

Cook County Health and Hospitals System

Presentation to Inform Strategic Plan NURSING MANAGEMENT

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Building a high quality, safe, reliable, patient-centered, integrated health system that maximizes resources to ensure the greatest benefit for the patients and communities we serve.



Principle Objectives

Improve health equity

Demonstrate value, adopt performance benchmarking quality, safe and reliable care

Provide high

Develop human capital

Lead in medical education and medical investigation relevant to vulnerable populations



CCHHS Nursing



John H. Stroger Jr. Hospital



Provident Hospital



Ambulatory Care Health Network



Juvenile Temporary Detention Center





Cermak Health Services



Department of Public Health

CORE Center

Nothing in Isolation: Nursing Strategic Plan Contributors



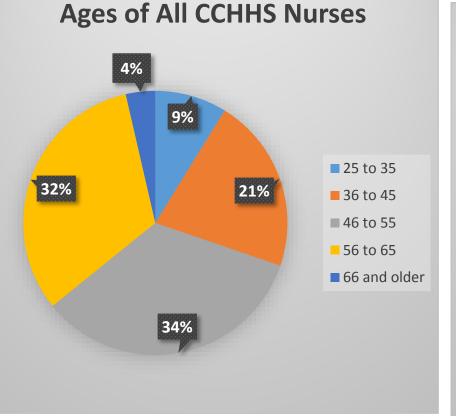


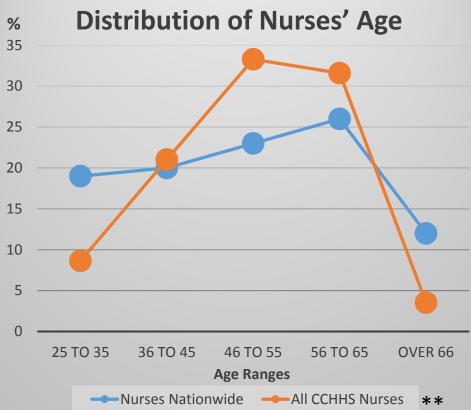


COOK COUNTY HEALTH & HOSPITALS SYSTEM

A Snapshot of Nursing: Age

Characteristics of Nurses	Years
Average age of all CCHHS nurses	51
Average age of the nurse nationally	47*





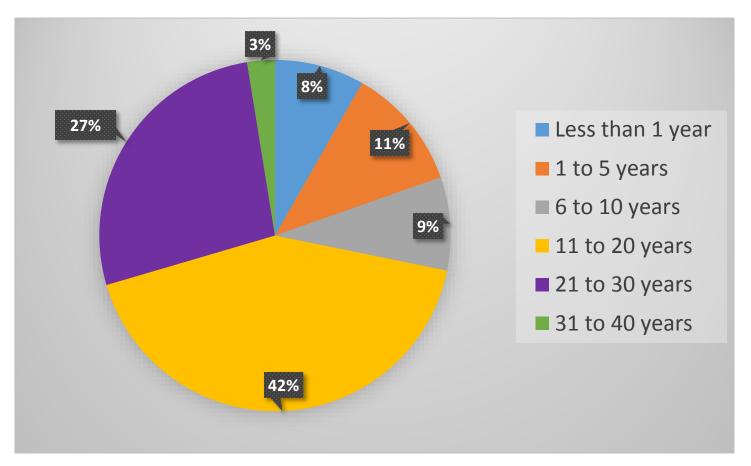
*HRSA 2008 National Sample Survey of Registered Nurses **Nationwide data from National Council of State Boards of Nursing, published 2016

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A Snapshot of Nursing: Years of Service within CCHHS

