



The Nursing Data Strategy Project



An Introduction



- The Baylor Nursing Strategy Project is engaged in a comprehensive study of issues related to data collection and delivery.
 - *The goal:* Identifying data-related challenges and opportunities.
 - *The purpose:* Contributing to the achievement of best-in-class nursing performance at Baylor.
 - *The reality:* Efforts toward outcome improvement, have plateaued because there is not enough information is available to nurses.
- **Key concept:** An accurate, accessible, and consistent information environment is vital to improving accountability and ensuring that nurses can provide quality care.

Our project is designed to:

- **Identify** data-related issues currently causing pain, and provide short-term alleviation where possible. The Dashboard Pilot is being utilized to drive short-term gains.
- **Define** the existing information landscape by identifying who is producing nursing-related data and how it is being used. By driving synergies and coordinating various data resources, this process is expected to yield mid-term gains.
- **Capture** innovative ideas and vital feedback through interviews, focus groups and brainstorming session. This process will flush out unrecognized issues, and ensure the success of a long-term strategy.



A CHALLENGING CONTEXT

- **Outcomes-based reimbursement is the future of the health industry**—and according to a 2012 study by the Health Research Institute, “incorporating clinical informatics across a healthcare organization will be essential as the reimbursement landscape evolves to a more outcomes based approach.”
 - In order to improve patient outcomes, it will be necessary to proactively identify chronic and high-risk patients.
 - Two key components of a successful strategy will be analytics at the point of service, as well as easy access to reliable historical and longitudinal data.
- **Value-based Purchasing will change the financial landscape of hospitals**—but a white paper from Health Care Dataworks notes “two ways hospitals of all sizes can secure more wins under the new CMS program and potentially get an additional share on top of their full reimbursement.”
 - *Organizational commitment* from all levels of hospital staff. In this model, everyone is a stakeholder, so everyone stands to gain by improving their own performance.
 - *New data analytics solutions* that track, monitor and plan for scores and outcomes. It is key to identify areas for improvement so the groups in question can proactively improve upon measures.



The New Reality



“Nursing-sensitive value-based purchasing (NSVBP) . . . would help to promote optimal staffing and practice environment through financial rewards and transparency of structure, process, and patient outcome measures.”¹

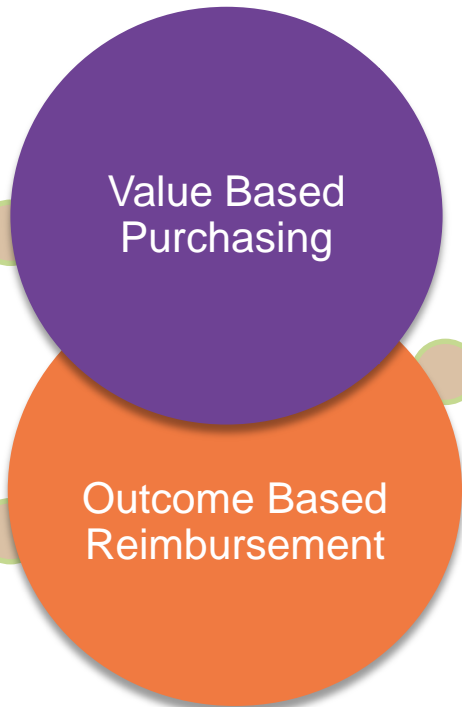
Affordable Care Act



Market Forces



Changing Demographics



Value of Nurses



Cost of Services



1  **JOURNAL OF NURSING SCHOLARSHIP**

HEALTH POLICY AND SYSTEMS

Moving Healthcare Quality Forward With Nursing-Sensitive Value-Based Purchasing

Kevin T. Kavanagh, MD, MS, FACS¹, Jeannie P. Cimiotti, DNSc, RN², Said Abusaleem, PhD, RN³, & Mary-Beth Coty, PhD, RN⁴

