

An Innovative Approach to Fiscal Stewardship:

CNO and Clinical Nurses Collaborating To Improve Staffing

Mary Del Guidice, MSN, BS, RN, CENP

Chief Nursing Officer

Penn Medicine, Pennsylvania Hospital

Assistant Dean, Clinical Practice

University of Pennsylvania, School of Nursing

Kathryn Farrell, MSN, RN

Professional Practice Implementation Consultant

Penn Medicine, Pennsylvania Hospital

Clinical Associate

University of Pennsylvania, School of Nursing



Penn Medicine

Objectives

- ◆ **Discuss the importance of clinical nurse input and participation in the budget process.**
- ◆ **Define strategies to successfully acquire nursing resources.**
- ◆ **Review the outcomes from the acquisition of resources.**



ABOUT PENN MEDICINE

The University of Pennsylvania Health System was created in 1993 and consists of five hospitals (Hospital of the University of Pennsylvania, Penn Presbyterian Medical Center, Pennsylvania Hospital, Chester County Hospital, Lancaster General Hospital), a faculty practice plan, a primary care provider network, multi-specialty satellite facilities, home care, hospice and a nursing home.

Licensed Beds	1,893
Total Employees	24,293
Total Revenue	\$4.9 Billion
Admissions	83,994
Outpatient Visits	2,837,864
Physicians	2,846
Nurses	5,563

Pennsylvania Hospital- The Nation's First



- ◆ The Nation's first hospital founded by Benjamin Franklin and Dr. Thomas Bond.
- ◆ 520-bed acute care facility that provides a full range of diagnostic and therapeutic medical services.
- ◆ 2,633 Total Employees
- ◆ 980 Registered Nurses
- ◆ Over 29,000 inpatient admissions and 115,000 outpatient visits each year, including over 4,708 births.
- ◆ Expanding programs for cancer, cardiac care, bloodless medicine and surgery.

Background

- ◆ Hospital was in the midst of a financial turnaround
- ◆ Nurse Staffing and Nurse Sensitive Indicators underperformed compared to the benchmark
- ◆ The current budget process did not include clinical nurse involvement

