

Nursing Sensitive Measures Scorecard Improves Outcomes

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Purpose

A nursing scorecard was developed to display hospital and unit level nursing performance. Participation in NDNQI allows us to trend our progress and benchmark with similar institutions.

Strategy and Implementation

In response to changing healthcare environments and the availability of NDNQI nursing sensitive outcome measures, we implemented a nursing balanced scorecard. Our scorecard combines financial performance with nursing sensitive measures, patient/family satisfaction, and measures of staff satisfaction, vacancy, and retention. Incorporating 16 key measures and aligned with department strategic pillars, the scorecard is updated monthly with drill down from the organization to the unit level.

Balanced Scorecard

Metric Definitions (click title to view Definitions)	Target vs. Actual Indicator Status	Best Practice	Target	Current Month Actual	Desired Direction
Clinical Excellence (click title to view graphs)					
Nursing - Medication Errors (SSE's) (Number of events)	✓	0	0	0	↓
Nursing - Fall Prevention (Number of unannounced descents to floor)	✗	N/A	0	3	↓
Nursing - Hospital-Acquired Pressure Ulcer* (Prevalence rate is defined as pressure ulcer not present on hospital admission)	✓	1.95	2.00	1.48	↓
Nursing - Hospital-Acquired Infection-CAUTI (Per 1,000 catheter days)	✗	N/A	1.60	2.40	↓
Nursing - Hospital-Acquired Infection-CAUTI (Per 1,000 Foley catheter days)	✓	2.00	2.00	0.00	↓
Nursing - Hospital-Acquired Infection-VAP (Per 1,000 ventilator days)	✓	0.40	0.50	0.00	↓
Nursing - Pediatric IV Infiltration (Number of Grade III and IV pediatric IV infiltrates resulting in harm)	✗	12	12	15	↓
Nursing - Pediatric Pain A4-R* (Number of times a complete pain management code was completed)	⚠	95.68%	100.00%	93.95%	↓
Professional Engagement (click title to view graphs)					
Nursing - Unplanned Rate (RUL) (Only) (Percentage of vacant hospitalist direct care RUL-PI full time equivalents)	✓	8.10%	4.00%	2.80%	↓
Nursing - RN 12-Month Rollin/Turnover Rate (Direct Care only) (Percentage of direct care RNs/PIs that resigned from CHOP)	⚠	9.90%	8.00%	8.40%	↓
Professional Engagement/Clinical Excellence (click title to view graphs)					
Nursing - Patient/Family Satisfaction** (Overall family satisfaction rating for nursing care)	✓	88.98%	85.80%	86.48%	↓
Nursing - Satisfaction & Engagement*** (Overall nurse satisfaction rating on the Practice Environment Scale)	✓	2.95	3.01	3.01	↓
Financial Stewardship (click title to view graphs)					
Nursing - Resource Utilization as Cost Per Unit of Service (This includes all salary expenses for the unit under to cost of Service)	✓	N/A	\$138.00	\$135.00	↓
Nursing - Supply Expense Utilization as Cost Per Unit of Service (This includes all direct care patient chargeable items)	✓	N/A	\$29.00	\$25.00	↓
Nursing - Overtime Utilization (This includes the percentage of any paid hours that are categorized as overtime in pay code)	✗	N/A	0.00%	3.60%	↓
Nursing - Total Expense Utilization as Cost per Unit of Service (This includes all salary expenses, supply expenses and other non-salary expenses)	⚠	N/A	\$182.00	\$187.00	↓

Scorecard Contact: Pat Black, Nursing Outcomes, Ext. 6-9656, blackp@email.chop.edu

Indicator Status Color Coding:
 ✓ = at or above Target
 ⚠ = within 15% away from Target
 ✗ = Greater than 15% away from Target

Other Notes:
 *N/A = Data reporting not required in current month.
 **N/A = Data not available, not reported, or does not apply.
 *** Data reported quarterly, may represent monthly unit net quarter's data is reported.
 ** Data reported reflects one quarter lag due to system reporting schedule.
 *** Data reported biennially.

Data Source: CHOP Survey/MRC/PIA, National Database of Nursing Quality Indicators, CHOP Office of Patient Safety & Quality, CHOP Vaccines Access Service, CHOP Licensure, CHOP IPI

Clinical Excellence Strategic Pillar

FY11 DEPARTMENT OF NURSING SCORECARD & NURSING-SENSITIVE INDICATORS
Catheter-Associated Urinary Tract Infection

Executive Sponsor: Susan Kolb, CRNP, MSN
 Team Leader(s): Natalie Plachter, CRNP

Metric Definition: Rate is defined as the number of catheter-associated urinary tract infections per 1,000 Foley catheter days.