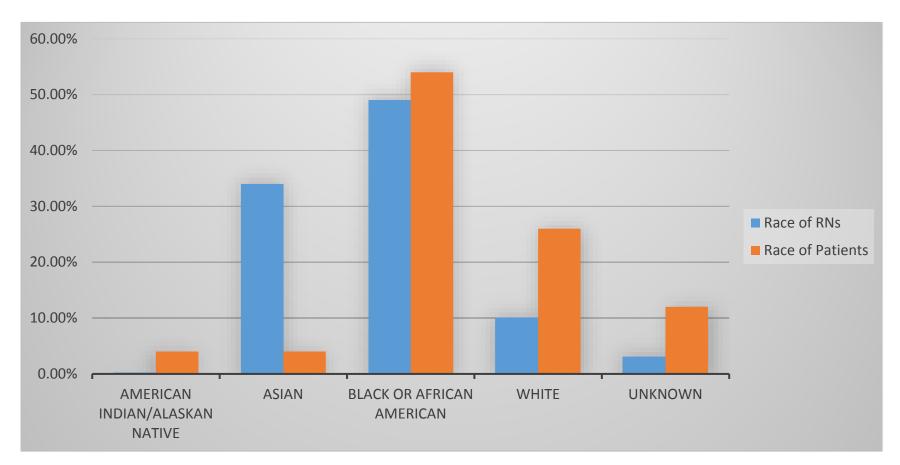
Characteristics of CCHHS Nurses	Years
Average years of service within CCHHS	14







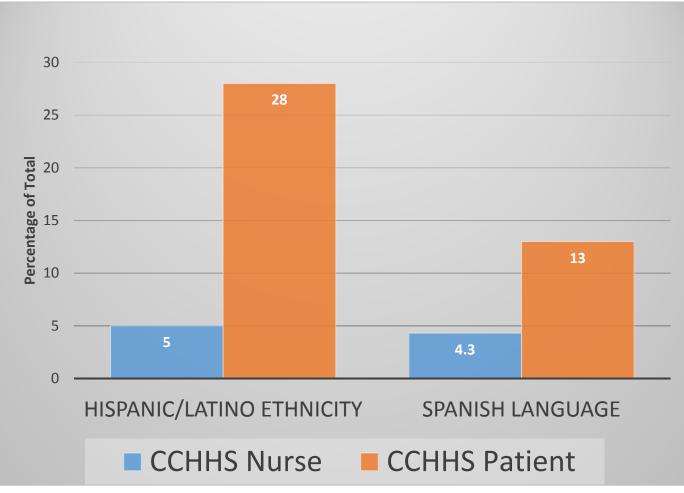
A Snapshot of Nursing: Comparison of RN and Patient Race







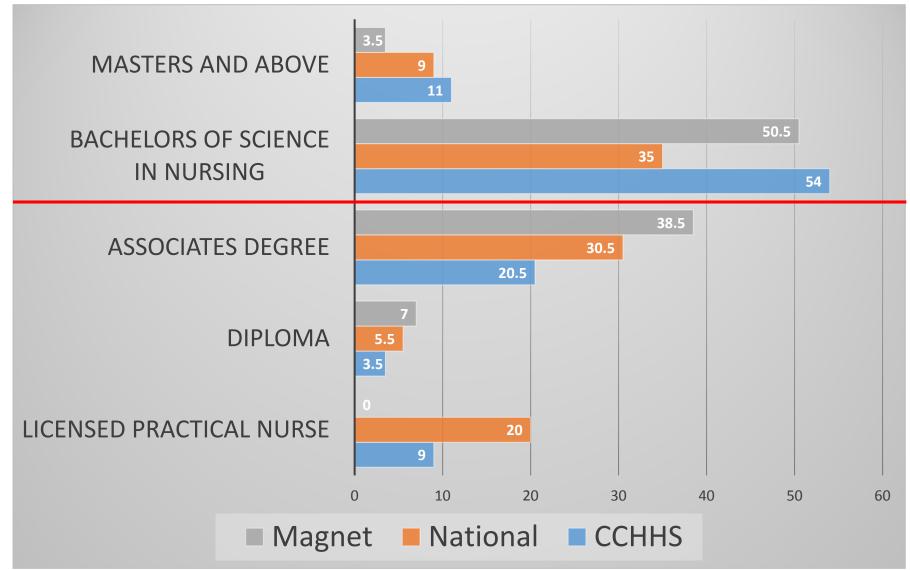
A Snapshot of Nursing: Ethnicity







A Snapshot of Nursing: Education



Relationships with Illinois Nursing Schools

- Current Affiliations:

