# Selecting and Measuring Outcomes of Acute Care Advanced Practice

## Kristin L. Seidl, PhD, RN

Director of Nursing Outcomes, Research and Evidence Based Practice University of Maryland Medical Center

Assistant Professor University of Maryland School of Nursing





# **Objectives**

- ☐ Describe the importance of identifying and measuring advanced practice-related outcomes
- □ Identify examples of patient and care delivery outcomes that can be attributed to advanced practice
- □ Identify challenges associated with the measurement and attribution of outcomes associated with advanced practice





## How do we know that what we do matters?



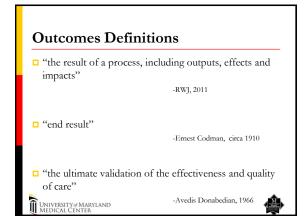








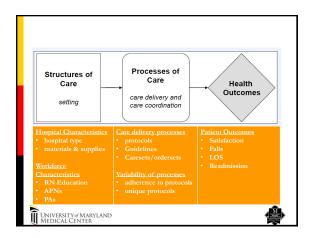
# Need for APNs and PAs Increasing costs of managing chronic illness Inadequate number of primary care physicians ACMG resident work hour restrictions Increasing complexity of inpatients Variation in care delivery UNIVERSITY MARYLAND MEDICAL CENTER Drivers of Outcome Measurement Public Internal hospital departments Regulatory agencies



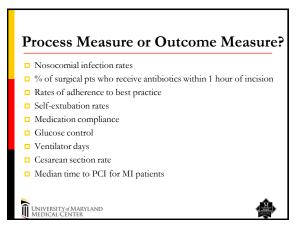
□ Insurance companies/3<sup>rd</sup> party payors
 □ Recognition and Certification programs

Joint Commission
Magnet
Leapfrog Group
Baldridge

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# Relevance of Outcomes Measurement Evaluate effectiveness care Establish a base for clinical decision-making Identify areas for improvement Patient care Care delivery Identify research opportunities



# Nurse-Sensitive Outcomes (ANA &NQF) □ Patient Falls □ Pressure Ulcers □ Restraint prevalence □ Pain management □ Failure to rescue ■ Nosocomial Infections Ventilator Associated Pneumonia (VAP) Central Line Blood Stream Infections (CL-BSI) Catheter associated UTI (CA-UTI) □ Patient Satisfaction UNIVERSITY MARYLAND MEDICAL CENTER **APN Associated Outcomes**

# □ Not well-defined

- □ Setting dependent
  - ICU
  - Acute care
  - Primary care
  - Procedural
- □ Number of studies that exist are not enough to describe the full scope of results of NP care
- □ Difficult to impact the effect of the advanced practice provider





# **Choosing Outcomes**

"If the function of a hospital were to kill the sick, statistical comparisons of this nature would be admissible. As, however, its proper function is to restore the sick to health as speedily as possible, the elements which really give information as to whether this is done or not, are those which show the proportion of sick restored to health, and the average time which has been required for this object..."

> -Florence Nightingale Notes on Hospitals, 1863

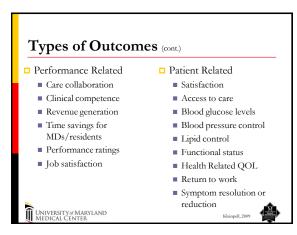




# Think "Structure-Process-Outcome" How does your role fit into the structure of care delivery? What processes do you influence?

