

Using Performance Data to Improve Nursing Care: The Care Utilizing Evidence Initiative

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Our Strategic Context

St. Michael's is large and vibrant ...

- St. Michael's Hospital is a large academic health sciences centre fully affiliated with the University of Toronto, Ontario, Canada and is a major tertiary and quaternary referral centre.
 - 465 acute adult inpatient beds
 - 5,392 staff
 - 1,600 nurses
 - 690 physicians
 - 574 volunteers
 - 70,508 emergency visits
 - 30,789 surgical cases
 - 456,071 ambulatory visits
 - 26,725 in-patient visits



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Creating a healthier world, through our culture of caring and discovery

Guided by our:

MISSION AND VALUES

PATIENT DECLARATION

CORPORATE PRINCIPLES

BUILD

quality improvement across all aspects of our work

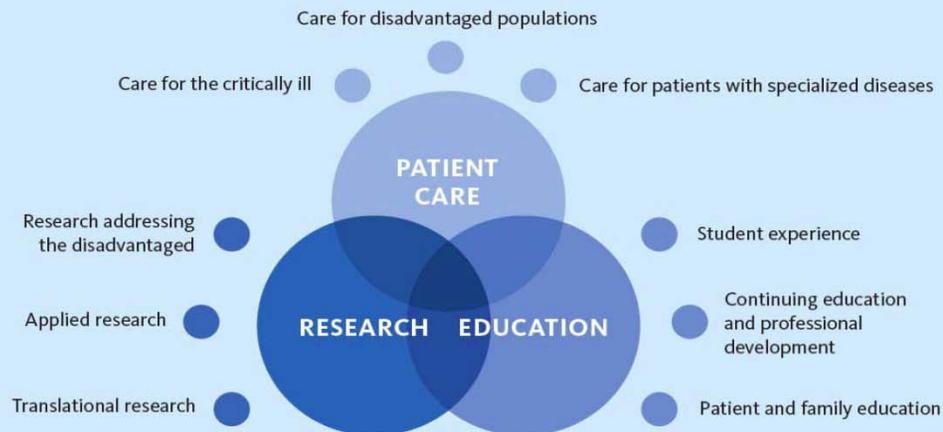
STRENGTHEN

internal collaboration, and community, provincial, national and global partnerships

LEAD

in the development, adoption and evaluation of innovative approaches, by integrating patient care, research and education

CORE BUSINESSES



STRATEGIC ENABLERS

OUR PEOPLE

- Engagement and healthy work environment
- Capacity for change and growth
- Developing people as healthcare leaders
- Culture of team

INFRASTRUCTURE

- Planning
- Information management
- Communication

FUNDRAISING

- Acquire more donors
- Provide more choices
- Grow partnerships for success

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Care Utilizing Evidence: What is it?

An interactive electronic dashboard which:

- displays process and outcome measures linked to nursing Best Practice Guideline (BPG) and Evidence-Based Practice initiatives at the clinical unit level.
- shares narrative accounts from patient satisfaction datasets.
- provides a vehicle for conversation around the impact of BPGs.



Care Utilizing Evidence: Why is this Important?

External Drivers

- Provincial Bill 146 - Excellent Care for All Act.
- Registered Nurses Association of Ontario led Best Practice Guideline Strategy.
- Evidence that :
 - 1) using nursing quality benchmarks or indicators as part of operational dashboards and translating data to drive performance excellence has become a strategic imperative for many organizations.
 - 2) there is a growing movement in Canada towards the use of performance data to monitor and evaluate quality improvement efforts.



Care Utilizing Evidence: Why is this Important?

Internal Drivers

- Strategic focus at St. Michael's with a focus on the following six dimensions as indicators of quality within the organization: Safety, Outcomes, Access, Patient Experience, Equity and Efficiency (SOAPEE).
- Nursing commitment to use data to drive practice and improve the quality of care through:
 - 1) identifying areas for improvement within the organization.
 - 2) measuring improvements.
 - 3) identifying best practices.
 - 4) serving as performance benchmarks.
- Our nurses were asking for data around the quality of care they provide linked to BPGs implemented on their local clinical units.

