

# 2009 Nursing Strategic Plan

Aim





# Mission

- Nurses at Atrium Medical Center are empowered to serve our patients by providing personalized, compassionate care with integrity and respect because “every patient matters”.



# Atrium's Nursing Vision

We will achieve a transformational environment that leads to a culture in which we are:

- Trusted by our community
- Respected by our fellow employees as important members of the team
- Valued by our physicians as professional colleagues
- Supported by caring relationships among nurses that fosters professional advancement in advocacy



# Atrium's Nursing Values

- Patient – We pledge to keep the patient at the heart of everything we do
- Leaders – We pledge to be leaders within our area of expertise
- Excellence – We pledge to strive for excellence and hold each other accountable in all we do
- Dedicated – We pledge to be a dedicated team committed to the highest standards
- Growth – We pledge to “grow our own” professionals
- Enthusiasm – We pledge to have enthusiasm in igniting the spirit of nursing



# Pillars of Excellence

SERVICE

QUALITY

PEOPLE

STEWARDSHIP

GROWTH



# Service Goals

- Improve overall Inpatient customer satisfaction score for “Recommend this Hospital” to 64% from 62.2%
- Improve Inpatient customer satisfaction with nursing to 75<sup>th</sup> percentile in:
  - ❖ Communication – currently 43<sup>rd</sup> up from 27
  - ❖ Response of Hospital Staff – 19<sup>th</sup> up from 10
  - ❖ Pain – 34<sup>th</sup> up from 26
  - ❖ Communication regarding medications – 64<sup>th</sup> up from 31



## Service Goals

- Improve overall physician satisfaction to 68.8% from 67.7% - *2<sup>nd</sup> quarter*
- Improve physician satisfaction with overall nursing care to 75% from 68.2% - *2<sup>nd</sup> quarter*
- Improve ETC patient satisfaction score for “Likelihood of Recommending” question from 74.1 to 77.1 – *4<sup>th</sup> quarter*



# Service Initiatives

- Provide education to nursing staff on phone etiquette, basic customer service expectations, and the “Art of Managing Up” – *1<sup>st</sup> quarter*
- Align, educate and involve the Shared Governance Councils to drive the Nursing Strategic Initiatives – *1<sup>st</sup> quarter*
- Update External Website with a strong nursing presence to include our nursing mission, vision, values and strategic plan – *1<sup>st</sup> quarter*



# Service Initiatives

- Invite Amy Newland to the monthly NEC meetings to report on physician feedback – *1<sup>st</sup> quarter*
- Recruit and hire two new Clinical Educators for Intensive Care and Medical Surgical Nursing units respectively. Increase the amount of education and tracking of competencies to meet the increased levels of care being provided – *1<sup>st</sup> quarter*
- Implement nursing bedside shift report – *3<sup>rd</sup> quarter*



# Service Initiatives

- Update the Nursing Clinical Ladder with the Premier Hospitals to better align incentives with improved outcomes – *3<sup>rd</sup> quarter*
- Engage physicians in all nursing departments to provide education to staff at minimum of two times within the year – *complete by 4<sup>th</sup> quarter*
- Nursing Directors to define the level of services provided and expertise of staff with communication to physicians on office visits – *complete by 4<sup>th</sup> quarter*



# Service Initiatives

- Fully implement nursing rounds with physicians with expectations defined in revised job descriptions and evaluations –  
*4<sup>th</sup> quarter*



# Quality Objectives

- Increase # of nursing staff with national certifications by 20%
- Reach 90<sup>th</sup> percentile in all composite core measures
- Show a downward trend in Mortality rates following implementation of Palliative Care Unit
- Earn Chest Pain Accreditation



# Quality Objectives

- Improve Clinical Performance to decrease number of never events:
- Surgery on the wrong body part – zero
- Foreign Body left in a patient after surgery – zero
- Mismatched blood transfusion – zero
- Major Medication error (severe) – zero
- Pressure ulcer acquired in the hospital - < than 3%
- Falls – less < 3%
- Hospital acquired infections – UTI/VAP - < than 3%
- Air embolism – zero
- Deep Vein Thrombosis/Pulmonary embolism – zero
- Poor Glycemic Control



# Quality Initiatives

- Implement Concurrent daily review process for core measures – *1<sup>st</sup> quarter*
- Educate, implement and monitor compliance with the 2009 National Patient Safety Goals and Never Events – *1<sup>st</sup> quarter*