Metric Status: **✓**

Current Month Metric - Best Practice: 2.00
 Current Month Metric - Target: 2.00
 Current Month Metric - Actual: 0.00

Improvement Activities: The team has worked with the EPIC support team to update the Foley order set to include the indicators supported by the CA-UTI prevention bundle. We hope to see this go into effect next month.

Factors Influencing Ability (or Inability) to Meet Target: It has been difficult to find a venue to train ordering providers. At last past meeting discussed using existing Department training to meet provider training goals.

For more information on this project, please contact: [Natalie Plachter, Ext. 4-2754](mailto:plachter@email.chop.edu) or plachter@email.chop.edu

Catheter Associated Urinary Tract Infection Rate Detail Data

	Oct 11	Sep 11	Aug 11	Jul 11	Jun 11	May 11	Apr 11	Mar 11	Feb 11	Jan 11	Dec 10	Nov 10
3E CSH	0	0	0	0	0	0	0	0	0	0	0	0
3W CSH	0	0	0	0	0	0	0	0	0	0	0	0
4E4S	0	123	0	0	0	0	0	0	0	0	0	0
4W CSH	0	0	0	0	0	0	0	0	0	0	0	0
5E	0	0	0	0	0	0	0	0	0	0	0	0
5S	0	0	0	0	0	0	0	0	0	0	0	0
5W	0	0	0	0	0	0	0	0	0	0	0	0
6WSDU	0	0	0	0	0	0	0	0	0	0	0	0
7W SSU	0	0	0	0	0	0	0	0	0	0	0	0
BST	0	0	0	0	0	0	0	0	0	0	0	0
9S7	0	0	0	0	0	0	0	0	0	0	0	0
CCU SE	0	0	0	0	0	0	0	0	0	0	0	0
CCU ES	0	0	0	0	0	0	0	0	0	0	0	0
NCU	0	0	0	0	0	0	0	0	0	0	0	0
ONCO (DSE)	0	0	0	0	0	0	0	0	0	0	0	0
PCU THE	0	0	0	0	0	0	0	0	0	0	0	0
PCU TE & TS	0	0	0	0	0	0	0	0	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL	0	123	0	0	0	0	0	0	0	0	0	0

Professional Engagement/Clinical Excellence Strategic Pillars

FY11 DEPARTMENT OF NURSING SCORECARD & NURSING-SENSITIVE INDICATORS
Patient/Family Satisfaction

Executive Sponsor: Evie Lengetti, Dir Nrsng Ed Dev & Comm Prgms
 Team Leader(s): Joanna Horst, RN

Metric Definition: Overall family satisfaction rating for nursing care

Metric Status: **✓**

Current Month Metric - Best Practice (75th Percentile): 88.98%

Current Month Metric - Target (CHCA/Magnet): 85.80%

Current Month Metric - Actual: 86.48%

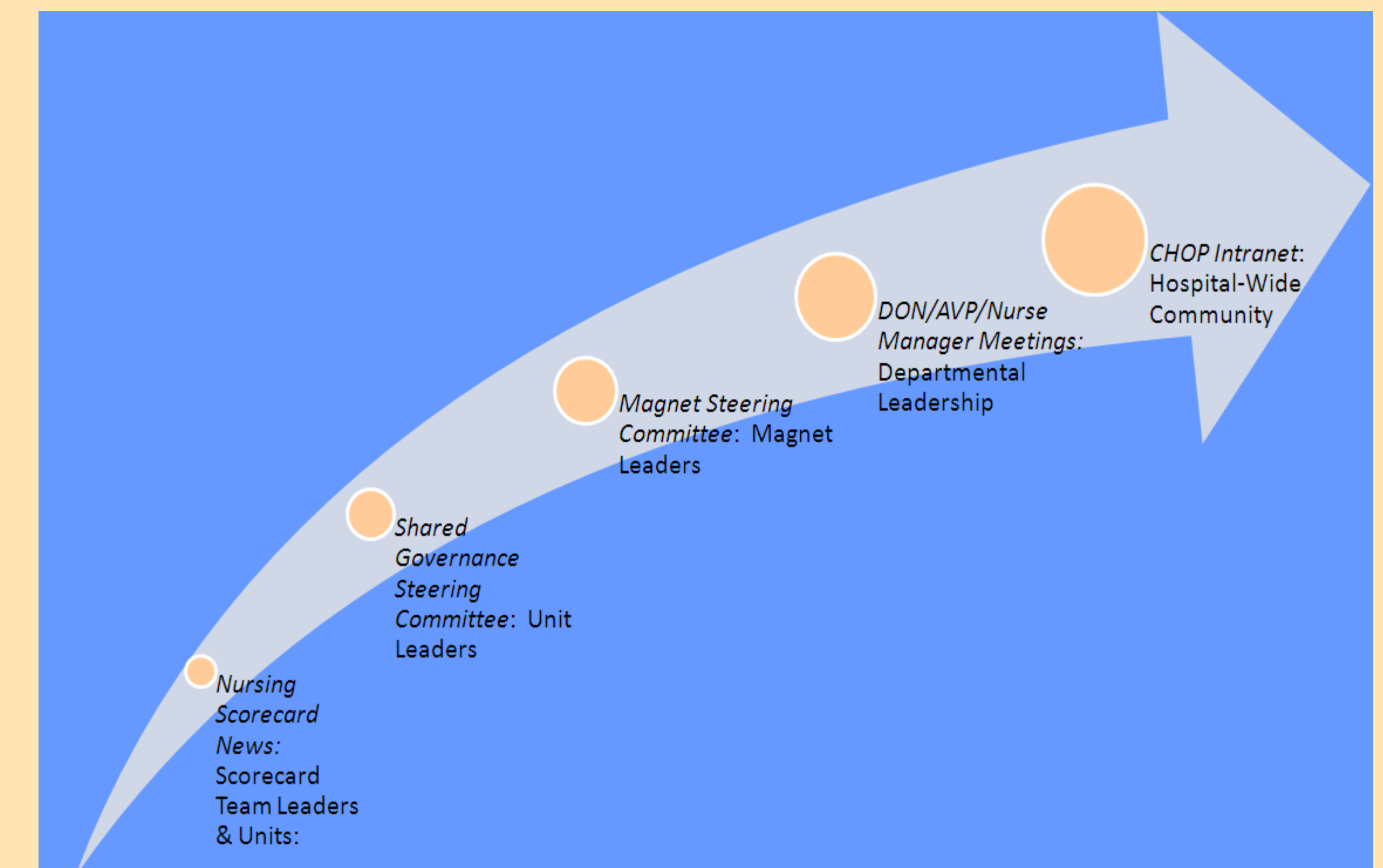
Improvement Activities: Education rolled out for KIDS CARE Update; KIDS CARE commercial in production; Presentation in November to Unit Partners.

