Edward’s Problem:
- Nurse manager integrating multiple data sources
- No consistent comprehensive vehicle to communicate nursing sensitive data to the unit managers and staff
- Nurses manager data sources included separate reports for:
  - Patient Satisfaction
  - NDNQI
  - JCAHO Core Measures
  - Medtech Reports
  - HR Indicator Reports
  - Department Specific Indicator/Audit Data

Edward’s Solution:
- Developed unit specific Nursing Scorecards for all areas of the hospital that deliver nursing care.
- Scorecard Measures:
  - All Scorecards include:
    - Patient Satisfaction
    - Employee Satisfaction
    - Employee Turnover
  - Examples of individualized unit specific measures:
    - Patient Falls
    - Pressure Ulcers
    - Nursing Hours per Patient Day
    - Hand Hygiene
    - Central Line Infection Rates
    - Ventilator Associated Pneumonia Rates
    - Influenza Vaccination Rate
    - Department Specific Turn Around Times
    - Reversal of Procedural Sedation

Nursing Scorecard Distribution:
- Simultaneously allows nursing sensitive measurement data distribution to:
  - Vice President and Chief Nursing Officer
  - Directors
  - Managers
  - Staff Nurses
  - Nursing Quality Council Members
  - Unit Based Quality Council Members

Satisfaction Reveals Nursing Scorecards are Making the Grade!
- "The Nursing Scorecard gives the manager and staff information about what we do well and where we have opportunities for improvements.
- "I like the Nursing Scorecard because it gives you a comprehensive look at what is going on in the unit. You can see unit strengths and weaknesses without going through multiple reports.
- "It is very nice to have all of the unit measurement data in one place."

Nursing scorecard data reveal PI opportunities
- Data monitors include:
  - PCT Spectra Link phone number made available to the patients and encouraged to call for ambulation assistance
  - Use of gait belts, by all staff, for high fall risk patients when out of bed

MSU began a unit based falls reduction PI project in March, 2006. Patient fall reduction initiatives included:
- 70% of the falls were preventable
- "The Nursing Scorecard gives you a comprehensive look at our patients. It gives you the data to make informed decisions that improve patient care and safety."

Fall data, including both fall rates as well as compliance with fall risk reduction measures, is reported to the units on a quarterly basis through the Nursing Scorecard.

Data Monitors include:
- Dedicated Respiratory Therapist
- Alleviate overcrowding through use of an intermediate nursery

Infection rates and hand hygiene compliance shared with the staff through the Nursing Scorecard and at unit meetings.

Re-education on the importance of hand hygiene

Benchmark - NNIS Mean

Benchmark - NDNQI Lower Quartile Cut

Benchmark - iNICQ

Patient Falls per 1,000 patient days

Number of days between MSU patient falls

Mean Falls

Reversal of Procedural Sedation

Central Line Infection Rates

Hand Hygiene

Nursing Hours per Patient Day

Pressure Ulcers

Influenza Vaccination Rate

Ventilator Associated Pneumonia Rates

Fingernail Length

Total NICU Central Line Related Bloodstream Infections

Total NICU Hand Hygiene Compliance

Total NICU Central Line Related Bloodstream Infections - iNICQ

Total NICU Hand Hygiene Compliance - iNICQ

Total NICU Central Line Related Bloodstream Infections - 2Q 02

Total NICU Hand Hygiene Compliance - 2Q 02