

2023 – 2027 LLUMC Nursing Strategic Plan

Leadership - Conversations



LOMA LINDA UNIVERSITY
HEALTH

**Many Strengths.
One Mission.**

Our Vision

Transforming lives through education, healthcare, and research.



OUR MISSION

To continue the teaching and healing ministry of Jesus Christ.



Our Values

To continue the teaching and healing ministry of Jesus Christ.



LLUH Strategic Plan

CAMPUS CULTURE



The last decade has seen Loma Linda University Health increasingly integrate its multiple organizations, initiatives, management, and governance, following the One Loma Linda strategy. This culture of collaboration will be enhanced and further implemented in the following areas.

Spiritual Foundation
Organizational Synergy
Educational | Clinical | Research Collaborations

Personal Wholeness
Diversity | Equity | Inclusion

EDUCATION INITIATIVES



Our recognized and innovative academic programs will engage students in a deep learning process which blends commitment to academic excellence and a reliance on shared core values, helping students see their vocation as a spiritual "calling" to serve humanity. An increasing utilization of online educational modalities is underway.

Innovative Learning Experiences
Quality Faculty and Staff
Student Success
Culture of Discovery

Community Engagement – "Mission-Focused Learning
Inter-Professional Education and Practice
Global Academic Partners
University "Pivot"



LLUH Strategic Plan

REGIONAL-NATIONAL-GLOBAL IMPACTS



Our reputation for excellent patient care linked with quality educational programs will be enhanced through local, national, and global initiatives. Our recognized faith-based approach to health and healing will continue to distinguish our campuses and services.

Preferred Health System
Regional Clinical Network
Population Health Initiatives

Distance/Online Education
Research Collaborations

DISCOVERY AND INNOVATION



The spirit of discovery is an essential element of the learning process. We will nurture this through a variety of faculty, staff, and student initiatives

Translational Research Leading to Clinical Innovation
Grant Funding
Research Faculty Development

Research Building
Big Data Collaborative
Innovation Center



LLUH Strategic Plan



INFRASTRUCTURE DEVELOPEMENT

Both clinical and educational services are being greatly influenced by technological advances and architectural designs. We will seek to benefit our students and patients through these innovations while preserving the compassion and personal touch we are known for.

Maximize New Medical Center
Repurpose Current Hospital Space
Murrieta Expansion
Pediatric Outpatient Complex
International Heart Institute Facility
Comprehensive Cancer Center

School of Medicine Endowment
School of Dentistry Expansion
School of Nursing
Academic Learning Transitions
University Village
East Campus Hospital
San Bernardino Campus



FINANCIAL STRENGTH

Our growth and expansion in response to seismic mandates has led to substantial debt leverage for the LLUH hospitals. Our intent is to control expenditures until our revenue generation and philanthropy can rebalance our campus finances.

Operational Efficiencies
Balance Sheet Strengthening
Investment Flexibility

Improved Bond Ratings
Tuition Stabilization
Philanthropy Strategy



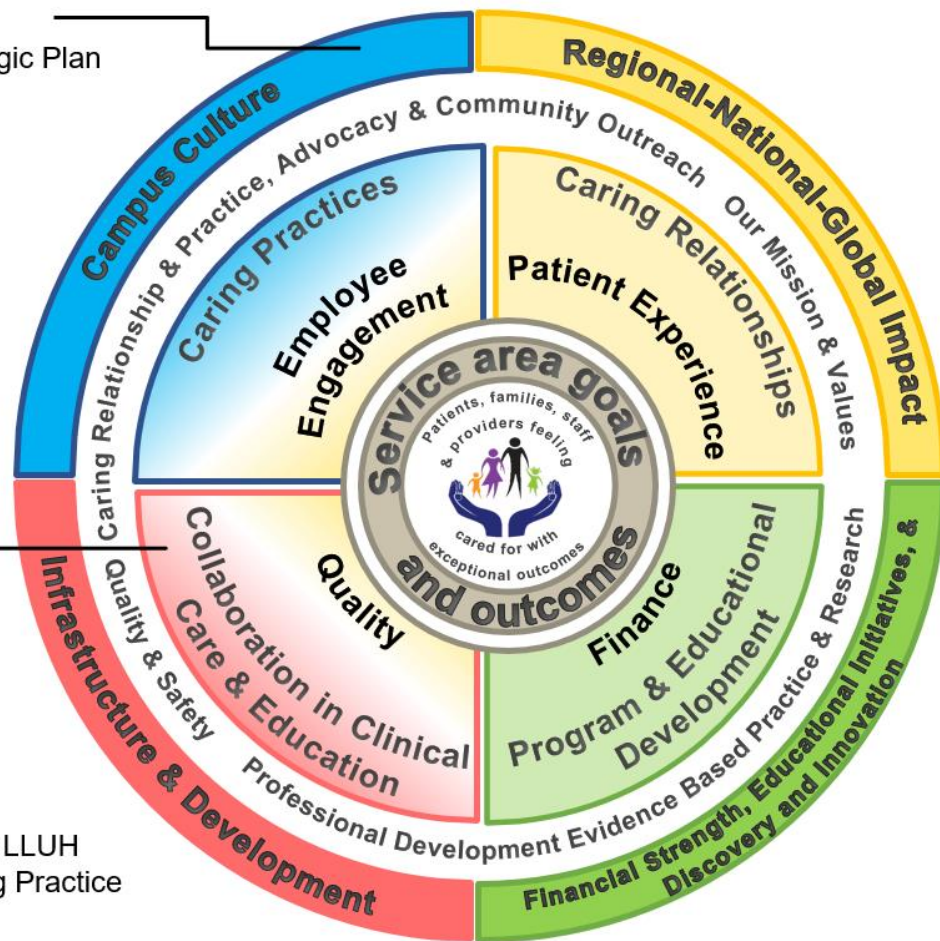
LOMA LINDA
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LLUMC Adult Nursing Strategic Plan