Factors Influencing Ability (or Inability) to Meet Target: None

For more information on this project, please contact: [Joanna Horst, Ext. 7-8694](mailto:HorstJ@email.chop.edu) or HorstJ@email.chop.edu

Question Core	Question Text	Report Text	Dimension	NRC 75th Percentile Score	CHCA Average Score	The Children's Hospital of Philadelphia Qtr-4 FY2011 Score	The Children's Hospital of Philadelphia Qtr-4 FY2011 PR Score	3C,3E,3S (CNC/BMT) Score	3E CSH FY2011 Score	4E/4S Medical Qtr 4 FY2011 Score	4W CSH Qtr 4 FY2011 Score	5E Medical Qtr 4 FY2011 Score	5W Medical Qtr 4 FY2011 Score
8118	Overall satisfaction with child IP care	Overall satisfaction with child IP care	None	98	96.6	96.9	542	52	100	98.1	96.7	100	97.1
8102	IP Nurses answers re: child understandable	IP Nurses answers re: Education- child understandable	Guardian	84.9	81.2	83.5	540	67	85	86.5	86.7	90.2	85.1
8103	IP Nurses attn to my suggestions for child	IP Nurses attn to my Family Preferences	Respect for Family	84.8	81.3	82.5	543	59	95	84.9	85	80	87.2
8117	IP staff controlled pain	IP staff controlled pain	Physical Comfort	85.9	82.2	80.6	304	47	92.9	79.2	84.8	71.4	85.7
12992	Rate courtesy of child's IP nurses	Rate courtesy of child's IP nurses	None	97.7	96.5	97.1	543	65	100	98.1	95	100	93.9
12993	Rate availability of child's IP nurses	Rate availability of child's IP nurses	None	97.3	95.4	95.4	542	51	85	94.3	94.9	100	94.1
13073	IP providers checked child's ID band before meds	IP providers checked child's ID band before meds	Patient Safety	83.3	78.3	79.8	526	60	90	81.6	81.4	87.5	80

Process of Scorecard Communication



Significance and Implications for Practice

Outcomes measures are increasingly important to quantify nursing sensitive outcomes for patients/families and organizations. This recently implemented nursing scorecard has improved performance and visibility of nursing across our organization. The scorecard serves as a catalyst for realigning initiatives with the strategic plan and increases execution of the plan throughout nursing services.

Practice has changed since implementation. Transparency and accessibility of the scorecard led to sharing best practices across patient care areas. Shared governance councils develop improvement plans based on scorecard results. Ultimately the outcome that is most visible is the impact of nursing care on the quality and safety of patient care and patient/family satisfaction.

Acknowledgements

Patient/Family Satisfaction

Executive Sponsor: Evie Lengetti, MSN, RN
 Team Leader: Joanna Horst, MSN, RNC, NEA-BC

Catheter-Associated Urinary Tract Infection

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