

ST. MICHAEL'S HOSPITAL



A Nursing Leadership Team's Transformational Experience to Enhance Patient Safety and Work Culture



NLN.ON Nursing Leadership Balancing Opportunities & Realities
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Learning Objectives

To translate knowledge related to:

Our Process

The collaborative, evidence-based process to develop, implement, and evaluate the Nursing Strategic Plan.

Our Nursing Strategic Plan and Key Strategies

- Establishment of a professional nursing practice leadership team;
- Transformation of the nursing governance model;
- Development of an evidence-based professional care delivery model;
- Creation of a research capacity strategy in nursing practice; and
- Design of an accountability framework to measure the achievement of the NSP goals and objectives.



Healthcare Landscape

- Institute of Medicine calling for major health care reform...report on Academic Health Science Centers: Leading change in the 21st Century indicates that fundamental changes are needed in the organization and delivery of health care in order to cross the quality chasm.
 - The national adverse events study by Dr. R. Baker released May 2004 suggests there is work for us to do.
- The 21st century health care system involves providing care that is evidence-based, patient centered and systems oriented that requires new roles and responsibilities for all those involved.



An Integrated Approach





Moving Forward with our Nursing Infrastructure Development: “Closing the Quality Gap”

Nursing Strategic Plan and the infrastructure to support it is critical in reconciling the quality gap through enhancement of nursing professionalism.

- Nursing Leadership plays a critical role to making this happen.
- How do all of our nursing roles work synergistically to develop the clinical scholars of tomorrow.
- Role of infrastructure and nursing leadership roles critical in terms of developing academic clinicians that can meet the challenges of the 21st century Academic Health Science Center.

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2005 Nursing Strategic Plan





SMH 2005 Nursing Strategic Plan

- Boyer's Model of Scholarship provides the foundation of the strategic planning document to achieve excellence in professional nursing services at SMH.
 - Vision
 - Guiding principles
 - 5 Key Strategic Directions
 - Proposed infrastructure (evolution of nursing council)
 - Center for Nursing Excellence, Innovation and Clinical Scholarship
 - Ongoing Accountability Mechanisms

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Nursing Excellence Through Our Culture of Caring, Innovation and Scholarship

1.
Enhancing a
Culture of
Caring

2.
Cultivating a
Culture of
Discovery

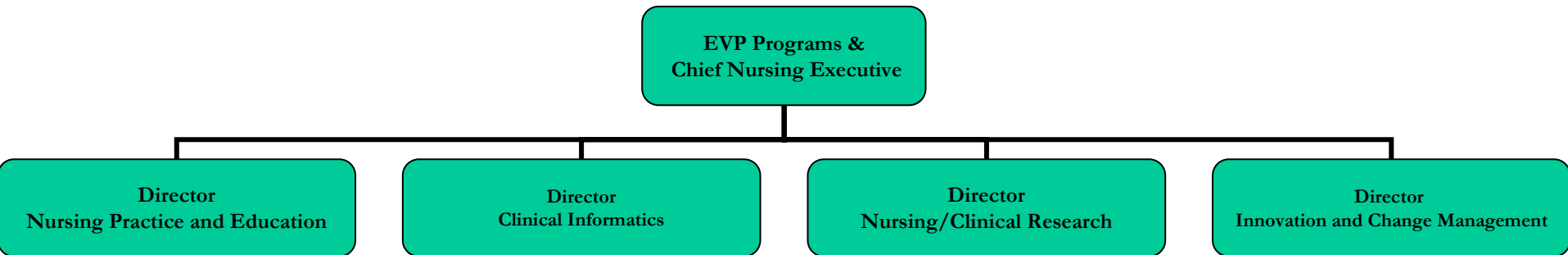
3.
Embedding
Clinical
Scholarship

4.
Creating a
Healthy Work
Culture by
Strengthening
Partnerships

5
Embracing
Technology and
Innovation in
Patient Care



Establishing our Nursing Leadership Team



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Nursing Governance and Accountabilities