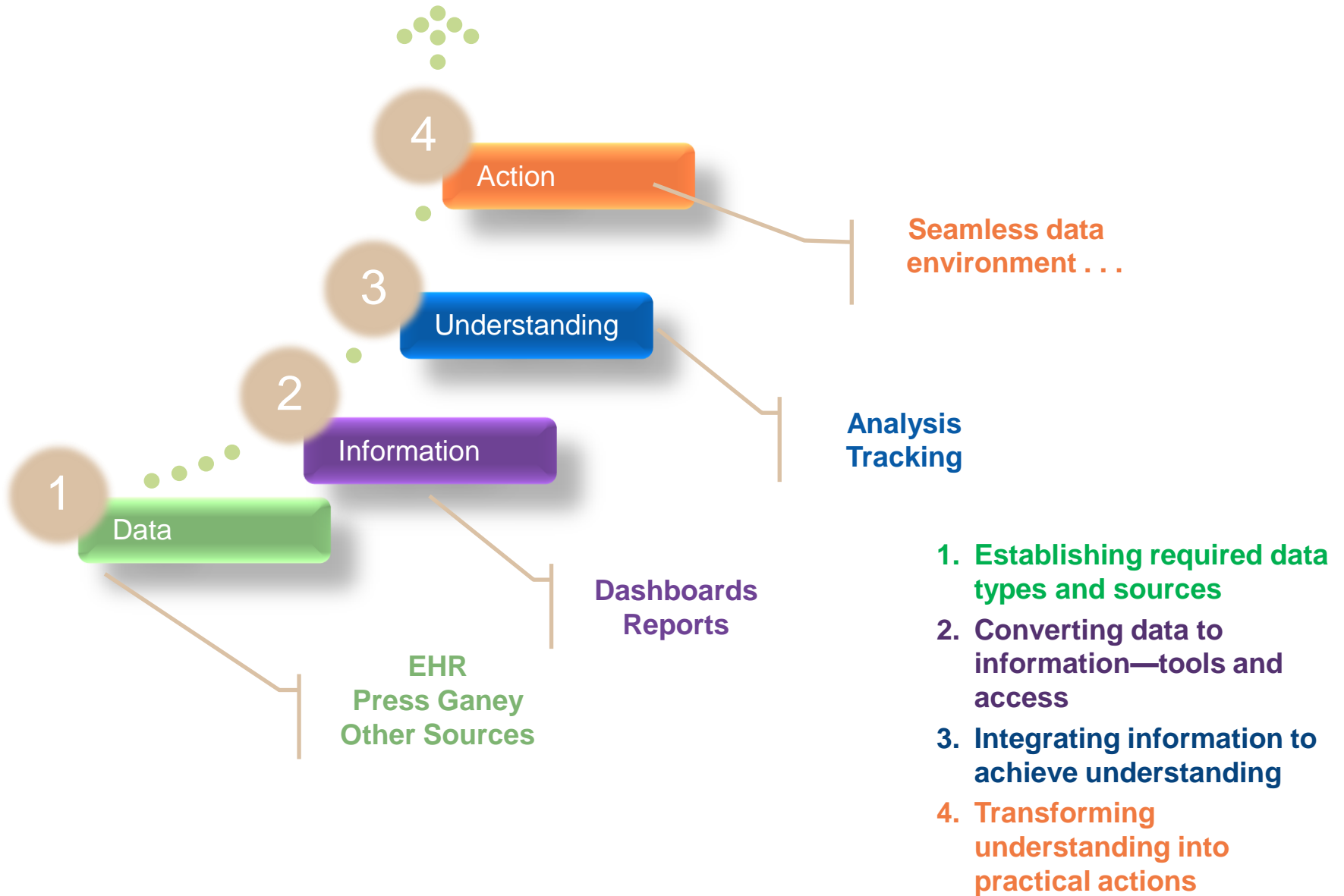


- According to an article in *Nursing Scholarship*: Nursing Sensitive Value-Based Purchasing (NSVP) can improve the quality of nursing care “by financially motivating hospitals to have an optimal nurse practice environment capable of producing optimal patient outcomes by aligning cost effectiveness for hospitals to that of the patient and society.”
- The ability to access and analyze nursing-related data will be key to improving the quality of nursing care. For example:
 - Enabling proactive identification and remediation of problems with staffing, management, and care delivery
 - Tracking nursing-related quality metrics
 - Empowering nurse-managers
 - Optimizing efficiency in planning