2023-2027

LLUH
Strategic Plan

Duffy's LLUH
Nursing Practice
Model





LOMA LINDA
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Duffy's LLUH Nursing Practice Model



Collaboration in Clinical Care
Creating an atmosphere of integration & collaboration.



Caring Practices
Preferred place of employment.
Participation in community health initiatives.



Caring Relationships
Create an exceptional experience.



Program & Education Development
Program development, resource optimization, and educational initiatives.

Nursing Strategic Goal 1 Quality	Nursing Strategic Goal 2 Employee Engagement	Nursing Strategic Goal 3 Patient Experience	Nursing Strategic Goal 4 Finance
Nurse driven patient outcomes exceed national benchmarks	Be recognized as the preferred place for clinician to work	Create an exceptional patient experience	Have the best clinical outcomes at reduced cost
Strategic Plan Outcomes	Strategic Plan Outcomes	Strategic Plan Outcomes	Strategic Plan Outcomes
1.) <u>CAUTI</u> : NDNQI Benchmark 2.) <u>CLABSI</u> : NDNQI Benchmark 3.) <u>HAPU</u> : NDNQI Benchmark 4.) <u>C.diff</u> : Hospital Benchmark 5.) <u>Falls with injury</u> : NDNQI Benchmark 6.) <u>Hand Hygiene</u> : Hand Hygiene compliance is $\geq 90\%$	1.) Each unit to have statistically significant improvement in Employee Engagement Score 2.) Participation in Employee Engagement Survey : $\geq 70\%$ 3.) Have a plan to reduce RN turnover by 0.25% 4.) Increase CN-C by 15 RNs 5.) Increase CN-D by 5 RNs 6.) Increase BSN or higher by 10 RNs 7.) Increase Professional Nursing Certification by 8 RNs 8.) All departments identify and train Peer Supporters based on unit support requirements.	1.) Have plan for HCAHPS LLUMC Nursing Communication Dimension to exceed the NRC 70 th percentile 2.) Have plan for HCAHPS Responsiveness of Hospital Staff to exceed 45 th percentile for LLUMC Nursing 3.) All leaders (Administrative Supervisors and above) observe the meeting free hour and participate in leadership rounds. 4.) Actualize diversity, equity, and inclusion through a shared culture, education and policies.	1.) Have a plan to meet YTD productive FTE within 1% 2.) Have a plan to achieve overtime/double time % as budgeted 3.) Have a plan to achieve YTD Registry % as budgeted 4.) Position Control Vacancy matches Positions Posted within 0.9 FTE 5.) Positions are filled within 60 days of being posted
Magnet Empirical Outcomes Exemplary Professional Practice; New Knowledge	Magnet Empirical Outcomes Structural Empowerment; Transformational Leadership	Magnet Empirical Outcomes Exemplary Professional Practice; New Knowledge; Transformational Leadership	Magnet Empirical Outcomes Exemplary Professional Practice; Structural Empowerment; Transformational Leadership

LLUMC Nursing Goals

Nurses who provide care to adult patients within Loma Linda University Health, continue the teaching and healing ministry of Jesus Christ through the integration of wholeness, our calling to diversity, equity, and inclusion, professional growth, and the Loma Linda Experience.



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Strategic Plan Outcomes

Nurses who provide care to adult patients within Loma Linda University Health, continue the teaching and healing ministry of Jesus Christ through the integration of wholeness, our calling to diversity, equity, and inclusion, professional growth, and the Loma Linda Experience.



Quality

Nurse driven patient outcomes exceed national benchmarks.



