“Our falls rate is consistently below national benchmarks, but with the lessons learned from Falls Huddle rounding, we anticipate further decreases in the overall fall rate and repeater fall rate.”

Monica Weber, RN, MSN, CNS-BC, CIC
Nursing Patient Safety Officer/Magnet Program Manager,
Department of Nursing Quality
One of the greatest resources that medicine has is the ability of nurses to continually advance everyday medical care. The Zielony Institute is dedicated to giving nurses the tools and support they need to continuously improve care. Below are just a few examples:

KEEPING SCORE OF BEST PRACTICES

The Zielony Institute now utilizes an Integrated Scorecard Metrics software that includes a snapshot of patient experience (HCAHPS scores), quality (core measures), patient safety, staffing effectiveness (Human Resource Information System), and a financial/productivity operating statement. The scorecard technology is a strategic online tool that will aid with system-wide planning and priority setting for nursing, as well as monitoring the achievement of objectives of all nursing staff.

“We developed our scorecard to measure outcomes and give us an enterprise-wide standardized approach for best practices,” says Jessica Korman, MNO, former System Director, Nursing Operations & Planning. “This allows us to look at nursing across the system, in addition to offering data that enables proactive efforts by our Chief Nursing Officers.”

The Zielony Institute started Help Us Support Healing (HUSH) to provide a restful, healing environment and to improve the patient experience. HUSH steps include:

- Dimming lights after 9 p.m.
- Limiting work activities near patient rooms
- Fixing noisy doors, cart wheels and loud toilets
- Closing doors as appropriate after 9 p.m.
- Reminding co-workers to reduce noise
- Ensuring patient monitors and alarms are set on the lowest and safe levels
The departments of Nursing Quality at each Cleveland Clinic hospital facilitate the improvement of patient outcomes and promote the quality of nursing care. Through the coordination of collecting, analyzing and reporting on multiple nursing quality indicators, Nursing Quality is involved in major activities that heighten awareness to improve patient care and nursing practice.

“During the last two years, restraints have decreased by about 60 percent and pressure ulcers have decreased by about 40 percent. Our falls are also consistently below national benchmarks,” says Dana Wade, RN, MSN, CNS, CPHQ, Director, Nursing Quality, Cleveland Clinic main campus. “Use of trending reports by clinical directors and nurse managers help to visualize documented improvements/accomplishments and areas where we need to place ongoing additional efforts.”

Results from nursing quality initiatives can be seen at Hillcrest Hospital. The Ohio Perinatal Quality Collaborative recognized Hillcrest Hospital’s Special Care Nursery for its best-practice outcomes with central line maintenance bundles. Hillcrest achieved a reliability score of 100 percent in November 2009, and a zero percent infection rate for late-onset catheter-associated bloodstream infections. These quality achievements placed Hillcrest as the top Special Care Nursery in Ohio for all of 2009 in eliminating bloodstream infections in high-risk infants who are 22- to 29-weeks’ gestational age.

Hillcrest also implemented a best-practice campaign for hand hygiene.
Lakewood Hospital promoted and implemented national standards of care and innovative quality improvement processes by improving The Joint Commission's Core Measure results for acute myocardial infarction, heart failure, pneumonia and surgical care patients. To do this, daily huddles are used as a means of identifying Core Measure patients, documentation requirements are monitored, new admissions are screened and nursing staff facilitates just-in-time education.

**HUDDLES OFFER INSIGHT FOR FALLS PREVENTION**

The Zielony Institute met a primary goal of promoting the prevention of falls in 2009. A Falls Huddle Team formed at Cleveland Clinic’s main campus to bring forward insight and direction, leading to a new systemwide falls protocol.

A Falls Huddle is facilitated by a nursing director, clinical nurse specialist, pharmacist, nurse manager and nursing staff from the unit.

“Our falls rate is consistently below national benchmarks, but from lessons learned and the daily Falls Huddle rounding, we anticipate further decreases in the overall fall rate and repeater fall rate,” says Monica Weber, RN, MSN, CNS-BC, CIC, Nursing Patient Safety Officer/Magnet Program, Manager, Department of Nursing Quality.

