lounge
- Nurses became familiar with reading benchmarked scorecards and recognizing unit progress toward reducing falls
- Ongoing education on falls provided by Unit Based Council
- Action Plan was implemented and incorporated components of the Falls Prevention program as well as:
 - ✓ Hourly Rounding with intention by all staff
 - ✓ CNA final rounds at end of shift
 - ✓ CNA reported off at end of shift to oncoming CNA
 - ✓ Post Fall Huddle held after all patient falls



Results

- After 12 months, Total Falls and Falls with Injury were reduced significantly (see Table 1)

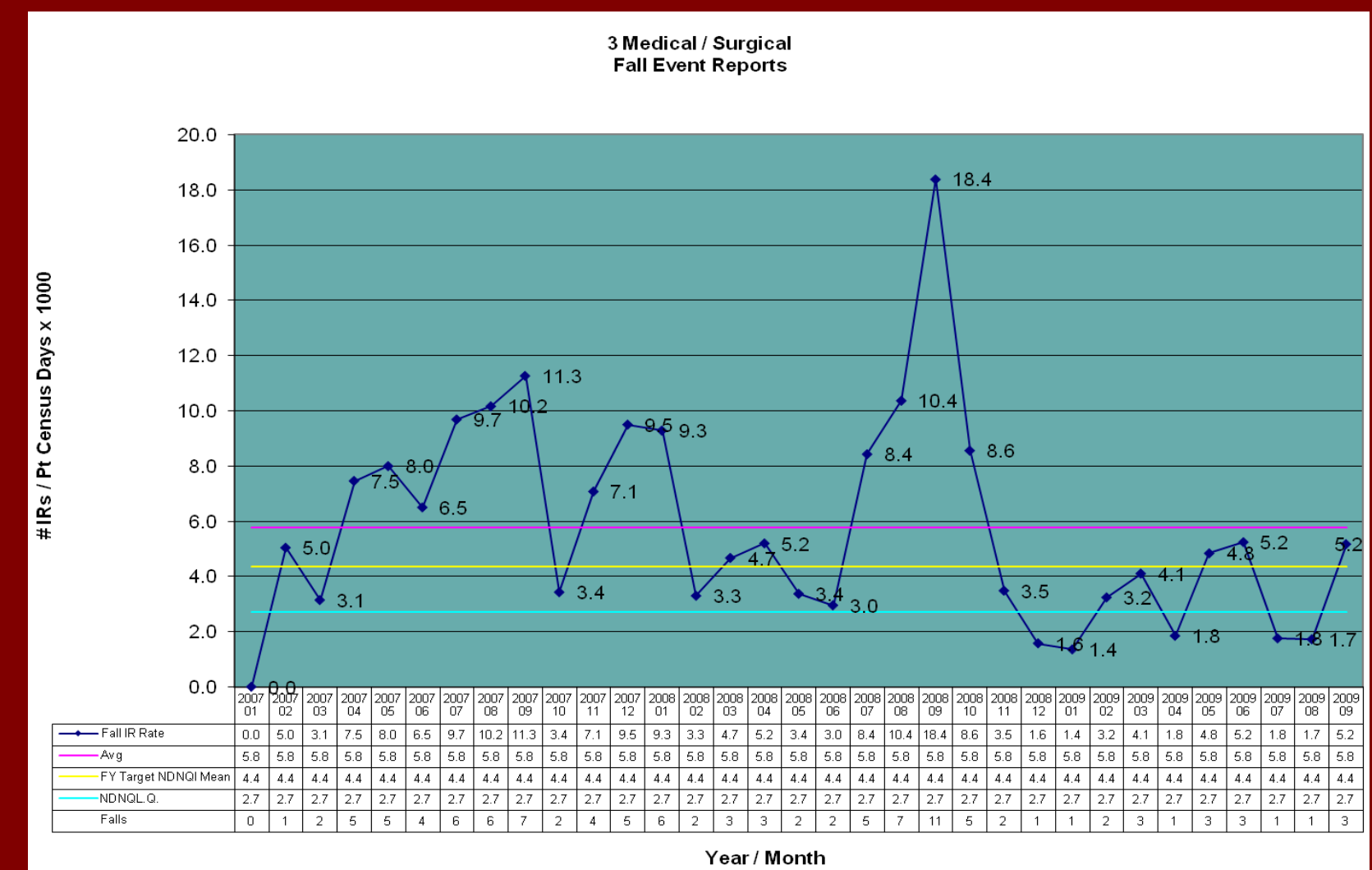


Table 1

Next Steps

- Continue to provide education to increase nurses' and managers' knowledge of and comfort with nursing sensitive indicators emphasizing the usefulness of benchmarked data for creating improvement plans
- Continue to support managers and nurses in projecting future improvement goals using data from previous quarter
- Work with managers to individualize unit-based graphics to include target goal for improvement while displaying placement of unit performance in 25-75 percentile ranking (see Figure 1)