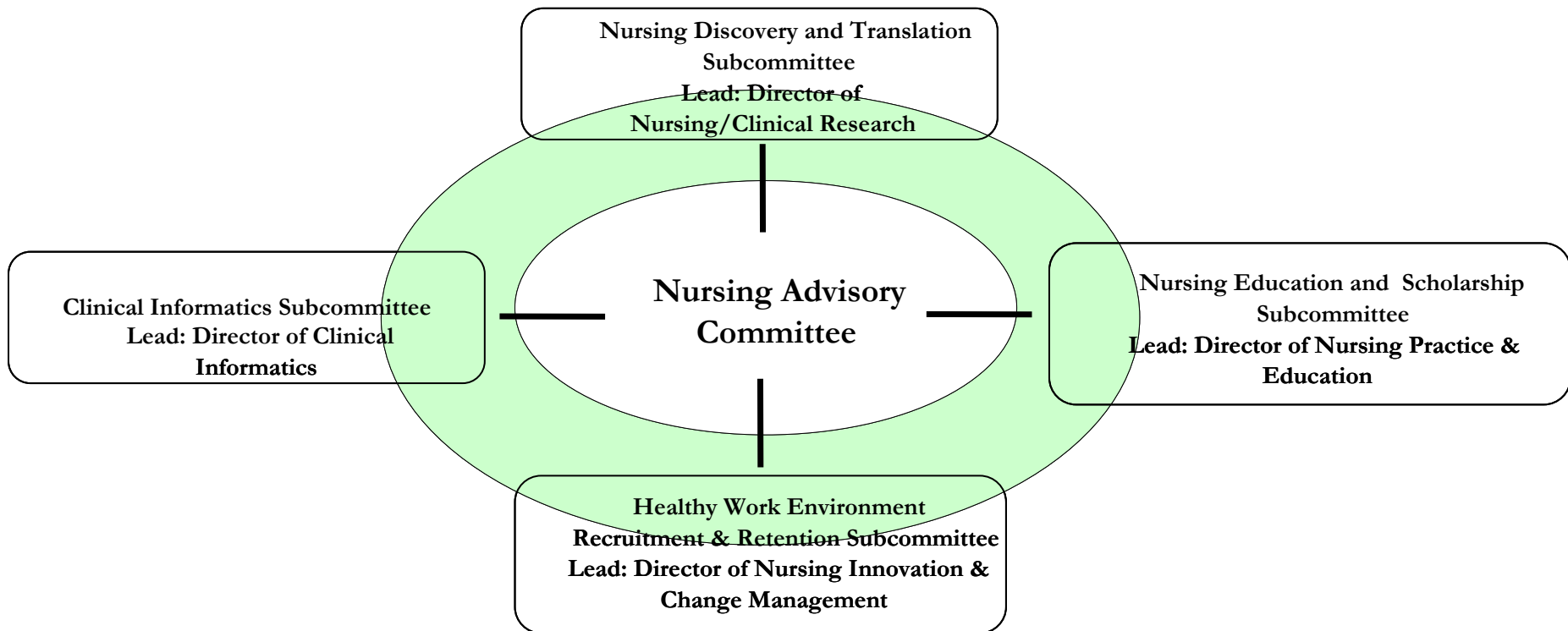


Mandate of Nursing Advisory Committee

- Set the strategic direction for professional nursing care/services at SMH consistent with SMH's mission, vision, values and the strategic directions.
- Oversee the implementation of the nursing strategic plan including the development of accountability mechanisms for ongoing evaluation/monitoring.
- Develop and sustain a nursing professional organizational model.
- Provide a forum for nurses and programs and a mechanism for nurse leaders to:
 - participate in discussion, referral or decision making that impacts specific nursing practice and patient care issues;
 - develop strategies to resolve issues, make recommendations and support implementations where appropriate.



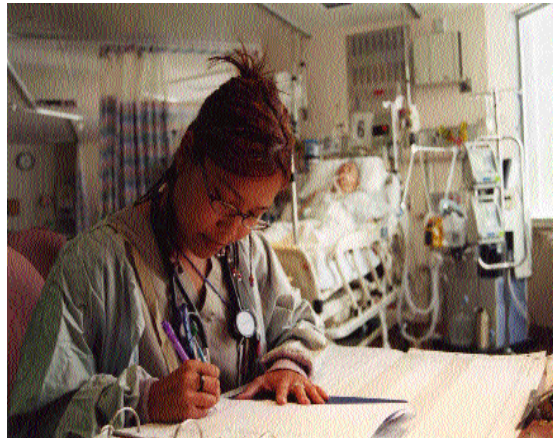
Nursing Advisory Committee Structure



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Professional Care Delivery Model