# Quality

- Recruit and Hire Unit Specific Educators for Medical Surgical and Intensive Care Units – *1<sup>st</sup> quarter*
- Create a nursing driven, quality process improvement model with unit specific dashboards. These dashboards will be updated monthly and communicated to all nursing staff – *1<sup>st</sup> quarter*



# Quality Initiatives

- Explore cost effective options for sitters – define criteria and implement program – *1<sup>st</sup> quarter*
- Improve documentation with successful implementation of EPIC (meet project installation timeline/budget from AMC controllable events) – *2<sup>nd</sup> quarter*
- Accurate accounting of training hours via the API system per cost center – *2<sup>nd</sup> quarter*



# Quality Initiatives

- AMC staff training complete and on time for EPIC with 95% complete by 4/30/09 – *2<sup>nd</sup> quarter*
- Implement Electronic Incident Reporting – *2<sup>nd</sup> quarter*
- Implement Nursing Peer Review – *3<sup>rd</sup> quarter*
- Initiate study groups for staff working toward certifications and implement a Wall of Fame in each Nursing Dept. with names of certified nurses – *3<sup>rd</sup> quarter*



# PEOPLE

## Goals & Objectives

- Increase nursing recognition for positive changes and improved outcomes
- Move from 4<sup>th</sup> quartile in 2008 to the 3<sup>rd</sup> quartile in overall nursing satisfaction (Press Ganey)
- Improve employee survey score on “Willingness to Recommend this Hospital as a Good place to Work” from 62.1 to 66.1
- Participate in the NDNQI nursing satisfaction survey and meet the mean for hospitals our size



# People Initiatives

- Spotlight our nurses driving our nursing strategic initiatives in monthly newsletters – *1<sup>st</sup> quarter*
- Plan and implement the Nursing Year in Review celebration – *1<sup>st</sup> quarter*
- Plan and Implement a structured leadership development program for nursing leaders – *1<sup>st</sup> quarter*
- Increase nursing leadership presence on the off shifts and weekends to seek input and involve staff in decisions affecting their practice – *1<sup>st</sup> quarter*



# People

- Educate Nursing leadership and staff on the Magnet standards so this becomes the framework for all nursing practice - *4<sup>th</sup> quarter*
- Recognize other departments support of nursing with creative initiatives – *2<sup>nd</sup> quarter*



# STEWARDSHIP

## Goals & Objectives

- Increase nursing leadership's financial knowledge of budget reports and current tools to monitor productivity
- Nursing Departments to meet Productivity targets (flex FTE budget established for AMC)
- Meet flexed (non-wage) controllable expenses



# Stewardship Objectives

- Engage nursing staff in managing productivity goals
- Prevent loss of reimbursement due to hospital acquired conditions



# Stewardship Initiatives

- Implement a defined program for Financial Education of all nursing leadership to include utilization of financial software, interpretation of financial reports, and managing budgets – *1<sup>st</sup> quarter*
- Provide staff education on assigning the proper status of patients (observation/admit) – *2<sup>nd</sup> quarter*
- Develop admission and discharge criteria for specialty units – *3<sup>rd</sup> quarter*



# Stewardship

- Implement monthly operating reviews with Nursing Directors to drive financial performance – *1<sup>st</sup> quarter*
- Engage Staff Nurses in the Financial Process and evaluation of quality outcomes at monthly department meetings – *1<sup>st</sup> quarter*
- Educate all nursing staff on Nursing Documentation with regards to “Present on Admission Conditions” to prevent loss of reimbursement – *1<sup>st</sup> quarter*



# **GROWTH**

## **Goals & Objectives**

- Increase the ED volume and inpatient admissions over 2009 budget
- Decrease ED LOS by 15%:
  - LOS for discharged patients 165 or <
  - LOS for admitted patients 295 or <
- Develop a Spine Center of Excellence



# Growth

- Host one nursing conference to increase exposure to nurses in our surrounding communities to enhance recruitment efforts – *4<sup>th</sup> quarter*
- Initiate a Wound Care Center – *2<sup>nd</sup> quarter*
- Increase Trauma, Plastics, ENT, Neuro and general surgical cases, by improving OR turn around time and overall OR efficiencies – *complete by 4<sup>th</sup> quarter*
- Submit for Chest Pain Accreditation – *4<sup>th</sup> quarter*