Employee Engagement

Be recognized as the preferred place for clinicians to work



Patient Experience

Create an exceptional patient experience .



Finance

Have the best clinical outcomes at reduced cost.

LLUMC Governance Shared Decision Structure



LOMA LINDA UNIVERSITY
MEDICAL CENTER



Overview

- NOC:** This is a system-level committee made up of interdisciplinary members that oversees the function and implementation of evidence-based nursing practice and projects while utilizing our Loma Linda University Health (LLUH) strategic plan.
- NRC:** This council encourages nurses' participation in research and evidence-based practice (EBP) change activities, including review, utilization, and the conduct of research studies. A strategic component of this is the Nursing Research Council that promotes hospital wide multi-disciplinary research-based practice and guides EBP changes to practice.
- CPC:** This council is an interdisciplinary body of clinical professionals who have decision-making authority over a broad spectrum of clinical practice issues.
- EC:** This council is an interdisciplinary body of clinical and non-clinical professionals who have decision-making authority over LLUH system-wide education and training.
- PGCC:** This council is made up of the PGC chairs from each department or unit PGC. This council allows bedside nurses to share and collaborate on professional nursing projects that impact the nursing strategic plan.
- PGCs:** These unit/department PGCs meet to collaborate on unit/department-based projects related to the nursing strategic plan.

LLUMC

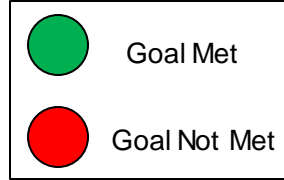
Adult Nursing Strategic Plan 2023 -2027

Nurses who provide care to adult patients, within Loma Linda University Health, continue the teaching and healing ministry of Jesus Christ through the integration of wholeness, our calling to diversity, equity, and inclusion, professional growth, and the Loma Linda experience.

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1.) CAUTI ; NDNQI Benchmark 2.) CLABSI ; NDNQI Benchmark 3.) HAPI ; NDNQI Benchmark 4.) C.diff ; Hospital Benchmark 5.) Falls with injury ; NDNQI Benchmark 6.) Hand Hygiene ; Hand Hygiene compliance is ≥90%	1.) Each unit to have statistically significant improvement in Employee Engagement Score 2.) Participation in Employee Engagement Survey : ≥ 70% 3.) Have a plan to reduce RN turnover by 0.25% 4.) Increase CN-C by 15 RNs 5.) Increase CN-D by 5 RNs 6.) Increase BSN or higher by 10 RNs 7.) Increase Professional Nursing Certification by 8 RNs 8.) All units identify and train Peer Supporters based on unit support requirements.	1.) Have plan for HCAHPS LLUMC Nursing Communication Dimension to exceed the NRC 70 th percentile 2.) Have plan for HCAHPS Responsiveness of Hospital Staff to exceed 45 th percentile for LLUMC Nursing 3.) All leaders (Administrative Supervisors and above) observe the meeting free hour and participate in leadership rounds. 4.) Actualize diversity, equity, and inclusion through a shared culture, education and policies.	1.) Have a plan to meet YTD productive FTE within 1% 2.) Have a plan to achieve overtime/double time % as budgeted 3.) Have a plan to achieve YTD Registry % as budgeted 4.) Position Control Vacancy matches Positions Posted within 0.9 FTE 5.) Positions are filled within 60 days of being posted
Magnet Empirical Outcomes	Magnet Empirical Outcomes	Magnet Empirical Outcomes	Magnet Empirical Outcomes
Exemplary Professional Practice; New Knowledge	Structural Empowerment; Transformational Leadership	Exemplary Professional Practice; New Knowledge; Transformational Leadership	Exemplary Professional Practice; Structural Empowerment; Transformational Leadership


Quarter4:2022

Nursing Strategic Plan Stoplight Report



Nursing Quality Dashboard	
Goals	
CAUTI: NDNQI Benchmark	
CLABSI: NDNQI Benchmark	
HAPU: NDNQI Benchmark	
C.diff: Hospital Benchmark	
Falls with injury: NDNQI Benchmark	
Hand Hygiene: Compliance ≥90%	

Source: NDNQI Vendor
Benchmark: Academic Medical Centers

Nursing Degree and Certification Dashboard	
Goals	
Increase CN-C by 15 RNs	
Increase CN-D by 5 RNs	
Increase BSN+ by 10 RNs	
Increase Professional Nursing Certifications by 8 RNs	

Source: OWL Education Report

Nursing Patient Satisfaction Dashboard	
Goals	
Nursing Communication dimension to exceed NRC 70 th percentile	
Hospital staff to dimension exceed NRC 70 th percentile	