Our Process

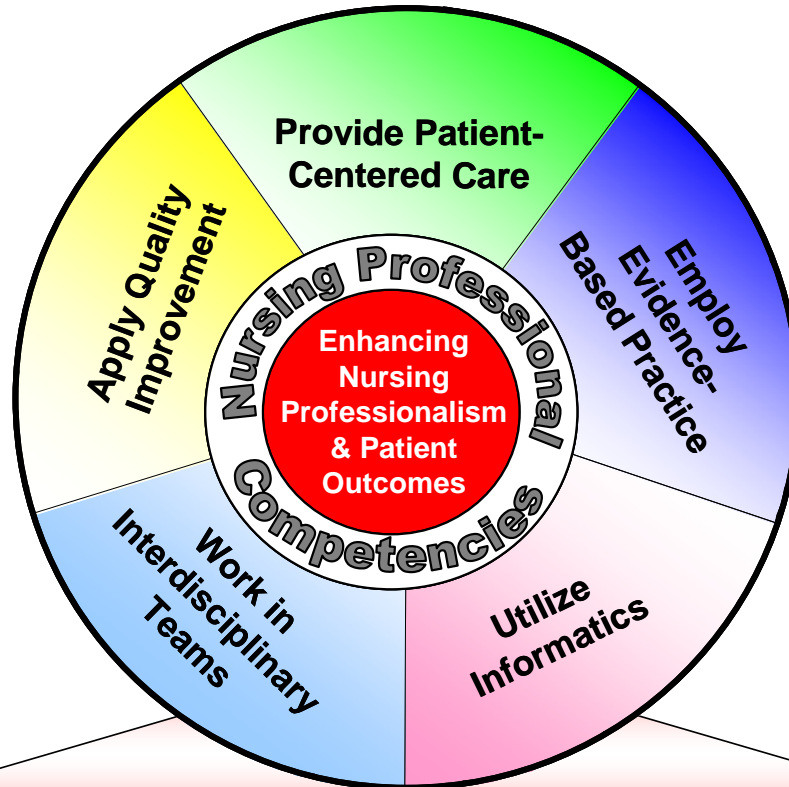
- Building on SWOT Analysis for nursing services and the RNAO (2001) report on the role redesign process, the PCDM task force was created in April 2004.
- During the 2004-2005 year ... extensive review of the scientific literature and organizational benchmarking took place to provide foundational information to guide the design of the model and role alignment.
- In the summer of 2005, two working groups were established to a) design the model and b) make recommendations for the nursing role alignment.
- In May 2006, a validation forum was held with staff/clinical nurses.
- A role review was conducted by RNAO from May – November 2006.
- Final Report with Recommendations March 2007.



SMH – What it is and What it's not

- We have a very different view in the way we want to define nursing and our nursing organizational model at SMH.
- Model of nursing at SMH that defines nursing by what it means to be a professional nurse demonstrating the following professional attributes:
 - functioning within full scope of role and enacting evidence based practice.
 - applying critical thinking in the evaluation and use of evidence at the point of care.
 - participating in inter-professional collaborations in practice, education and research.
 - thinking at a systems level for quality improvement and patient safety.

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GUIDING PRINCIPLES OF NURSING PROFESSIONALISM
Autonomy, Accountability, Scope of Practice & Direct Nursing Care

Enablers								
Culture of Discovery	Interprofessional Collaboration	Performance Planning & Career Development	Utilization & Decision Support	Clinical Education Programs	Knowledge Translation Strategies	Technology Infrastructure	Health Work Environment	Transformational Leadership

Nursing Strategic Plan

Vision: Nursing Excellence through a Culture of Caring, Innovation & Scholarship



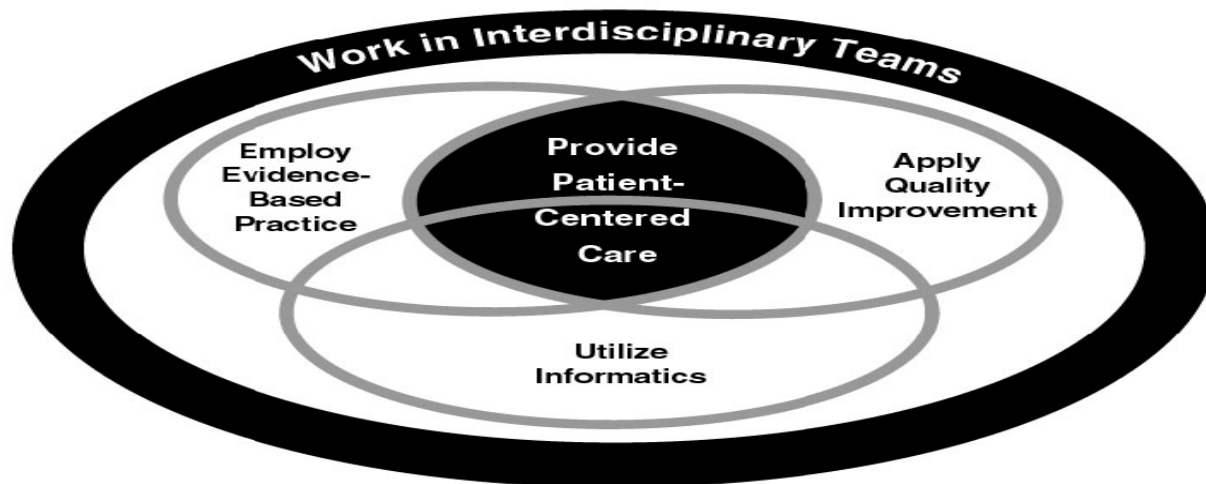
Core Outcomes

- 1) Enhancing nursing professionalism.
- 2) Enhancing patient outcomes.



