



# Practice Environment Scale (PES): Grid Highlights Opportunities for Improvement

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## Purpose

**The issue:** Presenting complex data in easily understandable format. The 2011 NDNQI RN survey results were presented in a 434 page document. The PES scale data & participation rates were presented in 43 pages of unit specific data and 2 pages of summary data.

**Goal:** Create a simple way to visually present the data highlighting strengths and opportunities for improvement

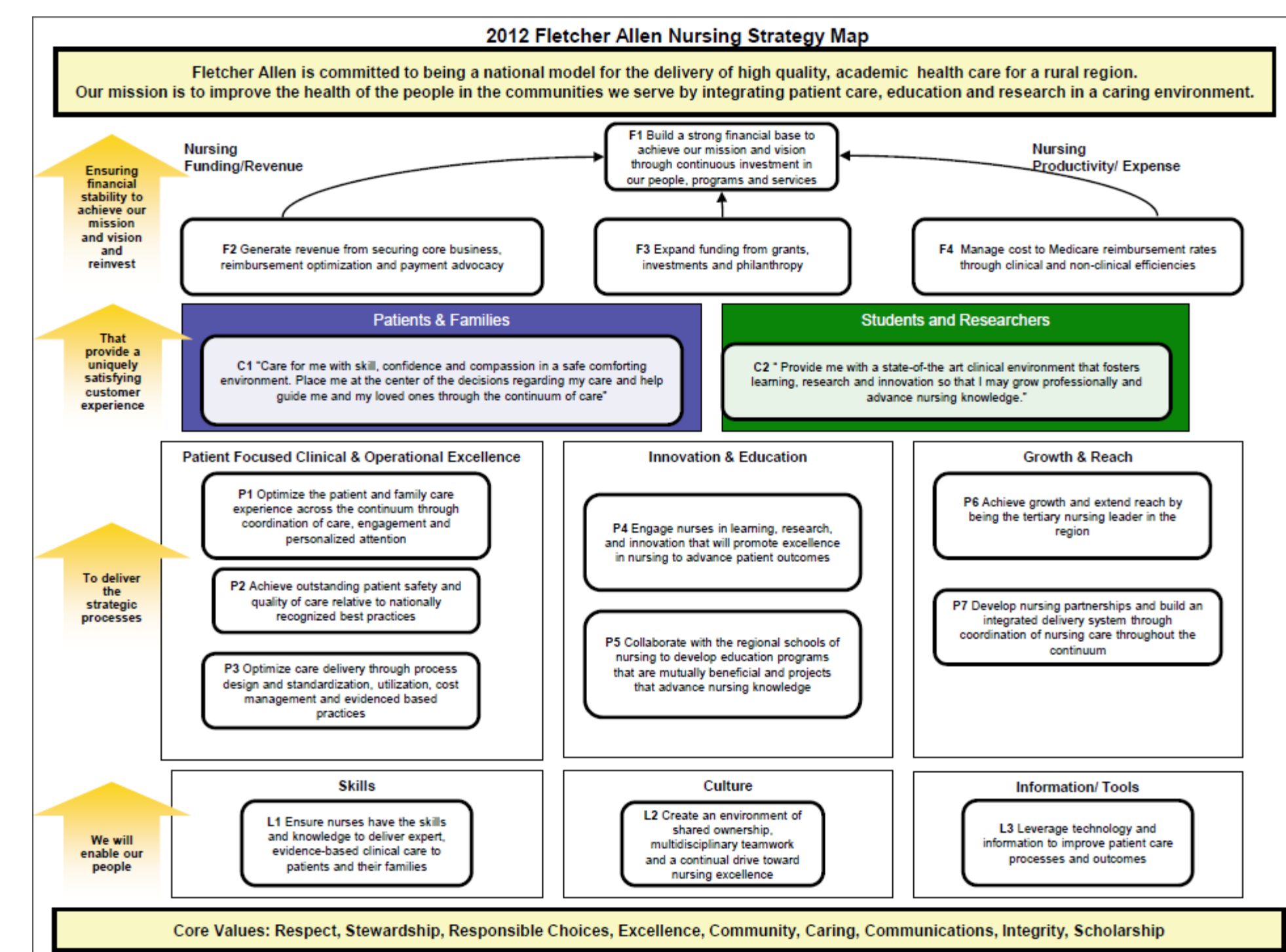
## Significance

NDNQI RN Survey data provides a valuable 'barometer' for assessing the Clinical Practice Environment (CPE). The CPE is linked to staff satisfaction & patient outcomes. The PES scale element of the NDNQI RN Survey specifically provides data reflecting staff perceptions of the CPE.

Easily understandable data for busy nurse leaders facilitates comprehension of data measures, thus increasing the likelihood of translation into action.

