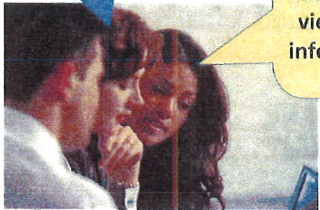


Unit-driven Nursing Dashboards

How will I be able to see the trended performance over time?

The dashboard will have links that will allow the nurses to view trended information on graphs.

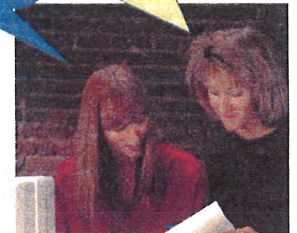


A nursing sensitive dashboard is a color coded grid that provides information on nursing sensitive indicators that are specific to the population that a group of staff cares for.

A nursing sensitive indicator is heavily influenced by nursing care to positively impact our patients, families, organization and community, and is evidence-based. At a quick glance, the nursing staff can view the unit level dashboard and see if the improvements that they are working on are making an impact. Examples of nurse sensitive indicators include fall rate, pressure ulcers, VAP, and CAUTI.

How can I access the dashboard from my unit?

The dashboard will be located on the nursing portal under the hospital and unit, updated on the 25th of each month



The result is yellow because the desired direction is low and the 4.7% result for the latest 3 months is better than the prior year's result of 5.5%, but it has not yet met the unit goal of 3.4%.

The trend is yellow because in each case, there is no favorable or unfavorable trend over time. If there is not enough data to determine a trend, the cell will be white with the value N/A in it.

This result is red because the desired direction is low, and the 5.2% result for the latest 3 months not only has not met the unit goal of 2.9%, it is also worse than the prior year's result of 1.6%.

This trend is green because the desired direction is high and there have been at least 3 consecutive months with results above the preceding month.

This result is green because the desired direction is high and the 87.2% result for the latest 3 months is better than the unit goal of 86.4%.

This trend is red because the desired direction is high, but there have been at least 3 consecutive months with a result lower than the preceding month.

Performance Indicator	Want	Prior Year Result	Unit Goal	1 month			3 months			Current Trend	National Benchmark	
				N**	Result	Time Frame	N**	Result	Time Frame		Current Available	Recent Qtrs Where Better
Falls/1000 pt days	Low	5.5	3.4	520	5.8	Dec 2010	1476	4.7	Oct-Dec 2010	=	3.2	3 of 8
Pressure ulcers stage II+	Low	1.6	2.9			Qtly	19	5.2	Oct-Dec 2010	=	2.6	5 of 8
Pt. Sat: overall	High	86.2	86.4	6	89.5	Dec 2010	31	87.2	Oct-Dec 2010	=	85.3	7 of 8
Pt. Sat: pain well controlled	High	89.4		5	90.0	Dec 2010	28	91.9	Oct-Dec 2010	+	86.4	8 of 8
Pt. Sat: promptness, response to call	High	87.0		5	90.0	Dec 2010	30	86.6	Oct-Dec 2010	-	85.0	7 of 8

* Prior year (or baseline) is 10/1/09 – 9/30/10
 ** N = # of patients, except for falls and infection control indicators. For these, N = # of days.
 Notes: 3 months result is shaded green if better than unit goal, even if not meeting prior year result.
 A cell shaded gray indicates Not Applicable.

Worse than prior year result	##
Improvement opportunity	##
Better than unit goal	##
No unit goal for comparison	##

-	Unfavorable
=	No trend
+	Favorable
N/A	Not enough data

Unit-driven Nursing Dashboards

Purpose

Nurse leaders must prioritize and manage numerous complex pieces of data, and clearly communicate important nurse-sensitive outcome data to direct care nurses. A large health system created unit level dashboards to help nurses understand and act upon important quality information.

Significance

With so many competing priorities, it is critical for nurse leaders to prioritize the data they receive. Pinpointing and sharing critical metrics can drive problem recognition, facilitate performance improvement and ignite front line staff to improve patient care quality, safety and service.

Strategy and Implementation

System nursing leadership decided to develop unit-level quality dashboards that were easy to read and interpret, and demonstrated performance trends. Nurse leaders believed that unit councils must be involved in prioritizing critical metrics, recognizing problems and taking action to improve. Nurses in unit councils chose indicators for the dashboards that their unit would monitor and use to improve patient care, including skin, falls, 2 other clinical indicators, and 2 service indicators. The Clinical Information Analysis Dept. provided nurse leaders with a list of nurse sensitive outcome indicators they were already retrieving electronically. Fortunately, 75% of the selected indicators were on the list. For those non-electronic indicators, nurse leaders created operational definitions. Dashboards also include hospital performance goals, trends, and national benchmarks when available. Dashboards are posted to the Nursing Portal monthly.

Evaluation

The dashboards make a large amount of critical data accessible and understandable to staff. Use of color-coding provides an instant snapshot of unit performance, thus helping nurses prioritize their efforts in affecting change. Individual indicator trends help nurses monitor progress.

Implications and Practice

Direct care nurses and leaders must work together to identify key metrics, interpret the data, and use the data to drive performance. The dashboards provide a tool to facilitate nursing quality improvement and demonstrate the impact nurses have on patient quality, safety and service.