- To retain great nurses and nurse-managers, hospitals need to provide a supportive environment—and that includes both easy access to point-of-service data and efficient tools for managing performance. Two pitfalls to avoid:
 - According to Mari Tietze, PhD, RN-BC, “resistance to clinical adoption of IT is often a result of alert fatigue and/or high click-to-information ratios that are disruptive to clinicians and their clinical workflow.” Tietze recommends “a collaborative implementation that draws on the expertise of both clinicians and IT personnel.”
 - Something about management tools (accessibility, accuracy, etc.)



THE SOLUTIONS LANDSCAPE





1. Engage nurses throughout the design process for IT initiatives . . .

A best practice example:

At Cleveland Clinic's "Nursing Unit of the Future":

- Nurses have an opportunity to experience, assess benefits and provide feedback regarding new information technologies prior to implementation
- Simultaneously, the Nursing Informatics team evaluates the technical and clinical outcomes of new tools and processes



2. Standardize for accurate and consistent metrics . . .

A best practice example:

Vanderbilt Medical Center's Informatics unit is working across the enterprise to:

- Coordinate development of core and departmental databases
- Develop standard data definitions and adhere to them across systems
- Support one-time capture of data at the point of its creation



3. Explore innovative solutions . . .

A best practice example:

In the Healthcare Transformation Lab at Intermountain Health:

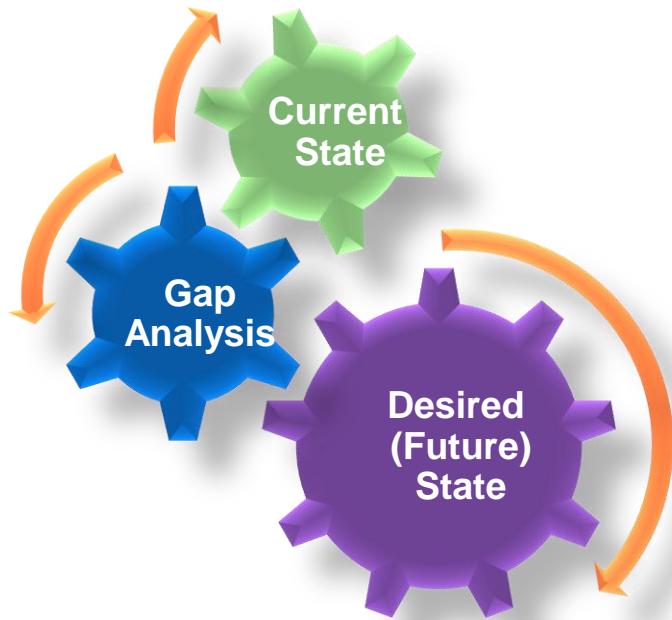
- Teams build prototypes and proof of concepts for a diversified portfolio of technology ideas
- Clinicians work with lab engineers and architects to design, test, and evaluate new technologies designed to change healthcare



