



Nicklaus Children's Hospital

Measure This: A Multi-faceted Urgent Care Nursing Quality Monitoring Program

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Background

This pediatric hospital system is comprised of an inpatient hospital and 9 urgent cares (UCCs). A major feat for an organization with multiple locations is maintaining both quality and consistency. Clinical and service excellence are vital in this healthcare environment to ensure quality and sustainability. Healthcare consumers demand the highest standards in this competitive marketplace. As such, the hospital system adheres to certain standards and targets. Quality is measured in part by the National Database of Nursing Quality Indicators (NDNQI) quality indicators in addition to various local measures.

These standards translate to the UCCs. Since nursing is vital to this 3-time accredited Magnet organization, they are tasked to determine, practice and monitor various standards. Various tools are used by the UCC nurses to maintain excellence and deliver legendary care.

Population

- Services to the tri-county area
- 9 Pediatric Urgent Care Centers with diagnostic capabilities
- Age range from Birth to 20 years old
- In 2016, over 118,000 Urgent Care Visits

Conclusions / Implications

- These tools form a part of a quality monitoring program which aims at delivering the best care and legendary service to patients and families while maintaining standardization.
- Targets are reset annually and continuously evaluated for effectiveness in a bid to exceed industry standards.
- Benchmarking these quality indicators against other pediatric urgent care centers for the future would help to make the entire program more robust.

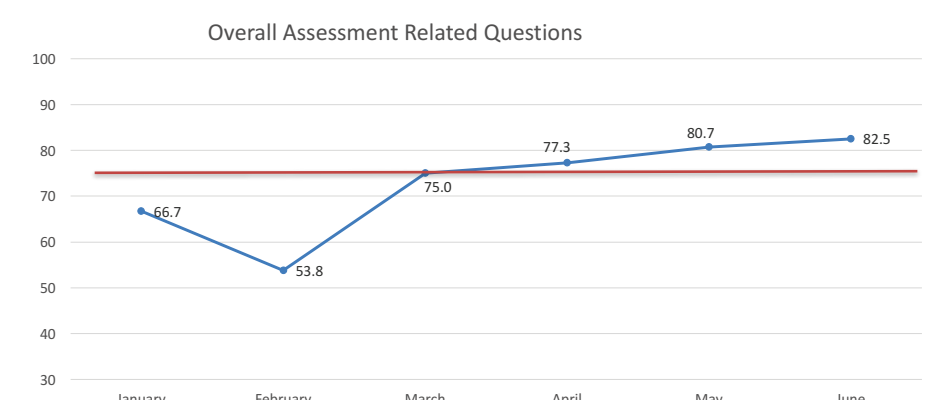
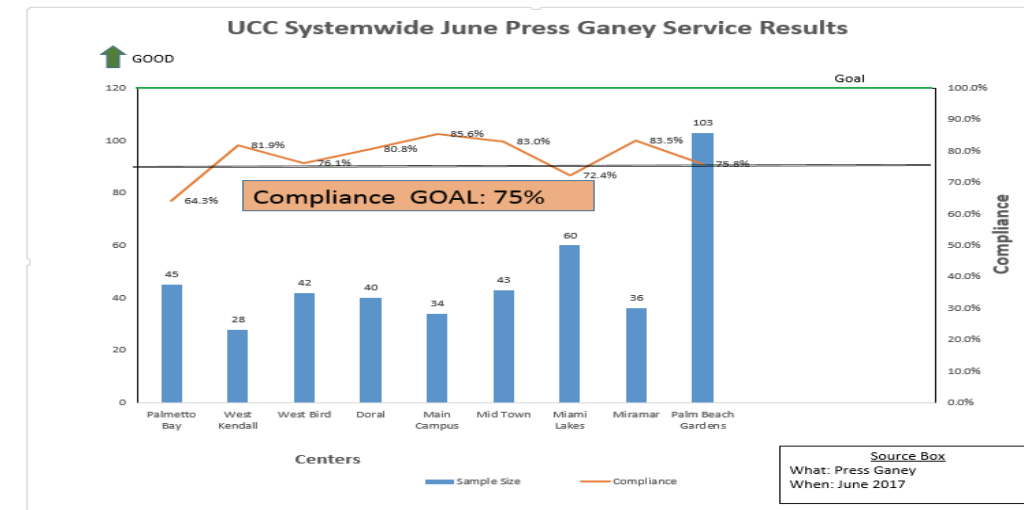
Strategies