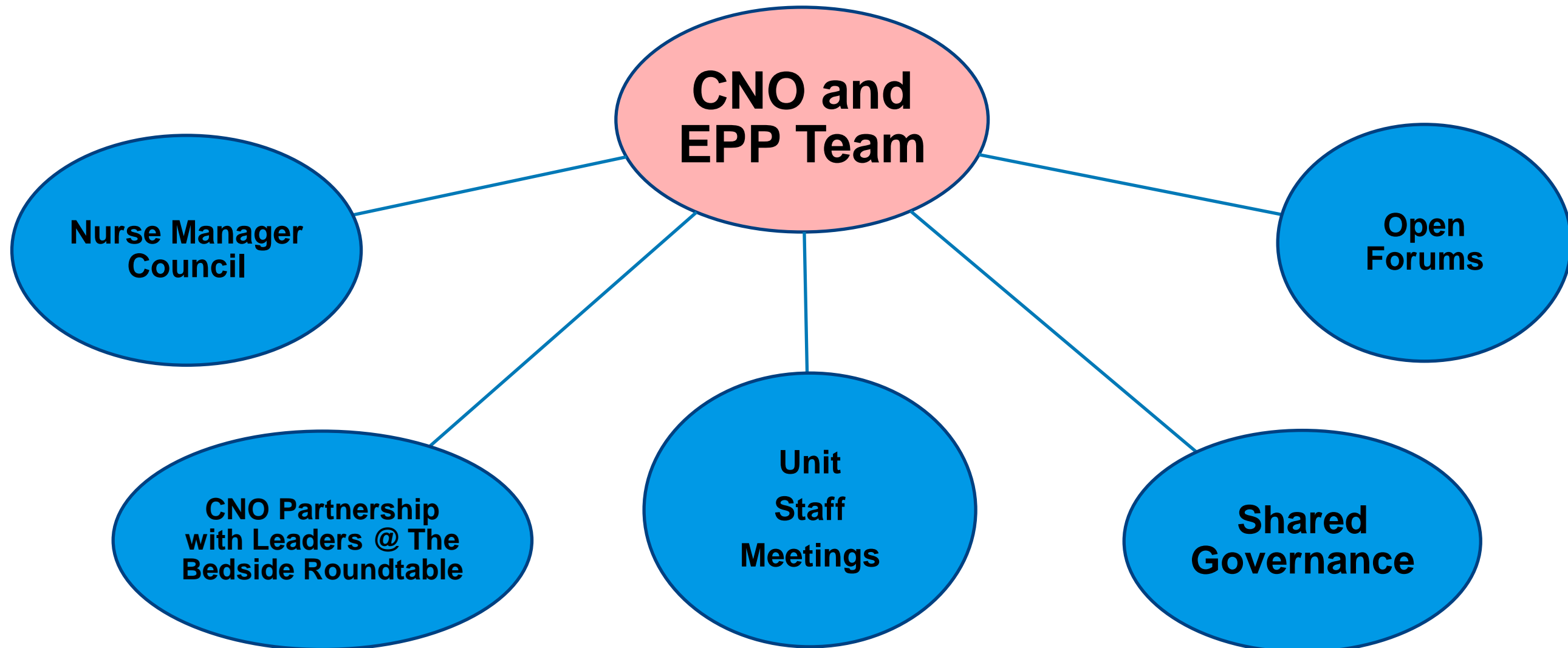


Solution

- ◆ **Development of an Exemplary Professional Practice (EPP) Team including Clinical Nurses as a Framework for Prioritizing and Advocating for Resources**
 - Purpose of Team- To Create a Multiyear Staffing Effective Workforce Plan that supports the achievement of excellence in delivering high quality care
 - ◆ **Team Included**: Chief Nursing Officer, Clinical Nurses, the Magnet Program Director, Director of Nursing Professional Practice, Education and Quality, the Director of Research and Evidence Based Practice, Clinical Directors, Nurse Managers, Chief Financial Officer, Finance Department, Human Resources and a Nurse Recruiter

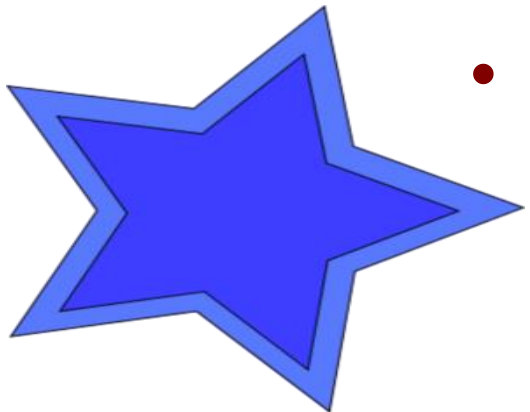
Innovation

- ◆ An EPP team with clinical nurse involvement uses an evidence based framework to improve quality of care and the work environment by improving nurse staffing.



Review of Trended Data

- ◆ **Weekly EPP team meetings**
- ◆ **Subgroups developed to explore hospital's nurse staffing related to benchmark data**
 - ADT and National Advisory Board
 - Action OI
 - NDNQI (Staffing and Nurse Sensitive Indicators)
 - *Best demonstrated the need for additional resources to improve outcomes*



Staffing Effectiveness Tool

- ◆ **Developed a report comparing RN staffing to patient outcomes, patient satisfaction and RN satisfaction**
- ◆ **Active document updated quarterly**
- ◆ **Proved there was correlations between staffing and outcomes**
- ◆ **Foundation of team's work**