### **Types of Outcomes** □ Care Delivery Related ■ Costs of care ■ Blood transfusion rate ■ Length of stay ■ Procedure success/ complication rate ■ In-hospital mortality ■ Rate of drug prescription ■ Readmission rates ■ Prenatal/postpartum visits ■ Time to readmission ■ Low-birthweight rates ■ Use of lab testing ■ ED wait times ■ Use of diagnostic screening tests ■ Clinic wait times ■ TPN usage ■ Other measures of efficiency

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# **Critical Care Specific Outcomes** □ CLABSI □ CAUTI □ Glucose control □ VAP rates □ ICU LOS □ ICU readmission rates □ Nutritional status □ Patient/Family Satisfaction ratings UNIVERSITY & MARYLAND MEDICAL CENTER Labor and Delivery (CNMs) □ C-Section rates □ Apgar score □ Epidural anesthesia rates □ Episiotomy □ Perineal lacerations □ Vaginal operative delivery (forceps, vacuum) □ VABC rates □ Breastfeeding UNIVERSITY MARYLAND MEDICAL CENTER Challenges □ Unique contributions of advanced practice to the "art" of care have not been well-conceptualized in the literature □ Care delivered by APNs/PAs often compared to care delivered by MDs ■ Measurement of outcomes

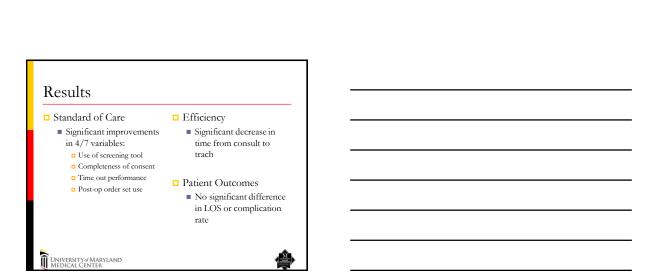
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# Outcome Assessment & Measurement □ Measure ■ Standardize ■ Use reliable and valid measures Retrospective or prospective ■ Establish reporting frequency Evaluate ■ Trend over time ■ Compare to "benchmarks" (measure of best practice) ■ UHC, APACHE III, NSQIP ■ Disseminate UNIVERSITY MARYLAND MEDICAL CENTER Research Example (Pandian, et al., 2011) □ NP role created to facilitate perc trach service □ Purpose - To determine whether the addition of a dedicated trach NP improved: ■ Standard of care (use of screening tool, obtaining consent, consent completeness, documented time-out, use of trach post-op orderset, documented procedure note, documented operative not) ■ Efficiency of care (timeliness of service) ■ Patient outcomes (ICU LOS, hospital LOS, complication rate)

□ Methods - 110 charts randomly selected and

retrospectively reviewed

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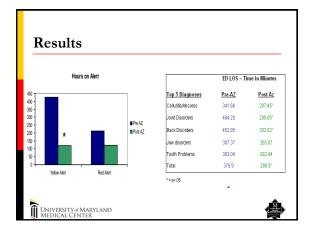


# Quality Improvement example

- □ NP-staffed Ambulatory Zone (AZ) initiated
- □ Purpose:
  - To evaluate the effectiveness of the new AZ by comparing:
    - □ ED LOS for the top 5 diagnoses pre and post AZ implementation
    - □ Time spent on alert pre and post AZ implementation
  - To evaluate the effectiveness of the NP model of care within the AZ by comparing ED LOS by provider







# In Summary...

- □ Identification and measurement of the various outcomes sensitive to advanced practice care is imperitive
- Outcome evaluation can identify opportunities for clinical research and operational improvements
- □ Recent literature supports several patient and care delivery outcomes as being sensitive to advanced practice care
- Advanced practice providers need to continue to identify and scientifically evaluate other possible advancedpractice sensitive outcome measures





# Challenges

- □ Identification of outcomes that are sensitive and specific to APN/PA care
- □ Isolating the effect of the APN/PA
- Measurement strategies
- □ Data availability
- □ Ability to analyze data





# Recommendations

- □ Practice-level outcome studies
  - Need to measure APN intervention
  - Role for quasi-experimental, descriptive, qualitative studies
- Use of nationally recognized outcome measures and instruments
  - Create equivalent comparisons
- □ Research about outcomes that affect health policy
  - Cost, access to care, QOL
- □ Successful methods need to be disseminated