Quality Measures

Overall Section

- Information about home care
- Cleanliness of Urgent Care
- How well pain was controlled
- Extent to which staff washed hands
- Old Personal Insurance Info
- Personal Insurance Info
- Privacy during personal info
- Sign of griping personal info
- Courtesy personal personal info

Satisfaction Scores for June



Strategies- Chart Audits

- Peer review of documentation is essential to maintain quality.
- Monthly chart audits are conducted by all nurses to ensure that essential elements are documented in medical records.
- 50 / 70 Audits monthly depending on volume per center

Standard/Description	Urgent Care Center Open Chart Reviews
Standard/Description 1	INFORMED CONSENT TREATMENT was informed consent(s) for treatment obtained and signed as appropriate?
Standard/Description 2	Physician H&P is completed with episode visit and the Urgent Care Note by physician is individualized to meet patient's unique needs.
Standard/Description 3	Initials completed with each episode visit.
Standard/Description 4	Obtain information on the medications the patient is currently taking. This information is documented in a list or other format. Current medications include those taken at scheduled times & those taken on an "as-needed" basis.
Standard/Description 5	Upon discharge, provide the patient and/or family with discharge instructions and information regarding the medication the patient should be taking when home from the hospital. Information to include medication name, dose, route, frequency and purpose. When the only additional medications prescribed are for a short duration, the medication information may include only those medications.
Standard/Description 6	Allergies: The medical record contains, as applicable the following clinical care information: Any Allergies. The Medical Record contains the following information: The physician's initial assessment, including the patient's initial diagnosis, diagnostic impression, & condition.
Standard/Description 7	Abbreviations listed as "PROHIBITED" are absent from all areas of the chart. PROHIBITED ABBREVIATIONS: U - u - IU Q.D. - Qd - q.d. - qd - Q.O.D. - QOD - q.o.d - qod MS - MSO4 MgSO4 5.0mg (trailing zero) - 5mg (lack of leading zero)
Standard/Description 8	Abbreviations to avoid: microgram symbol - mc Greater than or less than - > or < subcutaneous - sc
Standard/Description 9	Discharge information is documented, including final diagnosis, disposition, condition at discharge & instructions for follow-up care.
Standard/Description 10	Conduct a "Time-Out" immediately before starting the procedure as described in the Universal Protocol. If a vital sign is identified as abnormal (outside the abnormal vital sign rechecked before depart)? (Place N/A if all vital signs in intake were normal)
Standard/Description 11	Charge ticket reconciled appropriately to clinical documentation including physician note
Standard/Description 11a	DO NOT USE, AMMENDMENT PURPOSES ONLY Were there any abnormal vital signs?
Standard/Description 11b	DO NOT USE, AMMENDMENT PURPOSES ONLY If so, was there a re-assessment completed?

Clinical Excellence Index - CEI

- The Clinical Excellence Index (CEI) measures various relevant elements of the National Database of Nursing Quality Indicators (NDNQI) as well as other nationally monitored outcome measures.
- Broad categories for the hospital system. Each area has different measures that correlate to the broad categories. UCCs measured on outpatient indicators.
- The broad categories are delineated into essential outpatient quality indicators such as hand hygiene compliance, laboratory sample contaminants, EMTALA transfer compliance, medication errors and assessment of abnormal vital signs.
- There are two thresholds for the organization (target- 95% and peak -96%) which are measured monthly.
- Each indicator is weighted based on importance to the organization (dependent on weights for categories).
- The overall average scores are reported monthly and aggregated annually. The annual departmental threshold attainment directly correlates with a monetary bonus for employees in each department UCC.
- Each UCC is scored individually but based on Outpatient Indicators. Departments that meet peak threshold qualify for a higher annual bonus.