Staffing Effectiveness Tool

Pennsylvania Hospital Report on Staffing Effectiveness

Unit	Avg Total Nursing HPPD	BM	Quartile Rank	SD	Comm with RN (% Rank)	Falls	BM	Quartile Rank	SD	HAPU	BM	Quartile Rank	SD	Restraints	BM	Quartile Rank	SD	Injury Assaults	BM	Quartile Rank	SD	CAUTI	BM	Quartile Rank	CLABSI	BM	Quartile Rank	SD	PIV Infiltrate	BM	Quartile Rank	SD	Pain AIR	BM	Quartile Rank	SD		
Critical Care	15.17	17	25-50th%	3.06		1.45	1.18	50-75th%	1.49	13.39	12.9	50-75th%	13.23	8.69	16.3	25-50th%	17.45					2.19	2.4	50-75th%	1.44	1.2	50-75th%											
ICCU	11.55	10.5	50-75th%	2.3		3.25	3.09	50th%	2.32	18.99	8.6	75-90th%	9.81	5.3	1.79	75-90th%	4.97					2.13	2.4	50-75th%	2.7	1.2	75-90th%											
Med Surg Combined	7.58	8.87	10-25th%	1.98	14%	3.77	3.42	50-75th%	2.18	4.39	6.43	25-50th%	7.16									2	1.4	50-75th%	0.85	0.8	50-75th%											
4 Cathcart	7.7	8.87	10-25th%	1.98	10%	2.47	3.42	25-50th%	2.18	1.76	6.43	25-50th%	7.16	0.89	0.65	75-90th%	2.24					1.96	1.4	50-75th%	1.65	0.8	75-90th%											
5 Cathcart	7.66	8.87	10-25th%	1.98	3%	3.92	3.42	50-75th%	2.18	7.68	6.43	50-75th%	7.16	0	0.65	10th%	2.24					2.9	1.4	>75th%	0.75	0.8	50-75th%											
6 Cathcart	7.38	8.87	10-25th%	1.98	22%	4.03	3.42	50-75th%	2.18	8.97	6.43	50-75th%	7.16	0	0.65	10th%	2.24					2.03	1.4	50-75th%	1.13	0.8	75-90th%											
6 Schiedt	10.42	8.87	75-90th%	1.98	89%	4.44	3.42	50-75th%	2.18	3.43	6.43	25-50th%	7.16	0	0.65	10th%	2.24					1.87	1.4	50-75th%	0.39	0.8	50-75th%											
7 Cathcart	7.33	8.87	10-25th%	1.98	14%	4.94	3.42	75-90th%	2.18	4.71	6.43	25-50th%	7.16	2.17	0.65	75-90th%	2.24					1.7	1.4	50-75th%	0.33	0.8	50-75th%											
ICN	10	12.1	10-25th%	2.26																								0	1.19	90th%	4.39	100	97.1	90th%	7.37			
4 Spruce	5.18	7.33	10-25th%	2.07		3.51	3.91	25-50th%	3.05					0	0.26	10th%	1.97	0.68	0.79	50-75th%	1.5																	
6 Spruce	5.72	8.51	<10th%	2.1		6.57	9.39	25-50th%	6.57					0	0.29	10th%	1.58	0.43	1.17	50-75th%	2.75																	

Strategic Partnership

- ◆ **Partnership at the Senior Leadership and Board Room Level**
- ◆ **Organization's Financial State of Health:**
 - Budgeted to lose **\$23,000,000**
- ◆ **EPP Team Request To Support Patient Care:**
 - **\$4,000,000**

From The Bedside to The Boardroom

◆ Nurse Presentations to Hospital Executives

- Nursing Research scholars co-authored a Research Brief with Dr. Linda Aiken entitled *“Economic Value Of Improving Nurse Staffing”*
- Professional Practice Implementation Consultant presented *“Nursing Quality: The Value Equation”*