Source: NRC Vendor
Benchmark: NRC Average

Nursing Strategic Plan

LLUMC

Adult Nursing Strategic Plan 2023 -2027

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1.) <u>CAUTI</u> : NDNQI Benchmark	1.) Each unit to have statistically significant improvement in Employee Engagement Score	1.) Have plan for HCAHPS LLUMC Nursing Communication Dimension to exceed the NRC 70 th percentile	1.) Have a plan to meet YTD productive FTE within 1%
2.) <u>CLABS</u> : NDNQI Benchmark	2.) Participation in Employee Engagement Survey : ≥ 70%	2.) Have plan for HCAHPS Responsiveness of Hospital Staff to exceed 45 th percentile for LLUMC Nursing	2.) Have a plan to achieve overtime/double time % as budgeted
3.) <u>HAPU</u> : NDNQI Benchmark	3.) Have a plan to reduce RN turnover by 0.25%	3.) All leaders (Administrative Supervisors and above) observe the meeting free hour and participate in leadership rounds.	3.) Have a plan to achieve YTD Registry % as budgeted
4.) <u>C.diff</u> : Hospital Benchmark	4.) Increase CN-C by 15 RNs	4.) Actualize diversity, equity, and inclusion through a shared culture, education and policies.	4.) Position Control Vacancy matches Positions Posted within 0.9 FTE
5.) <u>Falls with injury</u> : NDNQI Benchmark	5.) Increase CN-D by 5 RNs		5.) Positions are filled within 60 days of being posted
6.) <u>Hand Hygiene</u> : Hand Hygiene compliance is ≥90%	6.) Increase BSN or higher by 10 RNs		
	7.) Increase Professional Nursing Certification by 8 RNs		
	8.) All units identify and train Peer Supporters based on unit support requirements.		
Magnet Empirical Outcomes Exemplary Professional Practice; New Knowledge	Magnet Empirical Outcomes Structural Empowerment; Transformational Leadership	Magnet Empirical Outcomes Exemplary Professional Practice; New Knowledge; Transformational Leadership	Magnet Empirical Outcomes Exemplary Professional Practice; Structural Empowerment; Transformational Leadership

Examples of Professional Governance Projects based on the Nursing Strategic Plan

Quality Pillar:

Unit 12A reviews fall data and implement a new “Falls Free Bundle” utilizing evidence-based practice interventions such as hourly rounding.

Employee Engagement Pillar:

Unit 6A sets a goal of increasing BSN by 3 RNs and 3 Certifications by the end of 2023

Patient Experience Pillar :

Unit 10A creates a Cardiac Passport to improve nursing communication and pt. education

LLUMC

Adult Nursing Strategic Plan 2020 -2024

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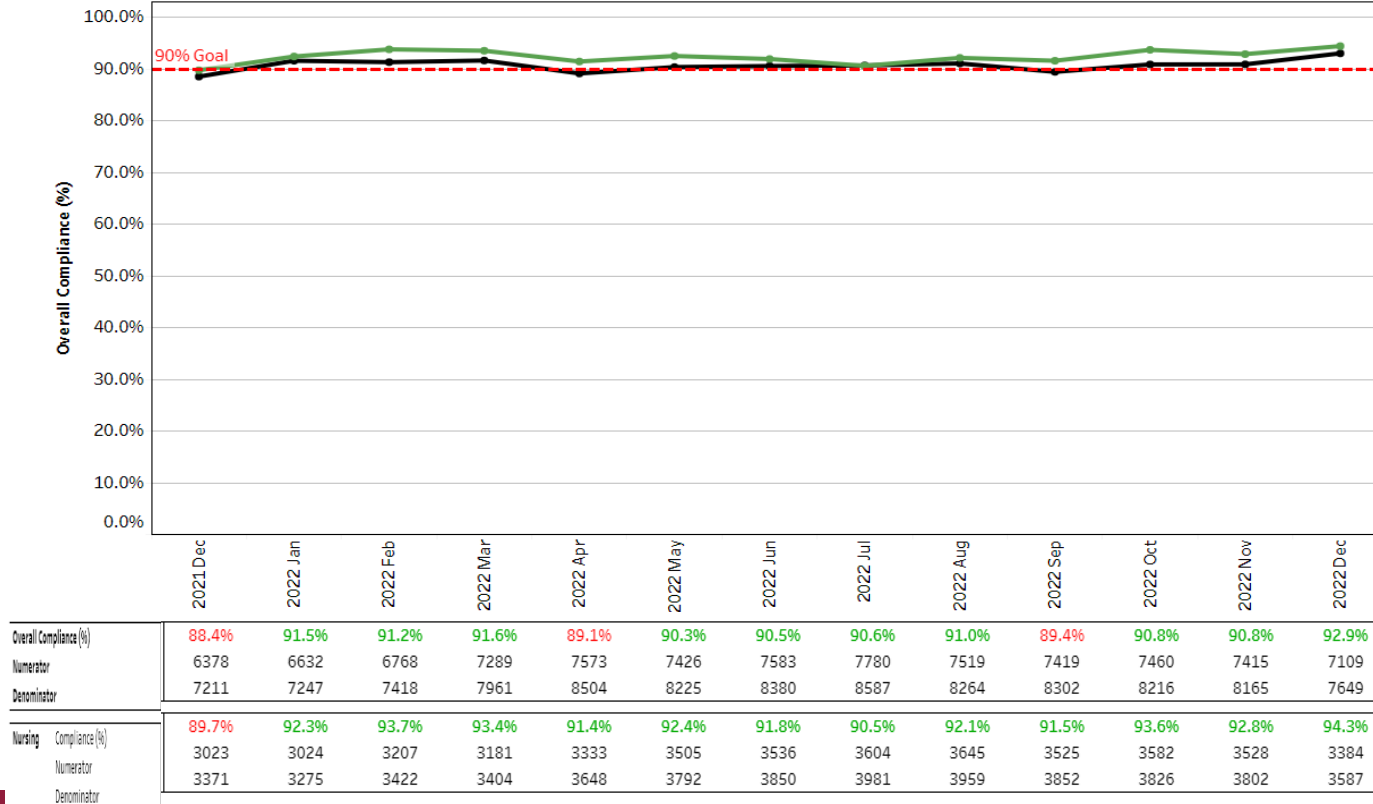