Nursing Professional Competencies

Overlap of Core Competencies for Health Professionals





Guiding Principles

- 1) **Autonomy**
- 2) **Accountability**
- 3) **Scope of Practice**
- 4) **Direct Nursing Care**



Enablers

- 1) **Culture of Discovery**
- 2) **Interprofessional Collaboration**
- 3) **Performance Planning and Career Development**
- 4) **Utilization and Decision Support**
- 5) **Clinical Education Programs**
- 6) **Knowledge Translation Strategies**
- 7) **Technology Infrastructure**
- 8) **Healthy Work Environments**
- 9) **Transformational Leadership**

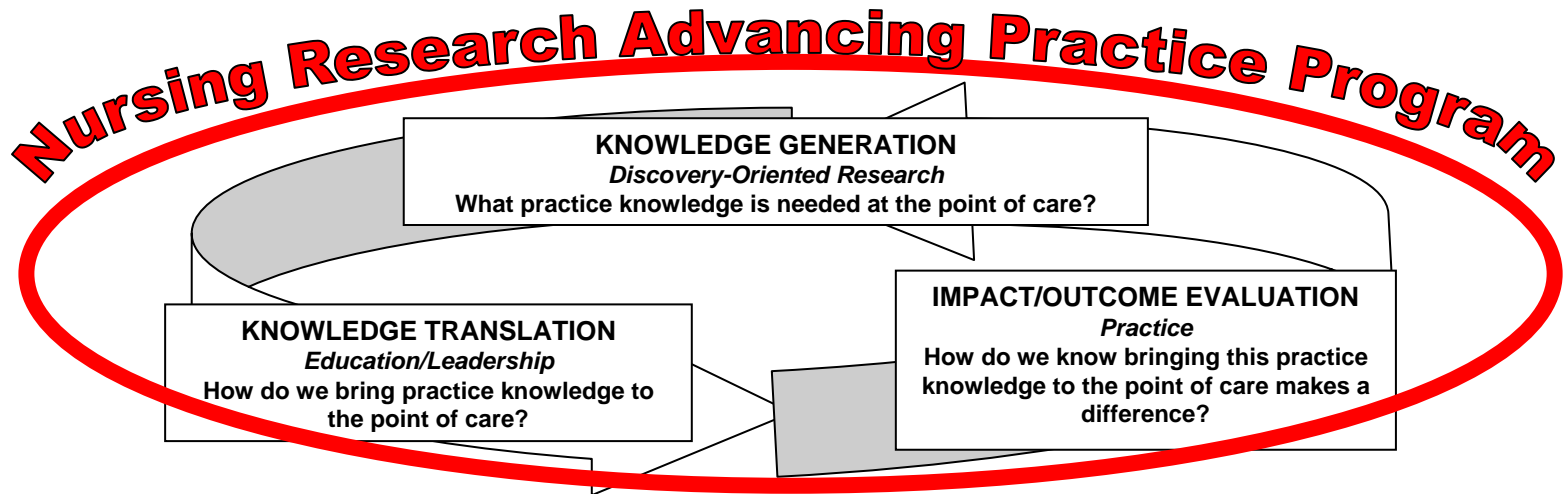


Our Next Steps

- Final Validation of Model and Role Alignment/Redesign Using a Business Case Grounded in The Leading Change Framework* (February – March 2007).
- Finalize and Secure Project Management Infrastructure (Spring 2007).
- Strategic Alignment and Stakeholder Engagement (May – June 2007)
- Develop an evaluation approach for PCDM (May – June 2007 with baseline collected in August 2007).
- PCDM Roll-Out (pilots selected for Fall 2007 and corporate roll-out from 2007 – 2010).



Nursing Research Advancing Practice (RAP) Program



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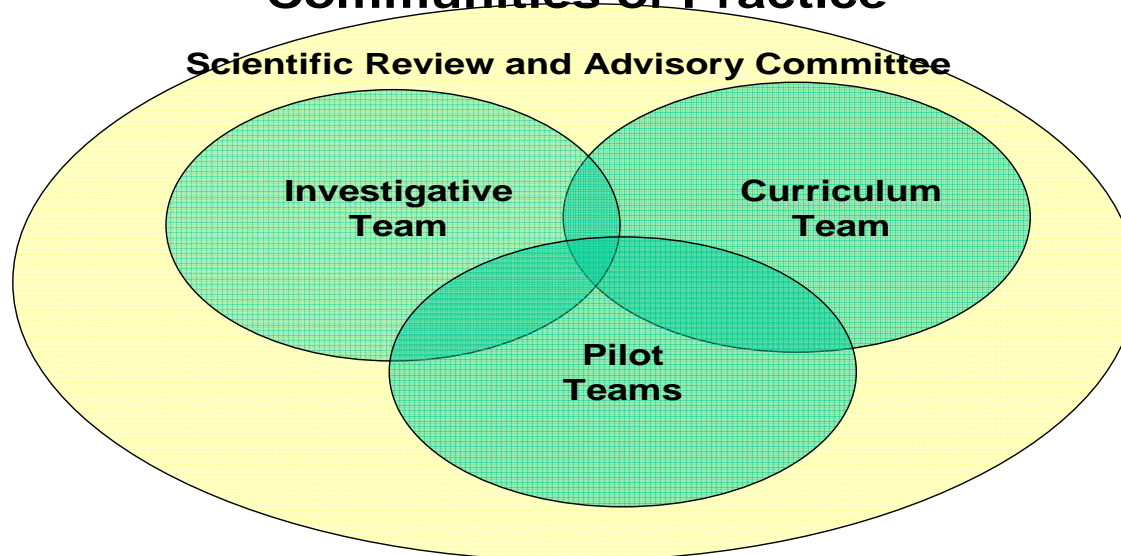