 Chicago State University
 City Colleges of Chicago
 DePaul University
 Lewis University
 Lewis University
 Morton College
 Rush University
 Saint Xavier
 South Suburban College
 University of Illinois
- Assessing Future Affiliations:
 - Dominican University
 - Elmhurst College
 - North Park University
 - Resurrection University
 - University of St. Francis

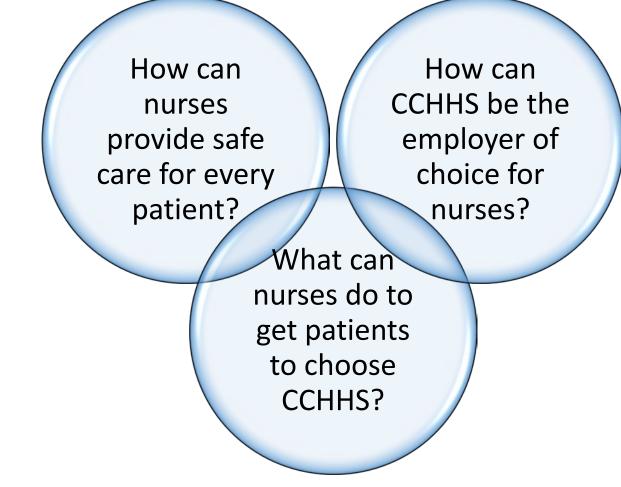
CCHHS

Our Current Performance Metrics

	CCHHS QPS Committee Dashboard															
Data as of 4/7/16	CY 2015															
PERFORMANCE MEASURES			Q1 2015			Q2 2015			Q3	2015		(4 201		Q1 2016	
John H. Stroger Jr. Hospital			Feb	Mar	Apr	May	Jun	e Ju	ily /	Aug	Sept	Oct	Nov	Dec	Jan	Feb
Safety																
HAC: Pressure Ulcer Stages III & IV ¹			2	1	2	6	7	1:	1	7	3	4	3	8	6	8
HAC: Falls with Injury ²			0	0	3	3	2		1	1	1	1	6	4	1	0
Data as of 4/7/16			-			CY 201	_		-	-	-	-	-	<u> </u>		
PERFORMANCE MEASURES	Q1 2	1 2015 Q2						5	Q4 2015				2016	1		
John H. Stroger Jr. Hospital	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	TARGET		VARIANCE *
Patient Experience																
Willing to Recommend Hosp (% top box)	70	71	66	65	67	66	73	68	70	75	65	72	69	8	5	-16%
Communication with Doctors (% top box)	85	84	82	81	82	83	83	82	80	81	81	84	87	8	-	-1%
Communication with Nurses (% top box)	72	71	69	69	72	71	70	70	67	70	70	67	79	8	-	-7%
Cleanliness (% top box)	51	51	49	49	50	51	53	48	47	58	56	49	55	7	7	-22%
Data as of 4/7/16 PERFORMANCE MEASURES	01	2015	1	Q2 201		CY 201	.5 3 201	5		Q4 20:	15		1 2016		rget v	VARIANCE *
Provident Hospital	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	TAR		
Patient Experience																
Willing to Recommend Hosp (% top box)	69	67	66	68	71	83	58	50	80	100	100	100			-	15%
Communication with Doctors (% top box)	80	81	86	86	86	90	77	86	100	100	100	100			_	12%
Communication with Nurses (% top box)	79	78	78	85	85	100	72	61	100	89	100	100	<u> </u>			6%
Cleanliness (% top box)	65	67	74	66	58	86	67	50	100	100	50	100) N/S*	7	7	23%
ACHN																
Diabetes Control % with Hgb A1C < 9%	73	73	73	74	74	77	76	76	76	76	73	75	72	7	8	-6%
Immunizations: Up to date in children at 24 months (%)	49	58	81	66	74	82	81	77	94	90	75	82	84	8	6	-2%
Patient Experience: Moving Through Visit	68	67	68	59	61	59	59	61	61	67	60	66	61	7	5	-14%
Patient Experience: Telephone Access	53	64	64	57	61	60	60	60	61	70	57	64	62	7	5	-13%