These results were accomplished through various multidisciplinary interventions.

### 2009 Hand Hygiene Overall Compliance:

<table>
<thead>
<tr>
<th>Location</th>
<th>Compliance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ashtabula</td>
<td>91%</td>
</tr>
<tr>
<td>Euclid</td>
<td>78%</td>
</tr>
<tr>
<td>Fairview</td>
<td>85%</td>
</tr>
<tr>
<td>Hillcrest</td>
<td>94.1%</td>
</tr>
<tr>
<td>Huron</td>
<td>96%</td>
</tr>
<tr>
<td>Lakewood</td>
<td>76.4%</td>
</tr>
<tr>
<td>Lutheran</td>
<td>80%</td>
</tr>
<tr>
<td>Main</td>
<td>90%</td>
</tr>
<tr>
<td>Marymount</td>
<td>82%</td>
</tr>
<tr>
<td>Medina</td>
<td>90%</td>
</tr>
<tr>
<td>South Pointe</td>
<td>85%</td>
</tr>
</tbody>
</table>

**Falls With Injury, 2009**

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Cleveland Clinic  
The Stanley Shalom Zielony Institute for Nursing Excellence
The Zielony Institute formed a Skin Care Collaborative Project in 2008 that focused on continuous education and monitoring of treatments and trends in patient care and pressure ulcer prevention strategies — an effort that led to a 43 percent decrease in hospital acquired pressure ulcer rates by the end of 2008 that were maintained throughout 2009.

The Skin Care Collaborative Project implemented several initiatives including education, documentation, weekly pressure ulcer prevalence and simplifying policies and procedures.

“Our quality improvement project began in response to elevated hospital-acquired pressure ulcer NDNQI rates. Through the collaboration of clinical educators, clinical nurse specialists, certified skin care nurses and nursing quality coordinators, we were able to merge 13 different skin care policies into one and begin mandated education classes,” says Dana Wade, RN, MSN, CNS, CPHQ, Director, Nursing Quality, Cleveland Clinic main campus. “Efforts were associated with a decrease in hospital-acquired pressure ulcer rates from 7 percent in the first quarter of 2008 to a sustainable rate of 3 to 4 percent currently.”

“Daily rounds on patients with pressure ulcers, weekly skin care prevalence and monitoring documentation were the focuses for evaluation. As a result, pressure ulcer prevalence rates decreased, documentation compliance increased and several units outperformed NDNQI benchmarks for organizations with more than 500 beds,” Wade says. “Our system hospitals have initiated the same efforts, and our goal is for systemwide integration of the skin care collaborative practices, protocols and products through the Wound Care Affinity Group’s communication efforts.”
SHIFTING CULTURE TO PREVENT BLOODSTREAM INFECTIONS

In 2009, the Zielony Institute joined hospitals across the country to improve patient safety by adopting the Central Line Bundle. This nationally recognized evidence-based practice consists of five steps to reduce central line infections: cleaning hands, selecting the best insertion site, using proper skin preparation, using maximal barrier precautions and removing the catheter as soon as possible. Intensive care units follow CLABSI prevention as part of the Comprehensive Unit-based Safety Program (CUSP), a 10-state collaborative, funded by the Agency for Healthcare Research and Quality (AHRQ).

To ensure timely and consistent dissemination of important education and national patient safety goals regarding CLABSI and CUSP, Cleveland Clinic has instituted a systemwide initiative through its intranet. Videos, presentations, articles and standard guidelines are available at all times for all employees. Employees are also instructed on the SAVE That Line Campaign for line maintenance, developed by the Association for Vascular Access, which includes scrupulous hand hygiene, aseptic technique, vigorous friction to catheter hubs and ensuring patency of the device.

“Education is the key to best practices,” says Mary Oden, Senior Director, Infection Prevention, Quality and Patient Safety Institute. “By January 2010, we had systemwide collaboration. Through standardization, training and understanding offered from our intranet and educational initiatives, our employees are making a difference.”