Nursing Research Advancing Practice Program

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Nursing Research Advancing Practice Program Communities of Practice





Nursing RAP Program Integrated Curriculum

Knowledge Translation

Measuring, sharing and translating study findings and lessons learned from innovative ideas in practice.

Sharing and Disseminating Study Findings

Answering & Analyzing Research Questions

Applying Ethical Guidelines

Ensuring protection of study participants through appropriate study design and knowledge management strategies.

Knowledge Management

Knowledge Generation

Identifying Clinically Relevant Questions

Asking questions, exploring issues on how to practice, manage, lead & design health care services

- What might be?
- What should be?
- What will be?

Transforming a Clinically Relevant Question to a Research Question

Examining the literature/ benchmarking/professional experiences/patient preferences for

- What might be?
- What should be?
- What will be?
- the BEST of what is?



Nursing RAP Program: Key Components & Timelines

- | | |
|--|-----------------------|
| ▪ Curriculum Modules | January – March 2007 |
| ▪ Proposal Development | February – April 2007 |
| ▪ Ethics Submission | March – April 2007 |
| ▪ Ethics Review | April – May 2007 |
| ▪ Conduct Research Pilot
(data collection and analysis) | June – December 2007 |
| ▪ Knowledge Translation Strategies | |
| * works in progress (presentations) | Nursing Week May 2007 |
| * completed studies (presentations/publications) | Fall 2007/Winter 2008 |
| | Nursing Week May 2008 |



Nursing Research Advancing Practice Program

- Proposal development and refinement for Scientific Review and REB submission **(creating it!)**
- Research project data collection Summer/Fall 2007 **(doing it!)**
- Research project data analysis Fall 2007 **(analyzing it!)**
- Action plan for knowledge translation **(sharing it!)**



Accountabilities

- **The Nursing Advisory Committee (NAC) oversees the monitoring of the strategic plan for professional nursing services at SMH.**
- **The timeline to achieve the strategic directions spans over 5 years (2005 –2010).**
- **An overall accountability framework for the NSP that includes measures/indicators within a balanced scorecard approach is to be finalized Winter 2007.**



A Proposed Framework to Build a Healthy Work Environment

Building Infrastructure

Focused Analysis

Strategy Development

Implementation & Evaluation

Current Initiatives

Nursing HWE Committee

Nursing New Graduate Internship, Fellowship, & Nursing Enrichment Initiative

Nursing Communications

♥ Nursing BSC

People Strategy – Our Future Stream

Nursing Recognition Awards Program

External Analysis

BPG Integration

Key Insights

Internal Analysis

Future HWE Directions

Develop Options

Objectives

Strategies

Strategic HWE Initiatives

Prioritization

Appropriateness

Feasibility

Develop Action Plans

Prioritize Action Plans

Action Plans

Identify Evaluation Model

Innovation, Change Leadership, & Communication



Drivers for Developing a Nursing BSC

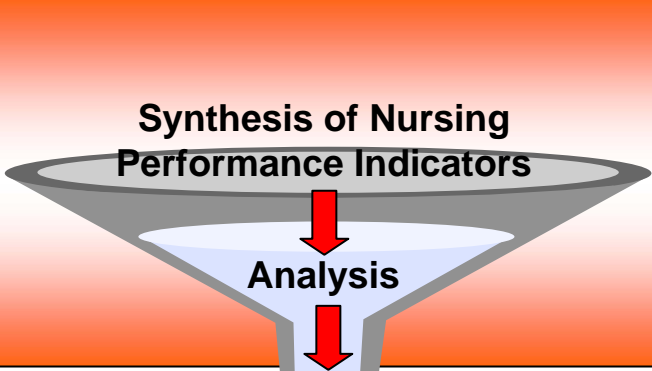
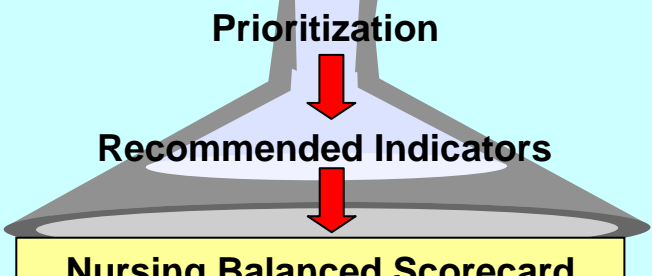
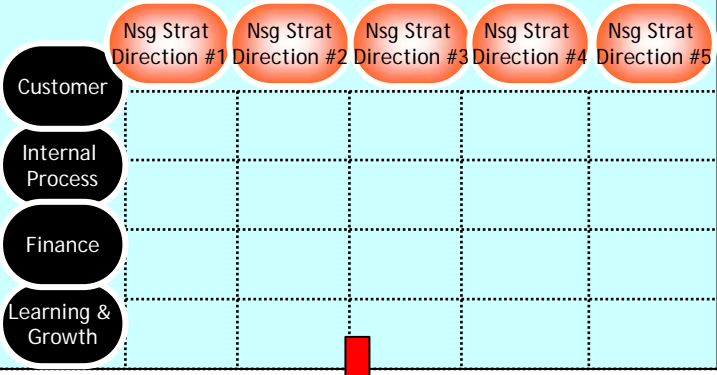

