

# Patient Outcomes

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# Patient outcomes

What is important and why do we measure them?



# Objectives

The new graduate nurse will

1. Be able to differentiate critical thinking, clinical reasoning, and clinical judgment
2. Gain an understanding of what nurse sensitive outcomes are and why they are important in healthcare
3. Integrate knowledge of nurse sensitive measures and outcomes into their practice of nursing
4. Communicate and collaborate with members of the inter-professional team, the patient and the patient's support persons to promote positive patient outcomes
5. Assimilate professional boundaries, patient advocacy, and patient education in practice as a professional nurse
6. Identify and implement appropriate methods to prioritize patient care

# Pre-test

1. The “R” in SBAR stands for

- a) Recommendation
- b) Read back
- c) Repeat
- d) Reconcile

2. The nurse who shares personal information with the patient may be crossing professional boundaries

- a) True
- b) False

3. Which of the following may be considered when prioritizing patient care

- a) Patient preference
- b) Maslow’s hierarchy of needs
- c) Anticipation of future problems
- d) All of the above

# Pre-test

4. Which of the following is the best example of a nurse demonstrating patient engagement behavior?
- a) Distributing information on a need-to-know basis
  - b) Asking the patient for input in deciding plan of care
  - c) Neglecting to teach the patient how to complete own dressing change
  - d) Omitting bedside rounds due to time constraints
5. The nurse acts as a patient advocate when she/he makes decisions for the patient
- a) True
  - b) False

# Pre-test

6. Which of the following can be considered a violation of professional boundaries
- a) Supporting a patient in her decision to stop treatment
  - b) Sharing your own personal experiences with illness with the patient
  - c) Becoming politically active
  - d) Avoiding posting anything on social media that violates patient-nurse privilege
7. An interpretation or conclusion about a patient's needs, concerns, or health problems, and/or the decision to take action (or not), use or modify standard approaches, or improvise new ones as deemed appropriate by the patient's response is the definition of
- a) Clinical reasoning
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# Pre-test

8. Critical thinking embedded in nursing practice defines
- a) Clinical reasoning
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9. Which of the following are considered nurse sensitive indicators?
- a) Patient satisfaction
  - b) Falls
  - c) Catheter associated urinary tract infections (CAUTI)
  - d) All of the above
10. The acronym SMART refers to nursing outcome measures. What does the “S” stand for
- a) Singular
  - b) Simple
  - c) Specific
  - d) Synthesize

# Outcomes defined

In ANA's The Essential Guide to Nursing Practice (2012) outcomes are defined as,

“an individual's, family's, or community's state, behavior, or perception that can be measured along a continuum and is responsive to nursing interventions.”

p. 63

# Why are outcomes so important?

- Nurses need to be able to evaluate the effectiveness of their practice and interventions
- Analysis of outcomes drives nursing practice change as well as healthcare organizational change
- Quality and safety in healthcare have been raised as major issues since the Institute of Medicine (IOM) began publishing results of their research in the Quality Chasm series in the early 2000's
- Payers are increasingly basing reimbursement on demonstrated outcomes

# How do we measure outcomes of nursing care? **SMART**

Outcomes measured should be

## **Specific**

- clearly understand what is being measured

## **Measurable**

- everyone has clarity around how well anticipated outcomes were met

## **Achievable**

- based on the practice of all team members

## **Realistic**

- can be achieved given the situation and resources available

## **Time-framed**

- by when will the outcome be met

# Clinical reasoning defined

“The critical thinking embedded in practice”

(Tanner, 2006)

- Supports ability to make clinical decisions to achieve the desired outcome
- Deliberate processes of idea generation, comparing alternatives to the evidence and choosing the best option in order to support clinical judgment

# Clinical judgment defined

- “An interpretation or conclusion about a patient’s needs, concerns, or health problems, and/or the decision to take action (or not), use or modify standard approaches, or improvise new ones as deemed appropriate by the patient’s response”
- Includes not only rational decision making, but also a focus on “what is good and right”, practical knowledge gained from experience, the healthcare worker’s emotional engagement and response, intuition “born of experience”

(Tanner, 2006)

# Clinical reasoning and clinical judgment

***SO...***

**CLINICAL REASONING** is how you think through what is best for your patient and  
**CLINICAL JUDGMENT** is how you act on that thought process!