Hospital wide Broad Categories

Category	Score
1. Infection Control and Control	100%
2. Medication Safety	100%
3. Laboratory Safety	100%
4. EMTALA Transfer Compliance	100%
5. Hand Hygiene Compliance	100%
6. Assessment of Abnormal Vital Signs	100%
7. Patient Safety	100%
8. Patient Satisfaction	100%
9. Patient Education	100%
10. Patient Assessment	100%
11. Patient Assessment	100%
12. Patient Assessment	100%
13. Patient Assessment	100%
14. Patient Assessment	100%
15. Patient Assessment	100%
16. Patient Assessment	100%
17. Patient Assessment	100%
18. Patient Assessment	100%
19. Patient Assessment	100%
20. Patient Assessment	100%

Urgent Care Indicators

Indicator	Score
1. Infection Control and Control	100%
2. Medication Safety	100%
3. Laboratory Safety	100%
4. EMTALA Transfer Compliance	100%
5. Hand Hygiene Compliance	100%
6. Assessment of Abnormal Vital Signs	100%
7. Patient Safety	100%
8. Patient Satisfaction	100%
9. Patient Education	100%
10. Patient Assessment	100%
11. Patient Assessment	100%
12. Patient Assessment	100%
13. Patient Assessment	100%
14. Patient Assessment	100%
15. Patient Assessment	100%
16. Patient Assessment	100%
17. Patient Assessment	100%
18. Patient Assessment	100%
19. Patient Assessment	100%
20. Patient Assessment	100%



Service Excellence Index - SEI

- Similar to CEI. Similar indicators with weighting dependent on level of importance to the organization.
- Service Excellence Index (SEI) used to measure various facets of service excellence.
- The service excellence index (SEI) is comprised of some high priority service questions used on the customer satisfaction surveys.
- Since the organization employed a new provider for surveys (Press Ganey), the first half of 2017 is being used as the baseline to glean trends and targets for the service excellence index for remainder of the year.
- Indicators will be based on areas that are of utmost importance to the organization as a whole and each department in particular.
- The SEI attainment is also directly linked to the annual monetary bonus for employees.
- Nurses and all UCC staff are empowered to develop various strategies to deliver legendary service. Best practices are then shared among the teams.
- The addition of certified nursing assistants to help with both clinical and service areas was an initiative that was born out of this culture of idea generation.

SERVICE EXCELLENCE INDEX: December 2016

Indicator	Value	Target	Peak	Min
1. Staff Communication	1.00	1.00	1.00	1.00
2. Doctor Communication	1.00	1.00	1.00	1.00
3. Discharge Information	1.00	1.00	1.00	1.00
4. Patient Education	1.00	1.00	1.00	1.00
5. Communication about Medicines	0.88	0.88	0.88	0.88
6. Discharge Information	0.88	0.88	0.88	0.88
7. Cleanliness & Quietness	0.88	0.88	0.88	0.88
8. Overall Rating	1.00	1.00	1.00	1.00
9. Accuracy	1.00	1.00	1.00	1.00

Length of Stay (LOS) & DNA Strep Testing

- Target = <90 minutes
- DNA Strep testing (adopted in 2015) contributing to 90 minute LOS calculation as opposed to rapid strep testing which is less time.
- Differentiating practice for Nicklaus Children's UCCs
- Turnaround time (TAT) for the Group A Strep by DNA 60 minutes (from collection to result) benchmark is 95%.
- Less chance of false results due to collection technique or foods the patients have ingested.
- GAS sensitivity = 95.5% - 99.3%
- GAS specificity = 95.9% - 98.1%

Skills Day Evaluation

Pre & Post Test Scores

There was a 10.1% average increase in post test scores

Strategies - Skills Days

- Annual skills days are organized for the nursing teams to ensure that high priority skills and processes are reviewed to ensure consistency of quality.
- Strategically organized during the summer months, when patient volumes are historically reduced, to ensure greater compliance in attendance.
- Topics addressed include but are not limited to orthopedic splints, blood culture collection, EMTALA transfer elements and charge ticket completion. Pre and post tests sometimes administered to determine effectiveness.

Skills Days Stations

- Orthopedic Devices / Splinting - (30 minutes)
- Blood Cultures - (15 minutes)
- EMTALA / Baker Acts - (15 minutes)
- Volunteer Resources - (15 minutes)
- Charge Tickets - (30 minutes)
- Key Performance Indicators - (15 minutes)
- Crash Cart Contents - (15 minutes)
- Risk Management - (15 minutes)
- Employee Health Fit Testing - TBD (30 minutes)
- Wound Care - (15 minutes)