External Environment	SMH Internal Environment
<ul style="list-style-type: none">▪ MOHLTC Hospital Accountability Agreement▪ Nursing Enhancement Funding▪ Provincial Improvement Initiatives - Ontario Ministry Wait List Strategy▪ Hospital Report	<ul style="list-style-type: none">▪ Corporate Strategic Plan 2004 – Reaching New Heights<ul style="list-style-type: none">▪ Corporate Performance Review using the balanced score card approach▪ Corporate quality improvement initiatives▪ 2005 Nursing Strategic Plan & Nursing Accountability Framework<ul style="list-style-type: none">▪ Nursing performance reporting can facilitate the “pulse check” process to move the Strategic Plan forward▪ Evaluation of the Proposed Nursing Professional Care Delivery Model▪ Healthy Human Resources & Nursing Recruitment & Retention▪ Challenges associated with historical data reporting on select nursing indicators



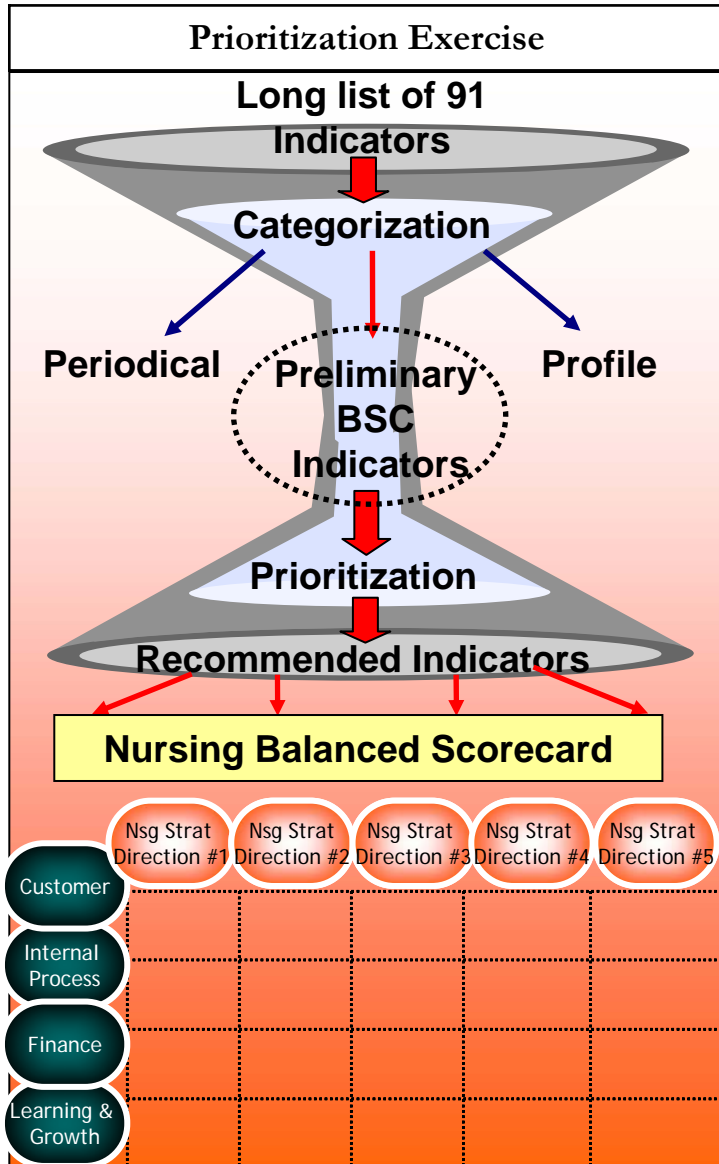
Nursing Balanced Scorecard – Key Project Objectives