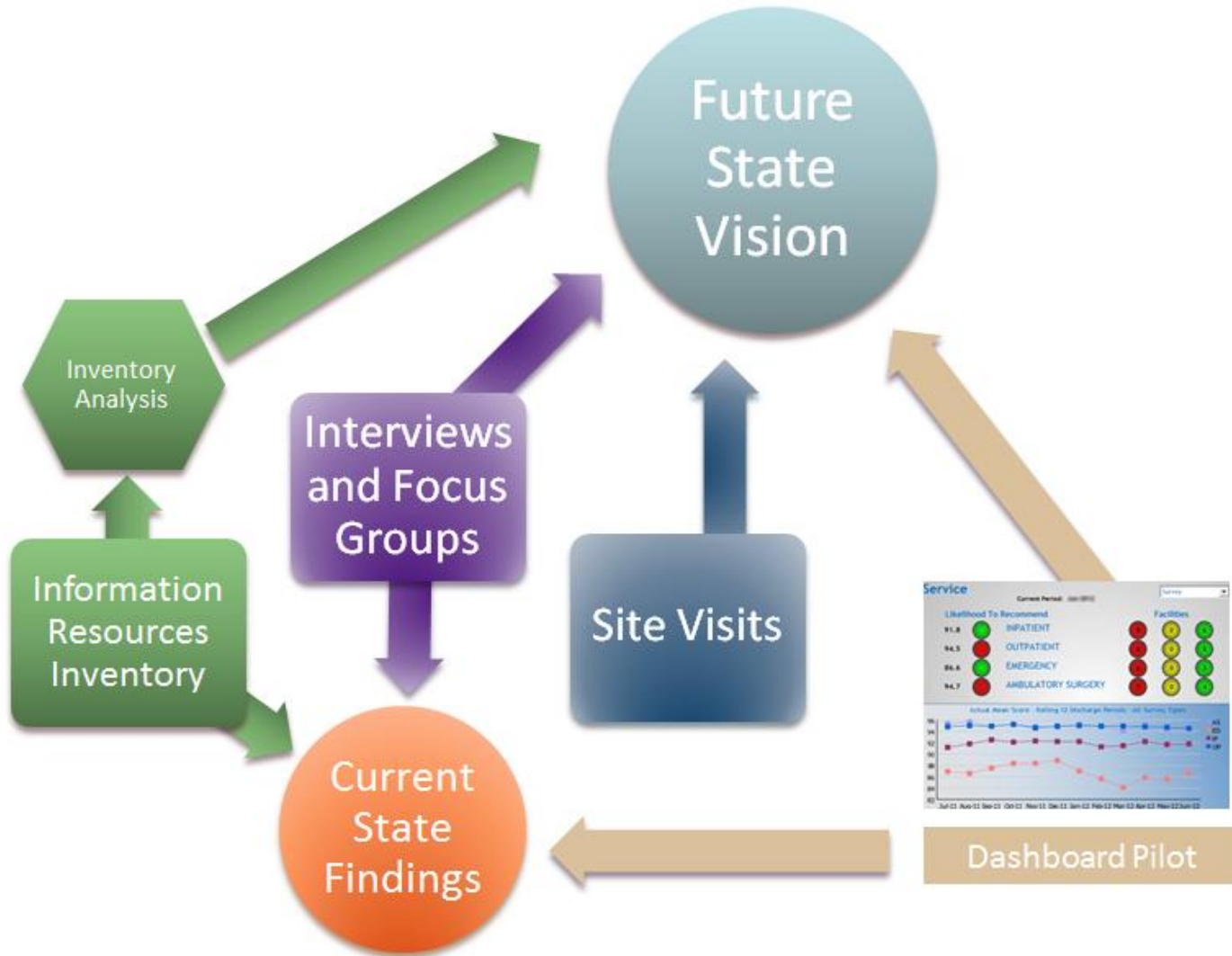
OUR PROJECT



- Beginning in Q2 2013, under the leadership of Donna Montgomery, several key teams have aligned to accomplish three interrelated goals:
 - Identify immediate issues and provide short-term improvements
 - Define the current information landscape and gather input to support mid-term gains
 - Design the best possible long-term strategy for moving Baylor toward a best-in-class data environment for nursing.
- To ensure optimal results, the Project has adopted a highly effective methodology . . .