OVERALL HAND HYGIENE COMPLIANCE

December 2021 – December 2022

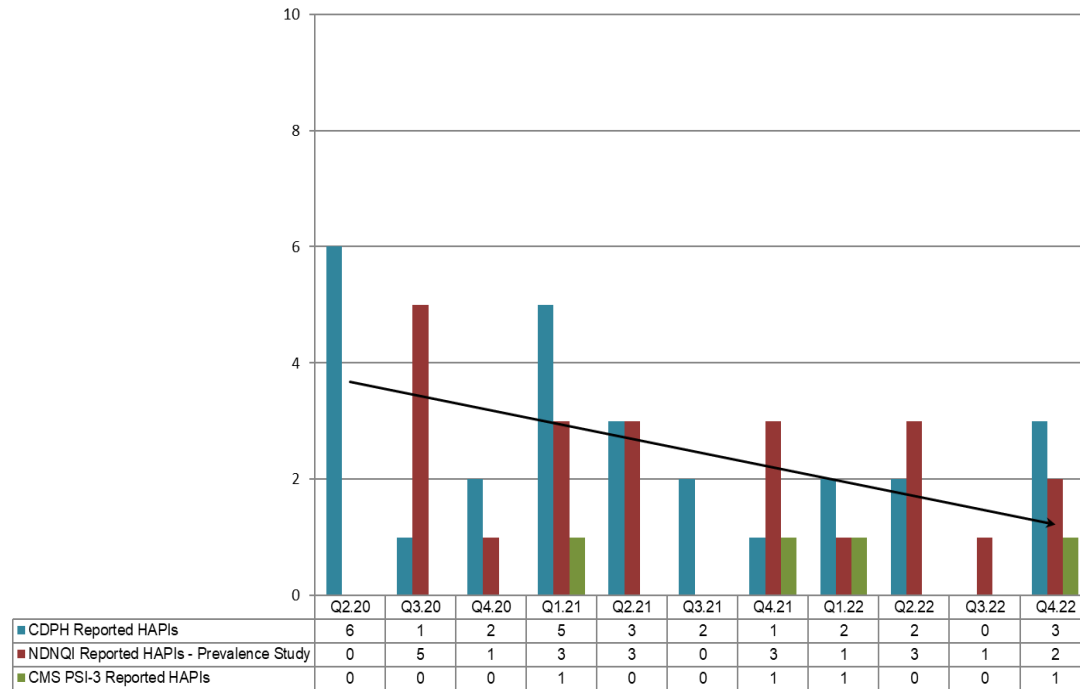
Loma Linda University Medical Center - Hand Hygiene Compliance