1. **Accountability:** Evaluate SMH nursing performance through the development and implementation of a Nursing Balanced Scorecard (NBSC)
2. **Alignment:** Measure progress of nursing strategic objectives using the designed SMH NBSC
3. **Informed Decision Making:** Inform decision making on SMH corporate nursing Initiatives using evidence-based indicators in the SMH NBSC

Project Approach

Project Approach	Key Activities	Deliverables & Timelines																								
 <p style="text-align: center;">Synthesis of Nursing Performance Indicators</p> <p style="text-align: center;">Analysis</p> <p style="text-align: center;">Prioritization</p> <p style="text-align: center;">Recommended Indicators</p>	<p>Internal Review:</p> <ul style="list-style-type: none"> ▪ Review existing documentation and literature ▪ Consult with key stakeholders ▪ Analyze the “long” list of indicators using the BSC/Nursing Strategic Direction Matrix template 	<ul style="list-style-type: none"> ▪ “Long” list of existing reported nursing indicators and identified/ required nursing indicators ▪ Completed matrix ▪ Identified balance or imbalance of indicators for each BSC quadrant ▪ October, 2006 																								
 <p style="text-align: center;">Prioritization</p> <p style="text-align: center;">Recommended Indicators</p> <p style="text-align: center;">Nursing Balanced Scorecard</p>	<p>External Review:</p> <ul style="list-style-type: none"> ▪ External Scan of CAHO Hospitals ▪ Literature Review 	<ul style="list-style-type: none"> ▪ External Scan Findings ▪ December, 2006 																								
 <p style="text-align: center;">Nursing Balanced Scorecard</p> <p style="text-align: center;">Nsg Strat Direction #1 Nsg Strat Direction #2 Nsg Strat Direction #3 Nsg Strat Direction #4 Nsg Strat Direction #5</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: none;">Customer</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="border: none;">Internal Process</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="border: none;">Finance</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td style="border: none;">Learning & Growth</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	Customer						Internal Process						Finance						Learning & Growth						<p>Prioritization:</p> <ul style="list-style-type: none"> ▪ Develop & validate preliminary indicator definitions ▪ Categorize preliminary indicators ▪ Conduct a prioritization exercise to recommend the “vital few” indicators for each quadrant of the nursing balanced scorecard 	<ul style="list-style-type: none"> ▪ Confirmed list of indicators for each quadrant of the nursing balanced scorecard & their alignment with the Nursing Strategic Plan ▪ January, 2007
Customer																										
Internal Process																										
Finance																										
Learning & Growth																										
 <p style="text-align: center;">Implementation Plan</p>	<p>Validation:</p> <ul style="list-style-type: none"> ▪ Validate with key stakeholders on the following for each indicator: <ul style="list-style-type: none"> ▪ Definition ▪ Formula ▪ Data source ▪ Benchmark/target ▪ Responsibility for analysis ▪ Interpretation of data ▪ Distribution ▪ Frequency 	<ul style="list-style-type: none"> ▪ Nursing balanced scorecard ▪ February, 2007 																								
	<p>Implementation:</p> <ul style="list-style-type: none"> ▪ Develop an implementation plan 	<ul style="list-style-type: none"> ▪ Regularly reported nursing balanced scorecard ▪ March, 2007 																								

Prioritization of Indicators



Key Activities	Stakeholders
Categorization of Indicators <ul style="list-style-type: none"> ▪ Categorize indicators into three categories: Profile, Periodical, & BSC ▪ Definitions of each category are included in the following page. 	<ul style="list-style-type: none"> ▪ Nursing Professional Practice leadership

Categories	Definition	Sample Indicators
Balanced Scorecard	<ul style="list-style-type: none"> ▪ Data are regularly available ▪ Data require continuous monitoring and action ▪ Data inform key decision points that are essential for business success ▪ Indicators measure current strategic priority objectives 	<ul style="list-style-type: none"> ▪ Adverse events – nurse sensitive medical ▪ Total number of nursing agency hours used
Periodical	<ul style="list-style-type: none"> ▪ Data are collected on a periodic basis and not regularly available 	<ul style="list-style-type: none"> ▪ Staff survey results
Profile	<ul style="list-style-type: none"> ▪ Basic demographics ▪ Data do not require quarterly monitoring and action ▪ Indicators may be added to the BSC if the issues being measured become a strategic priority 	<ul style="list-style-type: none"> ▪ Nursing head count ▪ # of RNs with Masters degree