- The desired *Future State* is defined by the performance capabilities needed to meet internal and external requirements
- The existing *Current State* is determined by the systems and tools in place and the current capabilities
- A Gap Analysis identifies the missing pieces and needed changes required to achieve Future State
- These three activities may go on simultaneously and influence one another

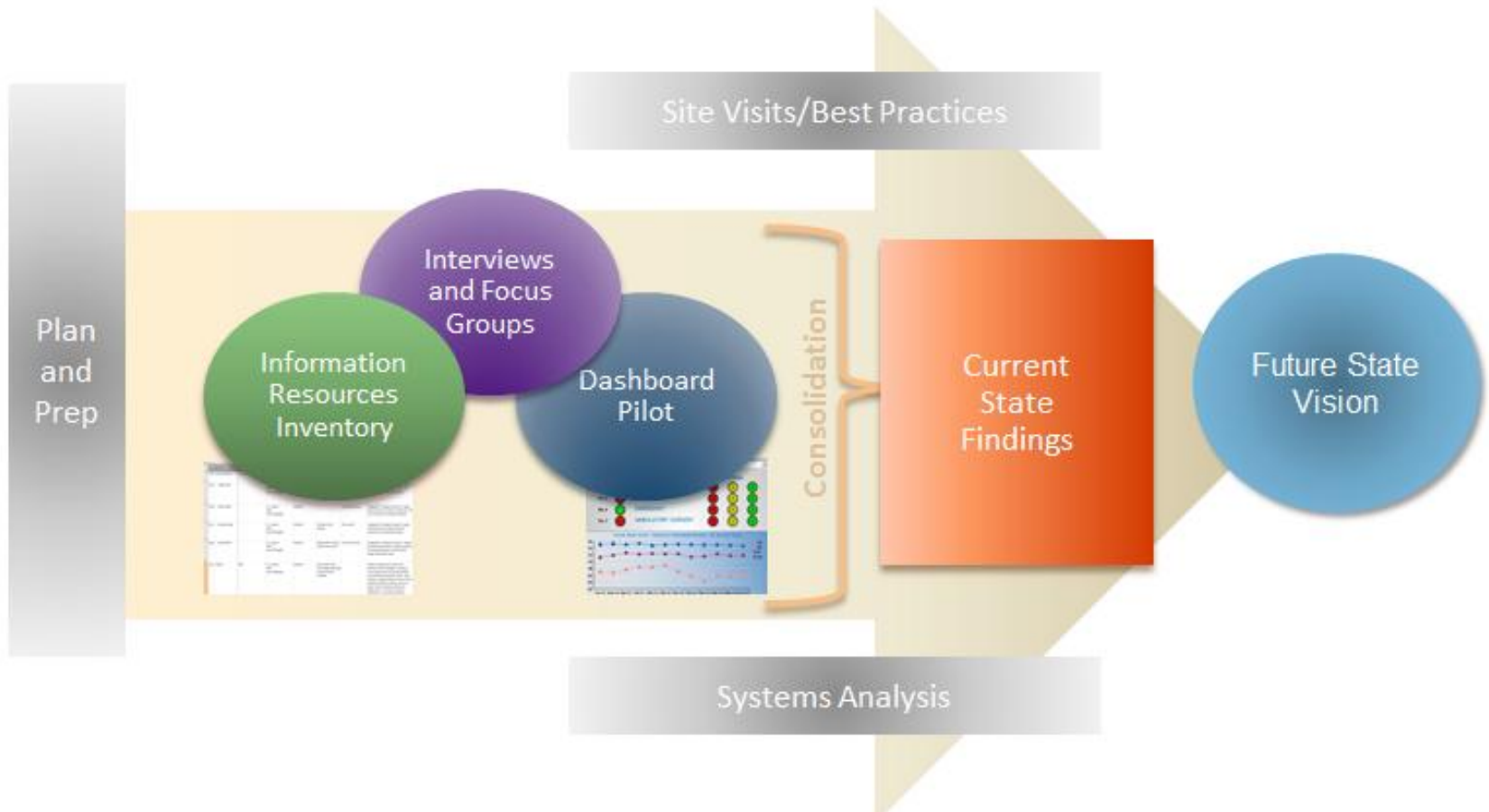




- **Interviews and focus groups** gather input from stakeholders and end-users, in order to:
 - Gain a better understanding of current conditions and common challenges
 - Invite new ideas and solution suggestions
- Development of an **Information Resources Inventory** provides:
 - Insight into redundancies and gaps
 - A basis for improving information access tools
- **Site visits** to several world-class health care organizations offer the opportunity to:
 - Observe best practices in action
 - Learn how organizations approached the change process
- A three-month **Dashboard Pilot** has explored several questions, including:
 - Whether CNODs can effectively utilize our CNO tool suite
 - How the tool suite can be improved