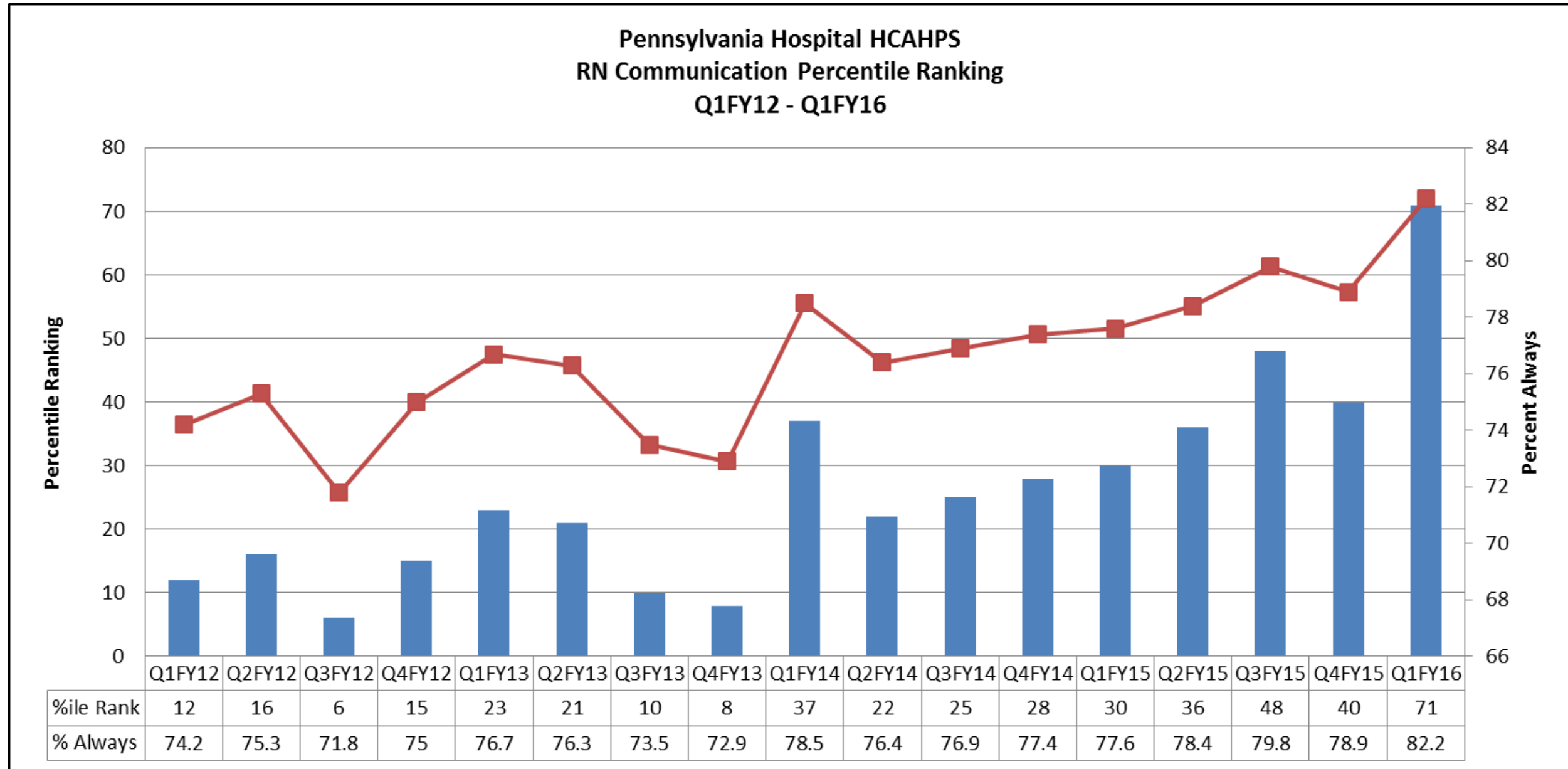
Acquisition of Nursing Resources

47.81 RN and PCT FTEs added

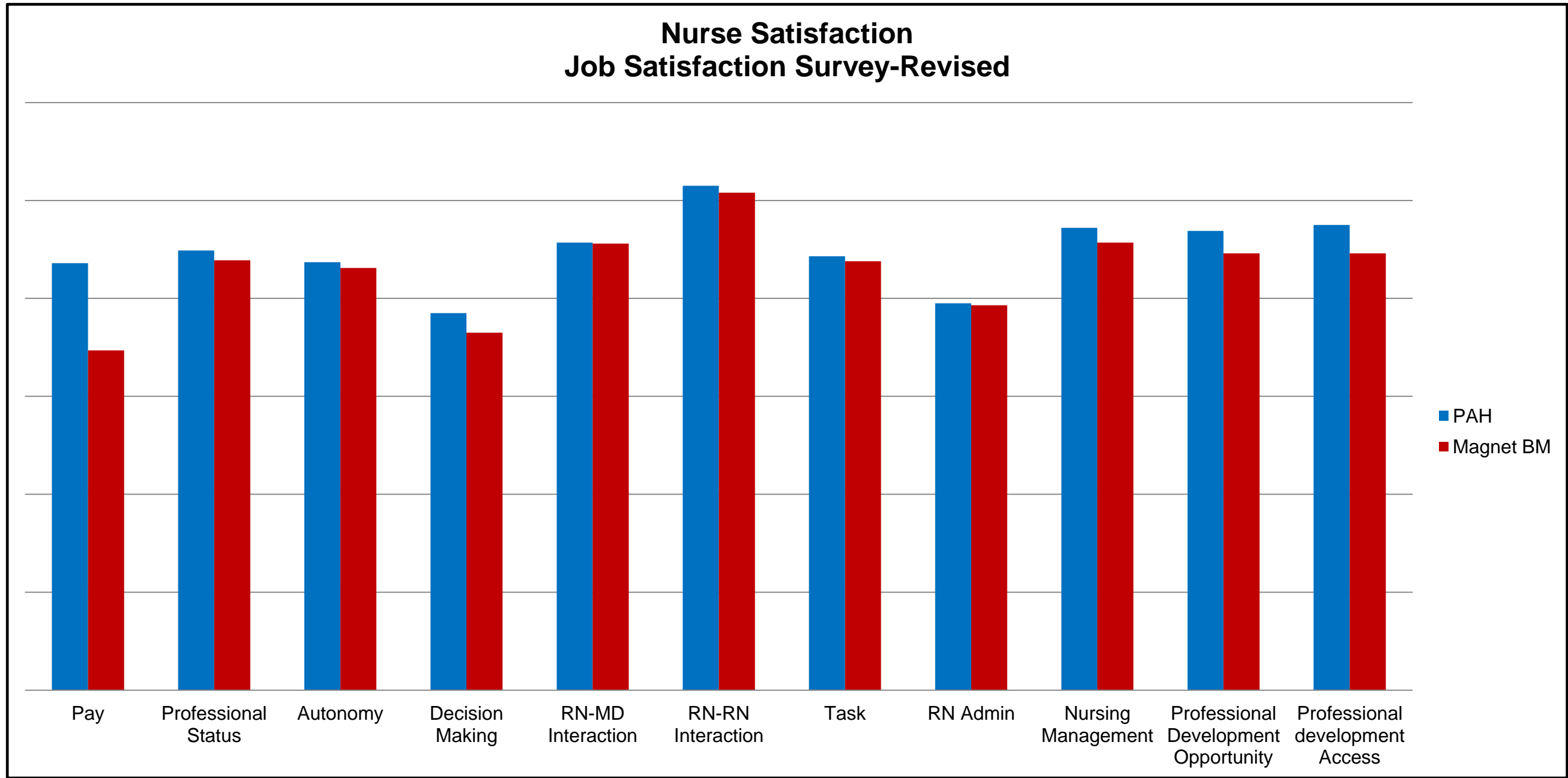
- ◆ Improved RN Satisfaction
- ◆ Improved Patient Satisfaction
- ◆ Improved Nurse Sensitive Indicators
 - *Falls with Injury*
 - *HAPU*
 - *ANCC Magnet Recognition*



Outcomes - Patient Satisfaction



Outcomes - Nurse Satisfaction



Sharing Knowledge of the Budget Process

- ◆ **Annual Budget Conference, “Nurses Leading Change: Making Cents of The Budget Process”**
 - ◆ **Co-led by CNO and Clinical Nurse from EPP Team**
 - **Inaugural Conference**- Provide nurses with knowledge about how resources are allocated in the hospital
 - **2nd Annual Conference**- Sharing Outcomes of the Work of the EPP team

Conference Attendees- Clinical Nurses, Nurse Leaders, Inter-professional Staff, Senior and Nurse Leadership from across the Health System, and faculty and students from the School of Nursing



Thoughts from the Bedside



Moving Forward:

Continue to Keep the
MAIN THING the **MAIN THING!**

- ◆ **EPP team continues to meet with clinical nurses from each division**
- ◆ **Embedded into culture**
- ◆ **Evolving process to meet the needs of the hospital as healthcare demands advance over time**

Contact Information

Mary Del Guidice

Mary.DelGuidice@uphs.upenn.edu

Kathryn Farrell

Kathryn.Farrell@uphs.upenn.edu