

Roadmap to the Future

2013-2015 Nursing Strategic Direction

2014 Update

A Message from Sue Eckert



Dear Colleagues,

It is my pleasure to present this *Update* on our progress and our plans for MedStar Nursing's FY13-FY15 Strategic Goals. This brochure will present our actual accomplishments for FY13, review our strategic plans for FY14, and preview what will be coming ahead in FY15.

When we first shared this plan with you a year ago, we stressed that a key ingredient to the process was the active participation of nearly 1,000 front line nurses who attended close to 80 unit-based and town hall meetings to review the draft plans and provide important feedback.

Once finalized and endorsed, a multidisciplinary team was formed to implement each and every one of the goals. A Senior Nursing Director served as the Executive Sponsor, team leaders and members were selected, and then the teams went to work. More than 250 nurses and nursing colleagues were active members of these teams – and they are responsible for the great progress made in FY13. The few flat bullet points on the page of accomplishments cannot possibly capture the amount of effort and fantastic results (even if some were slightly below target) – that were achieved through dedication, commitment and teamwork.

We have continued to use this dynamic process in the refinement of plans for FY14 and FY15. And this year the process was further enriched by the 2013 Associates Survey, in which more than 90% of MWHC nurses participated. Results of the survey provided significant direction and helped us set priorities as we drafted strategic goals.

In June and July Senior Directors of Nursing conducted another round of feedback sessions to review accomplishments, assess priorities, and determine realistic timeframes for execution. More than 700 front line staff participated in 53 meetings. The strategic goals you see in this brochure reflect that input.

Your collective contributions of time, energy, and creativity offering your feedback, completing the Associates Survey, and/or serving on an implementation team have made these goals better, stronger, achievable – and sustainable. We are very proud to state with clarity and confidence that this is your plan – that will help us create an even stronger future for Nursing and for the patients we are honored to serve. Thank you.

Sue

Susan Eckert, MSN, RN
Senior Vice President and Chief Nursing Officer



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FY 2013 - FY 2015 Nursing Strategic Goals