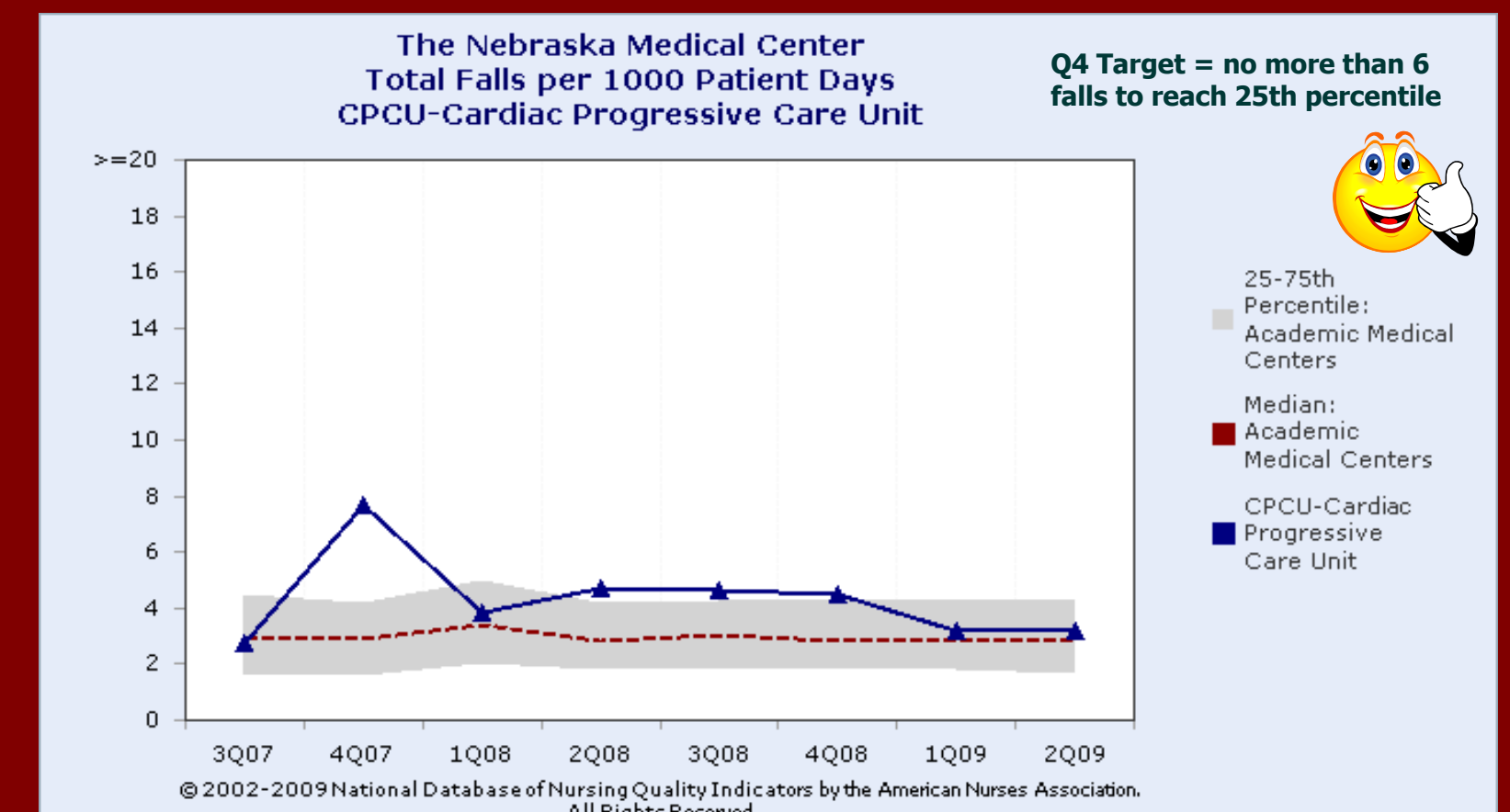


Figure 1