## Significance Unique to Fletcher Allen

**July 2011:** The Strategy Map Team presents the completed Nursing Strategy Map for 2012 and the PES Scale was identified as Progress Metric for L2: *Create an environment of shared ownership, multidisciplinary teamwork and/or a continual drive toward nursing excellence.*



## Strategy and Implementation

### Grid Design

- The innovation is a visual graph made using/Excel spreadsheet, featuring the PES domain dataset
- Color is used to add visual appeal and afford an 'at a glance' understanding of the data
- Green shading** indicates data at or above the *median for academic medical centers*
- Red shading** indicates data that *falls below the median for academic medical centers*

### Grid Use: How to use

- Viewing the grid from L to R, highlights levels of performance on PES domain categories using a color coding pattern
- Column indicates % participation suggesting the strength behind the data

## Results: Feedback from Users

- The grid....
- provides a quick overview of the PES results from individual and multiple units without having to page through lengthy reports.
  - stimulates unprecedented interest in the survey results from leaders, especially those in outpatient and interventional areas.
  - stimulates conversations amongst leaders about what the results mean
  - allows for easy comparison of results from inpatient and outpatient settings

## Implications for Practice

### Using Data to Drive Improvement

- Improved practice environments offer myriad benefits for staff and patients
- PES data offers targeted insights into areas of opportunity
- NDNQI RN Survey, PES Scale can be compared with other Organizational Surveys, such as the Employee Opinion Survey, in some cases validating findings, in other cases, offering a different, and valuable perspective
- From Director Perspective: Allows for visualization of multiple units at a glance.
- From CNO, VP of Nursing Perspective, provides unified view of all units,
- Nursing Strategic Plan: Adopted PES Scale as measure to track Nursing Climate

## Grid Design

Unit	NDNQI RN SURVEY 2011 --- Practice Environment Scale												
	1. Staff response rate	2. Nurse manager/leader	3. Nurse manager/leader	4. Nurse manager/leader	5. Nurse manager/leader	6. Nurse manager/leader	7. Nurse manager/leader	8. Nurse manager/leader	9. Nurse manager/leader	10. Nurse manager/leader			
Baird 3	100	2.56	<25th	2.89	<25th	2.3	<10th	2.66	>50th	2.94	>50th	2.67	<25th
Baird 4	57	2.39	<10th	2.79	<10th	2.62	<25th	2.16	<25th	2.82	<50th	2.56	10th
Baird 5	94	2.7	<25th	2.97	>25th	2.79	<50th	2.88	>50th	3.19	>50th	2.9	<50th
Baird 6	100	2.46	<10th	2.84	<10th	2.71	<50th	2.88	<50th	2.91	<50th	2.66	<25th
McClure 3	91	2.25	<10th	2.79	<25th	2.66	<25th	2.44	<25th	2.77	<25th	2.58	<25th
McClure 4	111	2.21	<10th	2.71	<10th	2.97	<75th	2.33	<25th	2.97	<50th	2.64	<25th
McClure 5	99	2.55	<25th	2.86	<25th	3.02	<75th	2.66	<75th	2.81	<50th	2.78	<50th
McClure 6	100	2.56	<25th	2.98	<50th	2.46	<25th	2.39	<50th	2.89	<50th	2.65	<25th
M7 Birthing	72	2.78	<50th	3.07	>75th	3.51	>90th	3.52	>90th	3.21	<50th	3.22	<50th
M7 NICU	55	2.61	<25th	2.96	<50th	2.85	>50th	2.92	<75th	3.13	<75th	2.89	<50th
Shep 3N	97	2.58	<25th	2.82	<50th	3.06	<75th	2.18	<25th	2.76	<25th	2.68	>50th
Shep 4	56	2.47	<25th	2.83	<25th	2.44	<25th	2.57	>50th	2.93	<50th	2.65	<25th
Shep 5	53	2.21	<10th	2.87	<25th	2.58	<25th	2.13	<10th	2.63	<25th	2.48	<10th
ED	100	2.58	<25th	2.82	<50th	3.46	>90th	2.68	<75th	3.33	<75th	2.97	<75th
Rehab	47	2.42	<10th	2.85	<25th	2.39	<25th	2.31	<25th	3.14	<75th	2.62	<25th
Inpt Psych	52	2.60	<50th	2.79	<25th	2.74	<50th	3.10	>50th	2.87	<50th	2.82	<50th
Resource Nurses	76	2.21	NA	2.54	NA	2.48	NA	2.23	NA	2.54	NA	2.4	NA
Dialysis/Shep 4	78	2.57	<25th	2.90	<25th	3.43	>90th	2.96	<75th	2.79	<75th	3.03	>50th
FACT	89	2.68	NA	3.01	NA	2.98	NA	3.16	NA	3.26	NA	3.01	NA
Case Management	96	2.84	NA	2.87	NA	3.16	NA	2.72	NA	3.16	NA	2.95	NA
Patient Placement	109	2.28	NA	2.58	NA	2.68	NA	2.61	NA	2.89	NA	2.61	NA
Service	77	2.39	<25th	2.73	<25th	2.78	>50th	2.93	<75th	2.73	<25th	2.71	<50th
PACU	46	2.35	<25th	2.78	<25th	2.96	<75th	2.46	<25th	2.97	<75th	2.70	<50th
OR MCHV	105	2.28	<25th	2.86	<50th	2.93	<75th	3.03	>50th	3.22	>50th	2.86	<75th
OR FAH	105	2.28	<25th	2.86	<50th	2.93	<75th	3.03	>50th	3.22	>50th	2.86	<75th
Surgical Procedures	100	1.92	NA	2.6	NA	2.33	NA	1.94	NA	2.83	NA	2.32	NA
PPR	110	2.48	<25th	2.74	<25th	3.00	<75th	2.80	<75th	3.15	<50th	2.83	<50th
pre-op	67	2.43	<25th	2.75	<25th	2.76	<50th	2.31	<25th	2.26	<10th	2.50	<25th
Cath /EP lab	100	2.53	<25th	2.94	<50th	3.19	<75th	3.26	>50th	3.29	>50th	3.04	<75th
Baird 7	100	2.54	NA	2.97	NA	3.27	NA	3.21	NA	3.22	NA	3.04	NA
Cancer Services	100	2.74	<50th	3.11	>75th	3.33	>90th	2.64	<25th	3.29	<75th	3.02	<75th
Hem/Onc	86	2.81	<50th	3.00	<50th	3.06	<75th	3.18	>50th	3.05	<50th	3.02	<75th
ASC/ENDO	67	2.46	<25th	2.74	<25th	2.97	<75th	2.70	<50th	3.31	>90th	2.84	<50th
FAH WICC	53	2.33	<10th	2.58	<10th	2.80	<50th	2.25	<10th	3.33	>90th	2.66	<25th
Family Medicine - Medical Group	78	2.78	>50th	2.92	<50th	3.18	>50th	2.96	>75th	3.39	>90th	3.05	>75th
childrens medical group	92	2.49	<25th	3.05	<75th	3.37	>90th	3.31	>90th	3.11	<75th	3.07	<75th
Cardiology	67	2.33	<10th	2.89	<50th	2.47	<10th	3.07	>50th	3.10	<50th	2.77	<25th
Outpatient	130	2.87	<75th	3.18	>50th	3.57	>90th	3.12	>50th	3.26	<75th	3.20	>50th
Cardiovascular Medicine - Medical Group	56	2.63	<50th	2.88	<50th	3.03	<75th	2.79	<75th	3.33	>90th	2.93	<75th
Neurology medical group	50	2.40	<25th	2.51	<10th	2.54	<25th	2.34	<25th	3.26	<75th	2.61	<10th
Radiology - Radiation Oncology	88	2.41	<25th	2.98	<50th	2.71	<25th	3.07	<75th	3.18	<75th	2.87	<50th
IV Nurses - Vascular Access	25	2.22	NA	2.77	NA	2.35	NA	2.45	NA	2.67	NA	2.49	NA
Surgery Medical Group	55	2.35	10th	2.70	<25th	2.50	10th	2.70	<50th	3.04	<50th	2.66	<25th
PEDS-UHC campus	78	2.77	<50th	2.76	<25th	2.97	<75th	2.39	<25th	3.38	>90th	2.86	<50th
Womens Medical Group	59	2.23	<10th	2.46	<10th	2.44	<10th	2.10	<10th	2.90	<25th	2.43	<10th
Pain Medicine - Tilley Drive	100	2.4	10th	2.61	<10th	2.63	<25th	2.93	>50th	2.90	>50th	2.69	<25th
PCIM Medical Essex, Williston, Burlington	59	2.58	<25th	2.76	<25th	2.84	<50th	2.35	<25th	3.20	<75th	2.75	<25th
Renal transplant services	79	2.64	<50th	2.83	<25th	2.83	<50th	2.84	<50th	3.05	<50th	2.84	<50th
Fletcher Allen Roll Up	77	2.47	<25th	2.87	<25th	2.84	<50th	2.68	<50th	3.05	<75th	2.77	<50th