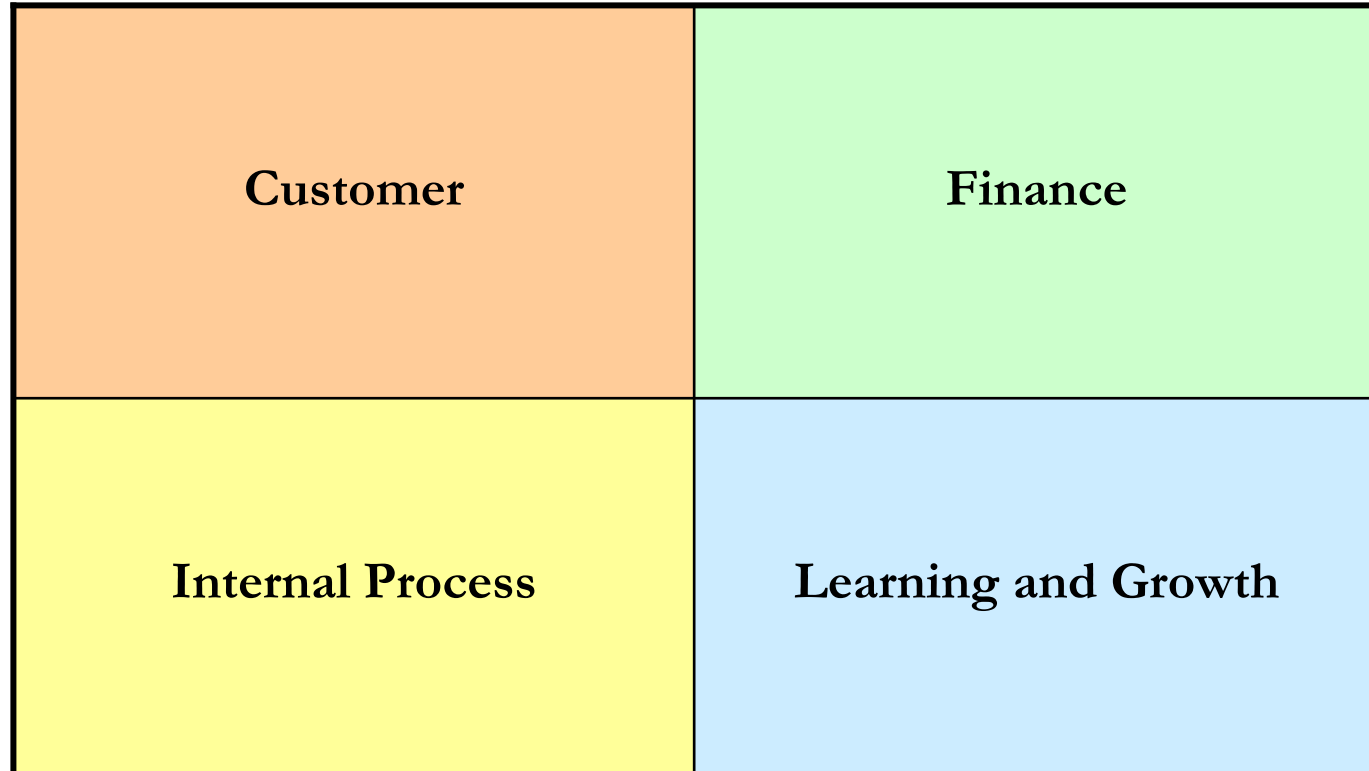
Nursing BSC Prioritization

- The aim is a total of 24-32 indicators for the nursing BSC.
- A total of 20 indicators scored higher than 75Percentage of the maximum score.
- Another 4 indicators that scored lower than 75Percentage were identified as “must have” (i.e., high strategic fit and usefulness).

BENEFIT ANALYSIS	COST ANALYSIS
STRATEGIC FIT: 40Percentage <ul style="list-style-type: none">• Measurability of priority nursing initiative progress• Alignment with mandatory MOHLTC, accreditation, Hospital Report, and HRBN indicators	INVESTMENT: 10Percentage <ul style="list-style-type: none">• Additional cost for data collection and analysis
USEFULNESS: 20Percentage <ul style="list-style-type: none">• Action-oriented• Evidence-based	MEASURABILITY: 30Percentage <ul style="list-style-type: none">• Availability of data• Measurability by valid and reliable methods



Nursing Balanced Scorecard





Next Steps

1. Validate with key stakeholders on the following for each indicator:
 - Definition
 - Formula
 - Data source
 - Benchmark/target
 - Responsibility for analysis
 - Interpretation of data
 - Distribution
 - Frequency
2. Reporting and data validation
3. Participating in the quarterly corporate performance review in May 2007

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Our Future





Our Future

- The Landscape of healthcare is calling for profound changes and reform in the way health care is designed, delivered and evaluated.
- Our 2005 Strategic Plan provides the foundation to reconcile the quality gap and articulates in a very tangible way how nursing can contribute (in all domains- practice, research, education, leadership and management) to achieving SMH's corporate vision through our *culture of caring and discovery* of the finest academic health sciences centre in Canada.
- Our governance structures, initiatives (PCDM and alignment of nursing roles, Nursing RAP program, etc.) and accountability mechanisms are vehicles for achieving excellence in nursing professional practice.

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**The full document of the Nursing Strategic Plan
is available in PDF format online at
www.smh.toronto.on.ca**