| | Trusted Leader | | Caring for People | | | Advancing Health | |
|-----------------------|---|--|--|---|---|---|---|
| | Market | Finance | People | Service | Quality | Education | New Knowledge, Innovation & Improvement |
| FY 13 Accomplishments | <ul style="list-style-type: none"> • Collaboration initiatives to decrease LOS; evaluate and optimize throughput processes • Optimize Neuroscience Service Line <ul style="list-style-type: none"> - Develop Neuro ICU - Enhance continuum of care • Evaluate requirement for a Cardiac IMC | <ul style="list-style-type: none"> • Achieve a 3% RN vacancy rate • Achieve a 12.5% RN turnover rate (actual was slightly below target at 12.8%) • Develop process to evaluate IP staffing matrices • Eliminate the use of contracted agency - One service line agency-free and all other service lines with three departments agency- free | <ul style="list-style-type: none"> • Scholarly work increases by 25% • Increase the number of BSN prepared RNs to 80% plus • Evidence-based Practice and Research Council activities increase by 25% • Increase nurse engagement score by 6 points from 2010 • Evaluate MWHC-GUSNHS Scholars Program | <ul style="list-style-type: none"> • Enhance patient satisfaction: <ul style="list-style-type: none"> - Automate D/C call feedback - Automate Nursing Leader rounding findings - Enhance hourly rounding/POC - Implement and optimize new technology to respond to patient needs (nurse/patient call system) • Collaborate with Support Services departments to optimize the patient and nurse experience • Enhance nurse:physician collaboration | <ul style="list-style-type: none"> • Achieve national MSH benchmarks for: <ul style="list-style-type: none"> - Fall rate, falls with serious injury - HAPU, Stage 3 and 4 HAPU - RRT calls, observed/expected mortality - CLABSI - SSE • Sustain compliance rate for core measures • Achieve successful regulatory surveys • Prepare for implementation of <i>MedConnect II</i> • Utilize the Culture of Safety survey results to hardwire safety practices | <ul style="list-style-type: none"> • Participate in the UHC Residency Program and reduce/sustain turnover in the first 12 months by 50% • Establish process for on-going competency assessment for RN staff (define model) • Develop a process for on-going learning for PCTs | <ul style="list-style-type: none"> • Evaluate the RN-PCT-Unit Clerk relationship to improve patient care coordination • Evaluate/optimize the role of the Resource RN |
| FY 14 | <ul style="list-style-type: none"> • Continue collaboration initiatives to decrease LOS to budgeted targets; evaluate and optimize throughput processes • Optimize neuroscience service line and enhance continuum of care • Optimize cohorting medical patients on select IP units • Participate in the renovation and relocation of nursing units with MedStar Heart Institute; define model of care for observation patients • Participate in initiatives to enhance/support ambulatory services • Design next phase of Cardiac IMC, opened Advanced Heart Failure IMC | <ul style="list-style-type: none"> • Sustain a 3% RN vacancy rate • Achieve a 12% RN turnover rate • Evaluate IP staffing matrices • Develop RN/tech staffing matrices in OP/Procedural areas • All services lines with 50% of departments agency free • Increase Float Pool options and hires to a minimum of 20/service line/specialty • Update/refresh all data in the Action OI Solutions data base | <ul style="list-style-type: none"> • Sustain scholarly activities at FY13 levels • Sustain the number of BSN prepared RNs at 80% plus • Increase the number of certified RNs by 5% per year • Establish a collaborative governance structure • Respond to 2013 Associates survey results • Enhance consistency of self scheduling process on all units • Implement a clinical ladder • Reduce the readmission rate for targeted patient populations through patient education • Secure an academic partner for second degree BSN • Support N.E.X.T. Committee in the provision of horizontal violence program to 60% of the units • Complete unit based assessment to address needs of novice vs. proficient nurses | <ul style="list-style-type: none"> • Achieve MedStar Health patient experience target for responsiveness by maximizing use of nurse call reports and hourly rounds • Achieve MedStar Health targets in patient satisfaction in <i>overall</i> rating and <i>willingness to recommend</i> • Continue to enhance nurse:physician collaboration; optimize the role of the Medical Director • Implement bedside report | <ul style="list-style-type: none"> • Sustain national MSH benchmarks for: <ul style="list-style-type: none"> - Fall rate, falls with serious injury - HAPU, Stage 3 and 4 HAPU - RRT calls, observed/expected mortality - CLABSI - SSE • Improve compliance rate for core measures; reduce CAUTI rate • Achieve compliance rate for new core measure for CY14 • Achieve successful regulatory surveys • Implement <i>MedConnect II</i> • Update policies and procedures and achieve an every two year systematic review process • Improve select handoff transitions: <ul style="list-style-type: none"> - Implement transport handoff - Improve transition between departments • Continue the Culture of Safety journey • Evaluate current procedural safety and operational practices, to include EPL, Cath Lab, Interventional Radiology, and GI Lab | <ul style="list-style-type: none"> • Utilize UHC Residency Program to reduce first 12 month turnover by 30% from FY13 baseline • Implement process for on-going competency assessment for RN and PCT staff • Unit Clerk orientation and on-going learning program – redefine unit clerk role post <i>MedConnect II</i>; develop orientation program • Integrate the use of process improvement concepts and tools in decision-making by leaders | <ul style="list-style-type: none"> • Optimize the RN-PCT-Unit Clerk relationship to improve patient care coordination • Optimize the role of the Resource RN |
| FY 15 | <ul style="list-style-type: none"> • Achieve receipt of two specialty designation/awards per year • Promote image of nursing via media and scholarly activities internal and external to the organization • Enhance MWHC website to be a user friendly source for recruitment • Utilize social media to communicate with RNs • Participate in targeted community events to foster MWHC's mission | <ul style="list-style-type: none"> • Automate staffing matrices/reporting through expanded use of ClairVia • Eliminate the use of agency in all service lines except perioperative • Center for Excellence in Nursing contributions increase 100% | <ul style="list-style-type: none"> • Integrate APRNs into professional practice environment • Evaluate workforce retirement potential | <ul style="list-style-type: none"> • Explore family centered care/visiting • Implement MD-RN rounding, integrate patients and families | <ul style="list-style-type: none"> • Maintain NICHE designation and roll out ED and 6 clinical units • Achieve successful regulatory surveys • Implement <i>MedConnect III</i> | <ul style="list-style-type: none"> • Explore opportunities to secure on-campus advanced degrees for nursing workforce • Develop on-going learning program for Unit Clerks | <ul style="list-style-type: none"> • Investigate the utilization of alternative/complementary patient centered therapies |