**LEGEND**

- 1. A supervisory staff that is supportive of the nurses.
- 2. Supervisors use mistakes as learning opportunities, not criticism.
- 3. A nurse manager who is a good manager and leader.
- 4. A nurse manager who is a good manager and leader.
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- 9. A nurse manager who is a good manager and leader.
- 10. A nurse manager who is a good manager and leader.

**Staffing and Resource Adequacy**

1. Adequate staff resources allow me to spend time with my patients.
2. Enough time and opportunity to discuss patient care problems with other nurses.
3. A nurse manager who is a good manager and leader.
4. Enough staff to get the work done.

**Collegial Nurse-Physician Relations**

1. Physicians and nurses have good working relationships.
2. A lot of team work between nurses and physicians.
3. Collaboration (joint practice) between nurses and physicians.

## Grid Design and Evolution: Details

- Initial design presented to Nursing Directors for feedback.
- Requests for grid enhancement included:
- Add % response rate column
  - Add text boxes with PES domain legends on grid
  - Create custom grids for inpatient and outpatient areas as needed for presentations

## References

- 1) NDNQI Web site [www.nursingquality.org](http://www.nursingquality.org)
- 2) Donaldson, et al., *Leveraging nurse-related dashboard benchmarks to expedite performance improvement and document excellence*, JONA, Vol 35, No.4 April 2005
- 3) Harvey, G., *Microsoft Excel 2010 All-in-one-for Dummies*, Wiley Publishing Inc. 2010

## Acknowledgements

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