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Strategic Input from CCHHS Nurse Leaders





A Summary of the Findings

Core Nursing Responsibilities Across Settings: Our Building Blocks



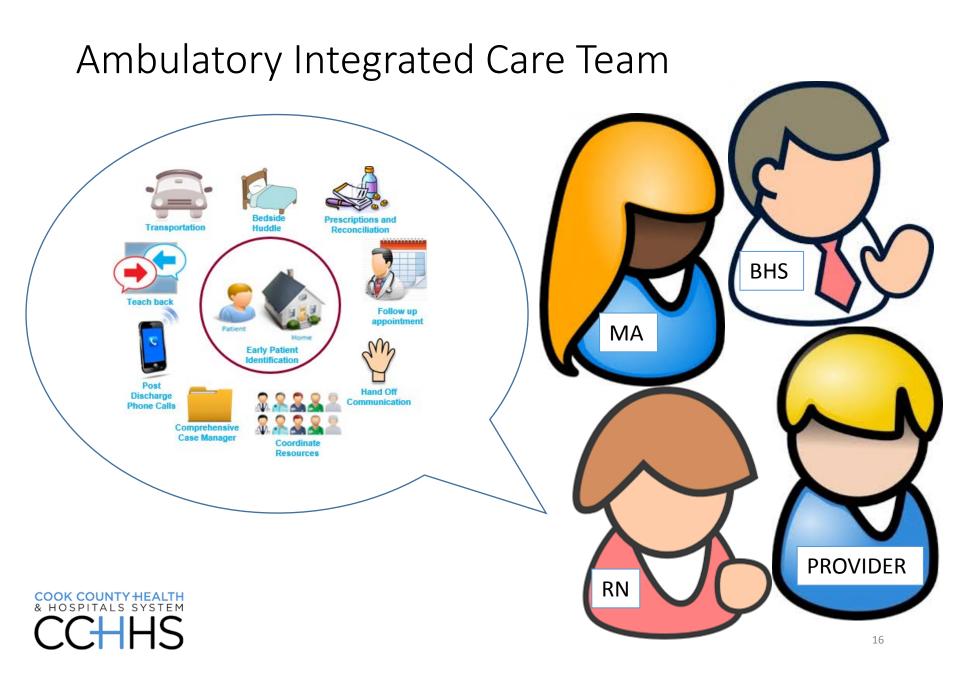


The Future Nurse

- Technologically savvy
- Emotional Intelligence
- E-Patient
- Highly educated
- Trends in Education
- Wisdom Works
- The Final Transition
- Leaders in Care Continuity
- From Health Care to Health Creation











Improve Health Equity

Nursing Strategy

Create a caring nursing workforce that holistically assesses and mitigates social determinants of health

Recommended Tactics

- Standardize and train qualified staff for assessing social determinants of health within clinics, hospitals and county care.
- Develop care coordination model across the continuum of care in CCHHS.
- Teach cultural sensitivity and diversity to bridge the gap between the cultures of our staff and the cultures of our patients
- Develop IT solutions to foster coordination of care across disciplines.
- Collaborate with community agencies, Non-Governmental Organizations, faith based organizations to mitigate social determinants of health
- Develop and implement a Professional Practice Model (Magnet[®] work)

Provide high-quality, safe and reliable care

Nursing Strategy

Provide high quality care and a safe environment for our patients across the system.