# Why are they important?

CLINICAL REASONING and CLINICAL JUDGMENT both directly impact the care we deliver and therefore the outcomes for our patients

# Nurse-sensitive indicators

- Measures and indicators that reflect the impact of nursing actions on outcomes (ANA, 2009)
- Are being publicly reported which impacts patient and other customers' confidence
- Payers are looking at payment based on nurse sensitive measure outcomes
- Nurse sensitive outcome measures include hospital acquired conditions as well as patient experience measures

# Nurse-sensitive hospital-acquired conditions

- Falls- under this category there is further definition around level of injury
- Pressure ulcers- there is further breakdown related to staging. Stage III and Stage IV are state reportable events
- Pediatric pain management
- Pediatric IV infiltration
- Central Line Associated Blood Stream Infection (CLABSI)
- Catheter Associated Urinary Tract Infection (CAUTI)

# Other nurse-sensitive measures

- Patient satisfaction
- Nursing satisfaction (both our nurse leaders as well as peer nurses impact nurses' satisfaction with their work environment)
- BSN rates
- Certification rates
- Nursing turnover rates

# New nurse's role in patient outcomes

- Know and follow nursing practice guidelines
- Seek resources for complex patient issues
- Demonstrate lifelong learning: continuing education, formal education to advance your degree, planning ahead to be prepared for certification
- Stay informed about outcomes measured in your organization
- Participate in teams focusing on evidence based improvement
- Hold yourself and peers accountable to best practices

# Path to positive patient outcomes

- Excellent communication
- Professional boundaries
- Engaging the patient, family and caregivers
- Nurse as advocate
- Prioritization of care

# Interprofessional communication

- The World Health Organization (WHO) recognized that better teamwork between health professionals improves patient outcomes
- QSEN competency - function effectively within nursing and inter-professional teams, fostering open communication, mutual respect and shared decision-making to achieve quality patient care
- Share knowledge with each other, no hoarding or withholding information

# Patient hand-off

- The process of accurate presentation and acceptance of patient-related information from one caregiver to another using effective communication
- It is estimated that 80% of serious medical errors occurs due to a miscommunication during a hand-off  
(Joint Commission)
- **SBAR** provides a consistent method for hand-off communication that is clear, structured and easy to use

# I-SBAR-R

## **Introduce**

- yourself and the patient

## **Situation**

- give your assessment and why you are concerned

## **Background**

- give any pertinent background

## **Assessment**

- state what you think the problem is or state you are unsure of the problem but the patient is deteriorating

## **Recommendation**

- receive or offer a recommendation from the provider

## **Read back**

- clarify or ask questions

# Professional boundaries

- Nursing tops national polls of the most widely respected and trusted professions
- The therapeutic relationship protects the patient's dignity and autonomy and allows the nurse to apply their professional knowledge, skills, abilities and experiences towards meeting the health needs of the patient
- The power of the nurse comes from the nurse's professional position and access to sensitive private information. The nurse must make every effort to respect the power imbalance and ensure a patient-centered relationship (NCSBN)

# Boundary crossings/violations

- Disclosing excessive personal information to the patient
- Making comments on social media that breach patient confidentiality
- Are likely to occur when there is confusion between the needs of the nurse and those of the patient
- Sexual misconduct is an extreme form of boundary violation and includes any behavior that is seductive, sexually demeaning, harassing or reasonable interpreted as sexual by the patient (NCSBN)

# Care prioritization

The nurse must prioritize the patient's needs (nursing diagnoses) to decide how best to provide care

# Tools to help establish priorities

## Maslow's Hierarchy of Human Needs

1. Physiologic
2. Safety needs
3. Love and belonging needs
4. Self-esteem needs
5. Self-actualization needs

The lower needs must be met first

# Tools (continued)

- Patient preference

Patient centered nursing direct the nurse to first meet the needs that the patient thinks are most important, as long as the order does not interfere with other vital therapies

- Anticipation of future problems

Provide nursing interventions to prevent problems from occurring, such as repositioning q2h (Taylor, 2015)

# Prioritizing the care of several patients

Care for the following first

- Acute
- Unstable
- Unpredictable

# Patient and family teaching

## **Patient education focuses on**

- Preparation for receiving care
- Preparation before discharge
- Documentation of patient education activity

## **Factors affecting patient learning**

- Age and developmental level
- Family and support networks
- Cultural influences and language deficits
- Health literacy

(Taylor, 2015)

# Patient and family advocacy

The nurse as a patient/family advocate actively promotes the patient's rights to autonomy and free choice

- Assess the need for advocacy
- Communicate with other healthcare team members
- Provide patient and family teaching
- Assist and support patient decision making
- Serve as a change agent in the healthcare system
- Participate in health policy formulation

# Examples of a nurse as an advocate

- Act as an intermediary between the patient and the family or the patient and medical profession
- Helping the family navigate the healthcare system - access to services
- Support the decision making but do not make the decisions for them
- Whistle-blowing
- Politically active

(Taylor, 2015)



# Patient engagement

- Occurs when patients and families become actively involved in their own care
- Meaningful outcomes such as quality, safety and costs are more effective if the patient is engaged in his/her own care
- Being alienated from the care process causes a loss of one's dignity and respect

(Bo-Linn, 2012)

# Strategies for patient engagement

- Rounding on patients
- Communication – keeping the patient informed
- Asking the patient about their preferences
- Teach-back of skills
- Encouraging the patient to ask questions

(Wetzel, 2011) and (Zeis, 2014)

*Perfection is not attainable, but if we chase  
perfection we can catch excellence*

Vince Lombardi

**every patient deserves excellence**

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# Patient Outcomes post-test answers

1. a
2. a
3. d
4. b
5. b
6. b
7. b
8. a
9. d
10. c

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