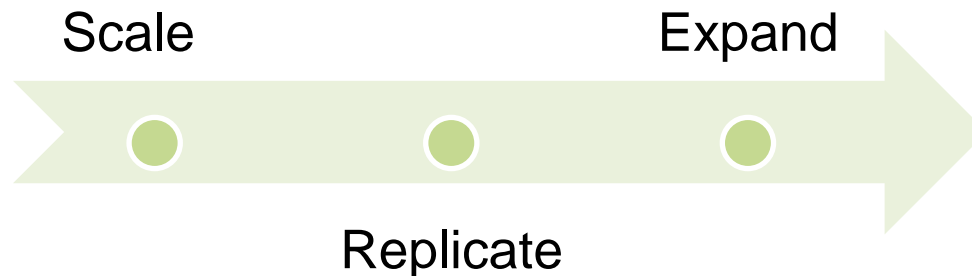
Strategy

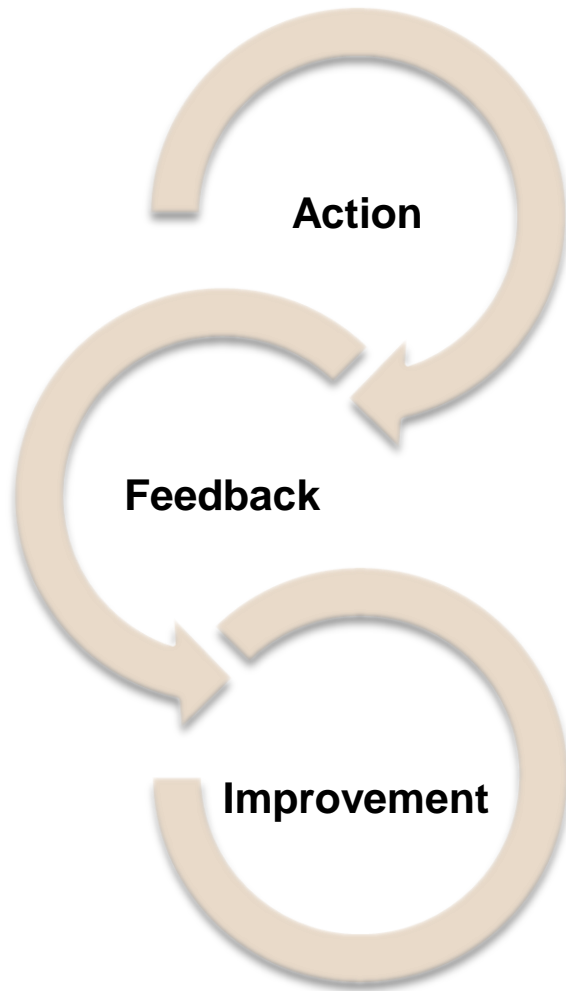




LOOKING AHEAD

1. The Current State/Future State methodology can be applied to many situations--so the Nursing Data Strategy Project can provide a template for other Baylor business units.
2. Findings from the project can also be utilized by other business units to speed up the process of identifying existing data resources and needed tools.
3. The Nursing Data Strategy Project can contribute to improvements at the enterprise level through gap analysis, solution modeling, and pilot programs.





What will the future state look like? Although specific future state recommendations will emerge from analysis of the current state, some findings can already be predicted:

- Success of the Dashboard Pilot supports broader deployment
- Standardization of specific terms and measures will be required for meaningful analytics
- Stronger data governance is needed to minimize replication and optimize data accuracy
- Centralized nursing information support will be key for ongoing improvement