Establish reliability of care processes that ensure consistency every time, for every patient, in every setting.

Recommended Tactics

- Implement evidence based practices to our clinical work to improve quality and safety
- Rounding for outcomes
- Utilize an evidence based framework for case review of serious safety events within nursing to eliminate system and process issues
- High Reliability training for CCHHS Nurse Leadership Team so that they can integrate consistent processes into their workflow
- Safety huddles



Demonstrate value, adopt performance benchmarking wherever possible

Nursing Strategy

Provide the environment and framework for excellence in nursing practice and best patient outcomes in every setting for every patient through interdisciplinary teamwork, collaboration and innovation.

Recommended Tactics

- Establish a Magnet[®] culture
- Develop a professional practice council
- Local scorecards to drive targets
- Promote nursing autonomy through shared governance and unit based councils
- Test, monitor and implement acuity based staffing for hospitalized patients
- Utilize LEAN as a tool to improve outcomes
- Implement the hospitals, ACHN, CHS, JTDC, CCDPH Quality and Patient Safety Plans.
- National Database for Nurse Sensitive Indicators for benchmarking quality outcomes
- Utilize Advisory Board for best practices
- Target drivers of incremental overtime and staff absenteeism

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Develop human capital

Nursing Strategy

Identify, develop and implement nursing roles for the future by ensuring nursing leadership development at all levels

Strengthen interprofessional collaboration and teamwork

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Recruit best and brightest nursing graduates

Recommended Tactics

- Clinical, professional and leadership advancement program across CCHHS to develop high performing employees.
- Work with interprofessional partners to organize team-based learning programs and simulations
- Continuing education programs (formal and informal) for licensed and unlicensed staff.
- Competency based, 'top of license', differentiated practice model of care across the system.
- Nurse Satisfaction Survey
- Programs: Residency , Preceptor, Mentor

Lead in Medical Education and Clinical Investigation

Nursing Strategy

Establish and strengthen academic nursing partnerships to elevate professional practice and recruit top performers

Create structure for evidence based practice, translational research, and original research

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Tactics

- Support graduate students for clinical practicum to improve EBP among different patient populations.
- Seek opportunities for exchange training programs with academic partners.
- One EBP workshop per year in partnership with any one practice partner.
- Update all nursing practice and policies based on evidence based practice for two clinical services (Hospital and ACHN).
- Increase access to evidence and peer reviewed journals
- Continue nursing representation on the Institutional Review Board
- Seek university partner to develop a nursing research fellow program



What is Magnet?

The Magnet Recognition Program[®] recognizes health care organizations for quality patient care, nursing excellence and innovations in professional nursing practice. Consumers and nurses seeking employment rely on Magnet designation as the ultimate credential for high quality nursing.

What are the basic elements of Magnet?

- Outcomes above the national benchmark in:
 - Patient satisfaction
 - Nurse satisfaction
 - Clinical quality
- Transformational nursing leadership team
- Shared decision-making at the frontline level
- 360 Degree Peer Review
- Nursing Research

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- Many opportunities for professional development
- Defined model that drives the professional practice of nurses

Many of our competitors already have these elements in place



Clobal Issues in Nursing & Health Core Structural Empowerment Transformational Leadership New Knowledge Improvements

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Total Magnet[®] Accredited Hospitals: 433 In Illinois: 40

The State of Illinois has the largest number of Magnet Hospitals

- Adventist Hinsdale
 - Advocate Christ
 - Advocate Good Shepherd
 - Illinois Masonic
 - Lurie's Childrens
 - Loyola
 - MacNeal
 - Northwestern
 - Rehab Institute of Chicago
 - Rush
 - Rush Oak Park
 - Swedish Covenant

Begun application...

- University of Illinois University of Chicago Jesse Brown VA
- Palos Community

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