Higher is Better

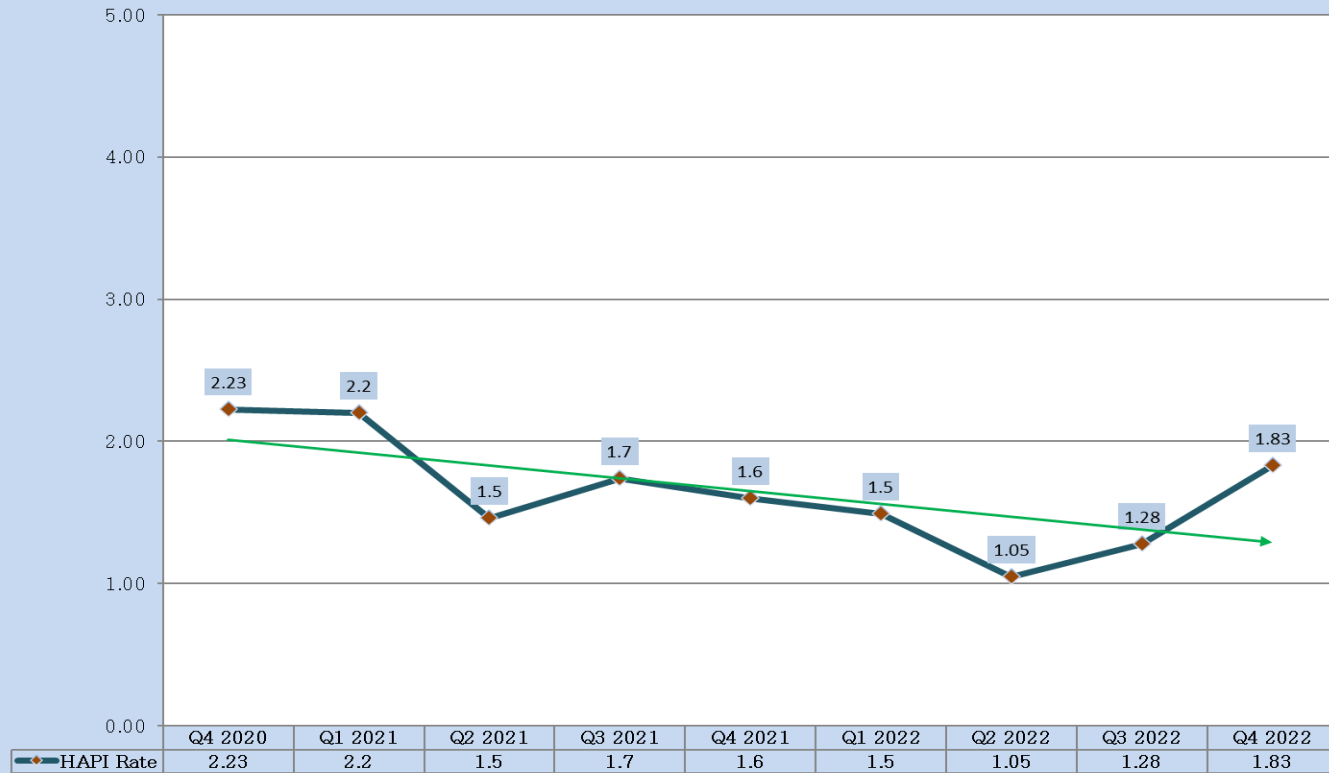


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LLUMC HAPIs Reported to External Agencies Q2 2020- Q4 2022



LLUMC HAPI Rate per 1000 Patient Days Q4 2020 – Q4 2022



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Loma Linda University Medical Center

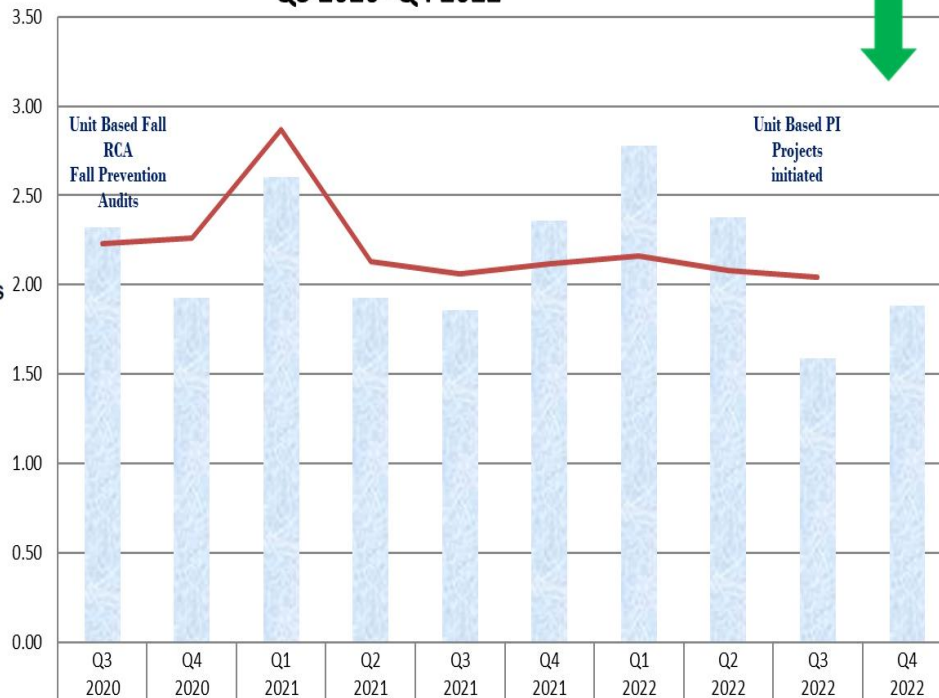
Compared by: Teaching Status

Peer Group: Academic Medical Centers

N = 187

Total Falls Q3 2020- Q4 2022

Lower is better



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Loma Linda University Medical Center