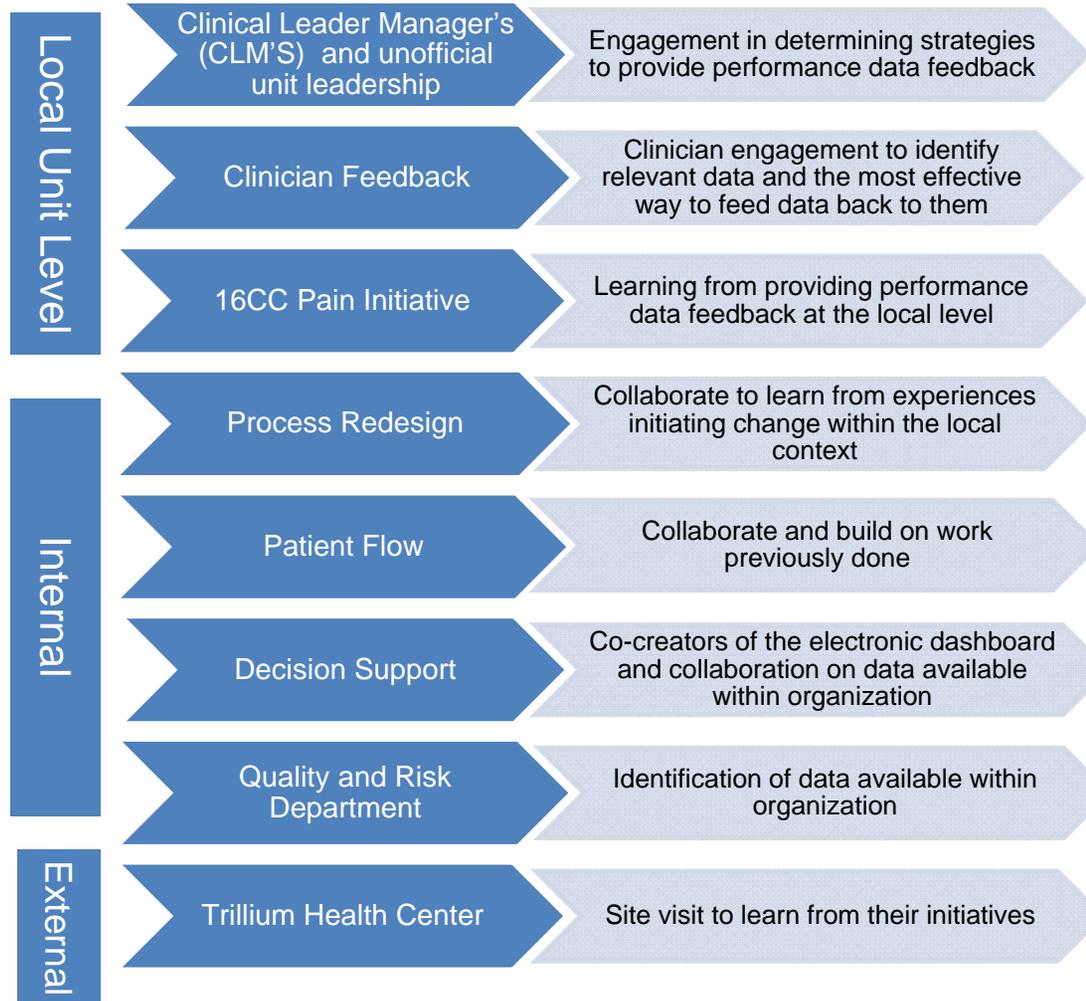


Care Utilizing Evidence: Our Goals

- *Develop capacity* at the unit level to analyze data linked to Best Practice Spotlight Organization (BPSO) BPGs at the unit and corporate level.
- *Embed and sustain best practices* by developing a consistent methodology for rolling out quality improvement initiatives that involves providing data to clinicians to support evidence-based care.



Care Utilizing Evidence: Our Partnerships in Development



Care Utilizing Evidence: Audit and Feedback

Approach for Care Utilizing Evidence Unit Performance Profiling

- The nurse manager and nursing staff on each participating unit were engaged in the development of what measures and data to include, how to best visually display the data, and how to engage staff nurses in using the data on the dashboard.
- Focus on aggregate rather than individual performance data.
- Provide feedback in the context of how each unit is doing to:
 - 1) celebrate successes/achievements.
 - 2) identify areas for improvement/further attention.
- Maintain positive approach using group-based feedback with coaching, education, and team building as the focus.



Care Utilizing Evidence: Pilot Unit Selection

2 pilot units selected based on:

- availability of performance data.
- complete implementation of two Corporate BPGs (Professionalism in Nursing and Establishing Therapeutic Relationships) plus at least one clinical RNAO BPG.
- strong unit leadership.