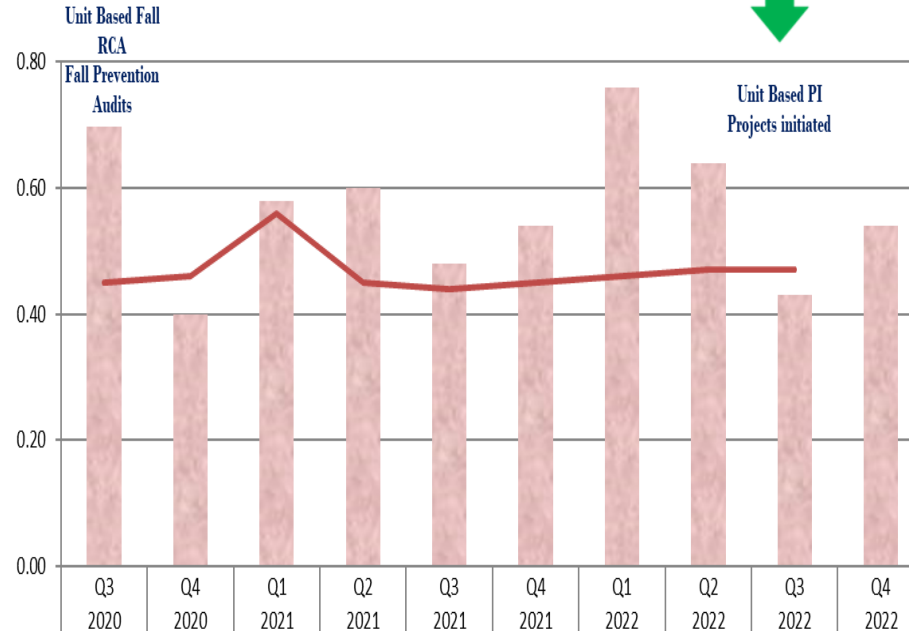
Compared by: Teaching Status

Peer Group: Academic Medical Centers

N = 187

Falls with Injury Q3 2020- Q4 2022

Lower is
better



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Fall - Moderate/Severe Injury Q3 2020 - Q4 2022

Lower is
better



Loma Linda University Medical Center

Compared by: Teaching Status

Peer Group: Academic Medical Centers

Unit Based Fall
RCA
Fall Prevention
Audits

Unit Based PI
Projects initiated



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Trending Well

- »Hand Hygiene
- »Hospital Acquired Pressure Injuries (HAPI)
- »Falls

Opportunity Identified

- »Falls with Injury

Action Plan:

1. Continue with Unit-based PI projects related to Fall Prevention – expand projects to other units
2. Revamping Purposeful Hourly Rounding initiative w/ Jennifer McDonald
3. Increase strengthening Fall Champion program



Magnet Quality:

» Vendor: **NDNQI**

~ National Database of Nursing Quality Indicators

» **Magnet Requirements:**



~ To submit 8 of the most recent consecutive quarters.

~ Nursing-sensitive Quality Indicators:

Inpatient	Ambulatory
Injury Falls	Injury Falls
HAPI Stage 2+	Patient Burns
CLABSI	Surgical Errors
CAUTI	

































































» **Goal:** $\geq 51\%$ of the units **OUTPERFORM**

the national benchmark in 5 out of 8 quarters

 = Magnet standard met
 = Magnet standard not met

MAGNET Nursing Quality Dashboard

Q4 2021

Inpatient				
Source: National Database of Nursing Quality Indicators (NDNQI)				
Units	Injury Falls	HAPI Stage 2+	CLABSI	CAUTI
Critical Care				
7A Surgical, Trauma, Transplant, and Neuroscience ICU	 	 	 	 
8A Medical ICU				
9A Cardiac/Cardiothoracic ICU				
1400 Med Surg ICU				
Step Down				
10A Cardiac Progressive Care				
12A Medical Progressive Care				
13A Neuroscience Progressive Care				
Medical				
11A Medical/Cardiac Care				
1300 Medical Acute				
Surgical				
1200 Adult Surgical				
14A Surgical Care				
15A Surgical/Trauma Care				
2100 Surgical Acute				
Med-Surg				
6A Oncology/Transplant				
Rehabilitation				
1100 Acute Rehab				
1500 Acute Rehab				



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Magnet Patient Satisfaction:

» Vendor: **NRC Health**

» **Magnet Requirements** (Inpatient and Ambulatory):

~ To submit 8 of the most recent consecutive quarters.

~ Choose 4 of the following 9 categories:

Patient Engagement	Courtesy and Respect
Patient Education	Responsiveness
Care Coordination	Pain
Safety	Careful Listening
Service Recovery	

» **Goal:** $\geq 51\%$ of the units **OUTPERFORM**
the national benchmark in at least 4 of the 9
categories

MAGNET Patient Satisfaction Dashboard

Overall Status

LLUMC – Inpatient			
LLUMC – Ambulatory			

Q1 2020 – Q4 2021

Goal: $\geq 51\%$ of the units/clinics
outperform the NRC benchmark in
at least 4 of the 9 categories

Source: NRC



Less than 40% of units/clinics
are outperforming the NRC
benchmark in at least 4 of the 9
categories



40-50% of units/clinics are
outperforming the NRC
benchmark in at least 4 of the 9
categories



More than 51% of
units/clinics are
outperforming the NRC
benchmark in at least 4 of 9
categories



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LLUMC Nursing Strategic Plan Dashboard

February 2021 Update																				
Goals/Outcomes	Quarter	Goal	Acute Care - Medicine					Acute Care - Surgery				Cardiac Services			Critical Care				Overall Progress ¹ (All LLUMC Hospitals)	
			4300	6100	6200	6300	8300	4100	8200	9200	9300	7100	7200	7300	4700	8100	9100	9110		
Quality																				
CAUTI <small>(Score is based on the rate over 1000 patient days and not on SIR)</small>	Q3-20	NDNQI Benchmark	0	0	0	0	3.77	0	0	0	0	0	0	0	1.29	0	0	0	0.35	
CLABSI <small>(Score is based on the rate over 1000 patient days and not on SIR)</small>	Q3-20	NDNQI Benchmark	0	0	0	0	0	0	0	0	0	0	0	0	2.18	1.33	0	0	0.43	
HAPI	Q3-20	NDNQI Benchmark	0	5.56	0	0	0	0	0	0	0	0	4.55	0	0	0	4.35	0	16.67	0.83
C.diff <small>(Overall Progress score is reflective of current quarter only)</small>	Q4-20	Hospital Benchmark	1	0	0	3	1	1	1	2	0	0	0	0	1	1	0	0	0.639	
Falls with Injury	Q3-20	NDNQI Benchmark	0.67	0	0	0	0	1.85	2.41	0.52	1.14	0	0	0	0	0	0.71	0	0.69	
Hand Hygiene	Q4-20	≥ 90% Compliance	84%	95%	86%	89%	90%	93.0%	82%	89%	98%	96%	93.0%	99%	98%	81%	90.0%	93.0%	91.2%	
Employee Engagement <small>(current count for each unit is shown on the unit column. Change from previous year is shown on Overall Progress column)</small>		Goal	4300	6100	6200	6300	8300	4100	8200	9200	9300	7100	7200	7300	4700	8100	9100	9110	Overall Progress ² (All LLUMC Hospitals)	
Reduce RN Turnover	Not yet available	reduce by 0.25%																	Not yet available	
Increase CN-C	as of January 2021	increase by 15	3	37			10	9	16	16	9	23	30	12	48	37	23		+16	
Increase CN-D	as of January 2021	increase by 5	0	0			0	3	0	0	1	1	0	0	1	1	0		-2	
Increase BSN and higher	as of January 2021	increase by 10	21	102			38	24	35	37	30	54	56	47	79	68	54		-15	
Increase Professional Nursing Certifications	as of January 2021	increase by 8	2	9			3	4	2	3	19	12	13	6	40	20	23		+27	
Patient Experience		Goal	4300	6100	6200	6300	8300	4100	8200	9200	9300	7100	7200	7300	4700	8100	9100	9110	Overall Progress ¹ (All LLUMC Hospitals)	
HCAHPS Nursing Communication	Q1-21	> 70th Percentile (83.3)	100	66.7	77.8	85.2	72.2	66.7	50	79.2	70.8	91.7	81	83.3	N/A	N/A	100	N/A	84.6	
HCAHPS Responsiveness	Q1-21	> 45th Percentile (64.6)	50	33.3	50	62.5	41.7	100	33.3	78.6	56.3	100	75	75	N/A	N/A	100	N/A	69.2	
Finance		Goal																	Overall Progress ¹ (All LLUMC Hospitals)	
Position Filled within 60 days <small>(reported at the LLUMC-license renewal)</small>	Not yet available	Within 60 Days																	Not yet available	