Care Utilizing Evidence: Co-Creation Strategy

4 week process to build profile and develop customized feedback strategy:

- 1) Engaged with Clinical Leader Manager (CLM) and other official and unofficial unit leadership and presented a menu of indicators related to BPG.
- 2) Provided one week for CLM and team to consider and make selections for clinical dashboard and determine venue for clinician engagement by CUE team.
- 3) Engaged clinicians at multiple points for informal conversation and dashboard review.
- 4) Consolidated all feedback (leadership and clinicians) to finalize dashboard and met with CLM and team members for final review and to provide resource kit for support of roll-out (e.g. definition of indicators).



Care Utilizing Evidence: Clinician Engagement Strategy

1. How is information currently exchanged on the unit?
2. What is the best venue/vehicle for performance data feedback?
 - Staff meetings, Unit Based Council, Kardex, Bullet rounds
3. How do staff want their data feedback presented? How often?
 - Leverage clinical leadership (Nurse Educators, Nurse Practitioners, Advance Practice Nurses, Resource Nurses).
 - Leverage champions – identify opportunities to further develop BPSO Sustainability and Evaluation Fellows to perform “Information Champion” function.
4. What resources are needed on the unit to support leadership?



Care Utilizing Evidence: Our Data

- National Research Corporation (NRC) Picker (patient satisfaction survey)
- Client Satisfaction Questionnaire (CSQ) - 8 (mental health patient satisfaction survey)
- Health Outcomes for Better Information and Care (HOBIC)
- Electronic chart audits
- Auditing activities
- Patient and Nurse surveys
- Event reporting system



BPG - Care Utilizing Evidence

BPG Metrics

Delirium

Bladder
Continence

Continence

Stroke

Pressure
Ulcers

Ulcers

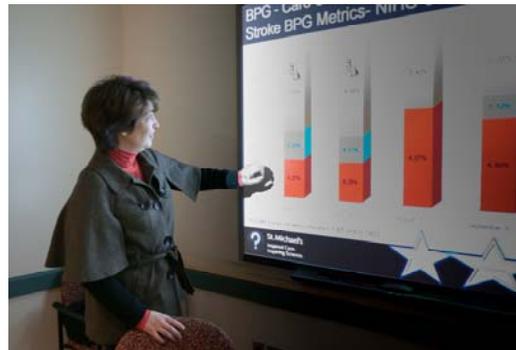
ETR/PIN

Pain

Pain

Care Utilizing Evidence: Current State

- Implementation is complete, a total of 20 in- and out- patient units have a CUE dashboard in their area.
- Based on unit preference dashboard is available on: smart boards, continuous loop monitors, intranet, shared drive, email, or posted on a bulletin board.
- Dashboards are updated by our team every three months.
- Clinician engagement strategies vary by clinical unit.



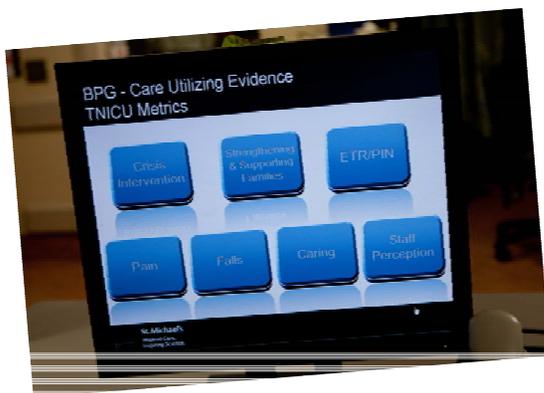
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Care Utilizing Evidence: What We've Heard

- Nurses like the opportunity to hear what their patients are saying about care at St. Michael's.
- Nurses like to see how they are doing and collaboratively determine areas for improvement.
- Despite enthusiasm, some staff and leadership teams report that the dashboards are not being used as often as they were initially.
- Units have been requesting data beyond BPGs implemented locally.



Care Utilizing Evidence: What's Next

- Data pertaining to corporate nursing initiatives (Falls, Delirium, Transfer of Accountability, HOBIC) will be added to the dashboards.
- Members from each implementation team will use the dashboard when sharing metrics with clinical areas.
- BPG metrics related to ongoing sustainability efforts will be captured under a BPG sustainability button.
- A research study will be undertaken Summer 2013 to explore nurses' and managers' perceptions associated with the Care Utilizing Evidence dashboard.

