

NQUIRE Communiqué #1

NQUIRE Overview and Update for All BPSO®s

July, 2012

This is the first in a series of communiqués that will be distributed to all RNAO Best Practice Spotlight Organizations® (BPSO®s), to provide ongoing information about NQUIRE (Nursing Quality Indicators for Reporting and Evaluation) and the milestones that are applicable to each cohort.

WHAT IS NQUIRE?

NQUIRE was designed for BPSO®s to systematically monitor the progress and evaluate the outcomes of implementing the RNAO Best Practice Guidelines (BPGs) in their organizations. NQUIRE is the first international quality improvement initiative of its kind, and involves development and measurement of structural, process and outcome indicators related to each of the RNAO BPGs.

HOW WILL BPSO®s BE INVOLVED?

All BPSO®s will join NQUIRE using a two-phase approach that begins in August, 2012 with the 2012-2015 cohort, followed by all other BPSO cohorts joining NQUIRE in January 2013.

BPSO® participation in NQUIRE involves: signing the NQUIRE data sharing agreement, enrolling nursing units or health programs/teams/services implementing the guidelines, submitting BPG indicator data to NQUIRE, receiving reports from RNAO and, together with RNAO, analyzing progress with the purpose of continuous quality improvement through BPG implementation.

WHAT ARE BPG INDICATOR DATA?

Indicators have been developed for 15 clinical BPGs as phase 1 of this initiative (See Appendix A). These indicators are comprised of two to four clinical process measures and two to four clinical outcome measures, derived from the BPG clinical practice recommendations. Thus, the indicators reflect process and outcome measures of nursing clinical care across health sectors, as directed by the evidence contained in RNAO's BPGs. NQUIRE also collects structural indicators known to influence nursing care at the unit level of analysis, such as nursing skill mix and intensity, models of care delivery, absenteeism, turnover, and level of staff education.

Indicators are identified through a comprehensive process that includes literature reviews and consensus by the expert panel members involved in developing the guideline, clinicians representing BPSO®s, and a sample of NQUIRE users. Indicators are also identified using various established databases of quality measures, such as those from Accreditation Canada, the Canadian Institute for Health Information, Health Quality Ontario, the Joint Commission and others. Working with other data bases of quality measures ensures that there is consistency of indicators across different data bases, and advances our approach of "collect once and use multiple times."

RNAO is now also enriching its outcomes measurement program with technological enablers by developing nursing order sets (NOS). NOS are RNAO's evidence based nursing interventions derived



from RNAO's BPGs and mapped against ICNP and SNOMED CT nursing terminology. Nursing order sets are vendor neutral and can easily be embedded within health-care organizations' electronic patient records to display menus of context-specific clinical nursing interventions. Selection of the intervention by the nurse leads to automatic recording, facilitating the understanding of the link between clinical practice and outcomes.

WHEN WILL BPSO[®]s RECEIVE THE INDICATORS?

Indicators will be added to the NQuIRE Data Base using a phased-in approach. Indicators for the first 15 clinical BPGs included in phase one of the program will be disseminated to all BPSOs on July 31. Indicators for the remaining clinical BPGs will be developed and distributed to all BPSOs as they become available in 2012 and early 2013.

WHY IS NQuIRE IMPORTANT?

The utilization of NQuIRE will provide a number of benefits for patients, nurses, organizations and health systems, including:

Nursing-Sensitive Indicators: NQuIRE will result in BPSO[®]-validated and endorsed nursing-sensitive indicators. These will include existing nursing-sensitive process and outcome clinical indicators such as those for pain, falls, and pressure ulcers; as well as new nursing-sensitive process and outcome indicators derived from the wide range of clinical conditions addressed in RNAO's BPGs. NQuIRE will also include existing and new nursing sensitive structural indicators. In collaboration with the BPSO[®]s and other researchers, RNAO expects to advance the understanding of the interrelationships between structural factors and clinical processes that influence patient/client/resident outcomes. Our collective work will enable nursing to actively contribute to the safety and quality agendas and promote evidence-based policy decisions at the organizational and health system levels.

Comparative Reporting: NQuIRE will enable data comparisons within the BPSO[®] program for specific clinical populations, health sectors, organizations, and geographic regions, as well as promote meaningful data sharing and benchmarking. With NQuIRE data, BPSO[®]s can monitor their own progress in improving structural and clinical processes, quality of nursing care, and patient as well as organizational outcomes. NQuIRE will provide internal reports enabling participating BPSO[®]s to compare their indicator performance data with that of other units/programs/services/teams within their own organization. BPSO[®]s that wish to share their aggregate data will be part of the cross-BPSO[®] comparative results analysis with other like BPSO[®]s at the local, national and/or international levels that have also chosen to share their data. They will be provided with performance reports of local, national, and international BPSO[®] percentile distributions for indicators of interest in like organizations.

Evidence-Based Decision Making: NQuIRE data will inform where and how RNAO's BPGs are enhancing nursing practice and patient outcomes, as well as organizational and health system performance. Such data will guide the RNAO BPG Program and facilitate evidence-based decision making to promote effective utilization of nursing resources and highlight practical areas for further investments in nursing best practices.



Research Opportunities: Through formal authorization, researchers will be provided with opportunities to use NQuIRE to test nursing-sensitive indicators, refine reliable and valid measurement tools, and identify trends in nursing practice and patient outcomes.

WHAT WILL BPSO®s BE REQUIRED TO DO?

BPSO®s will be engaged in four key activities as part of NQuIRE. These activities are consistent with the BPSO® work related to implementing, evaluating, sustaining and disseminating multiple RNO BPGs through a systematic process.

1. BPSO® Enrollment: All BPSO® leads will be required to enrol their organizations in the NQuIRE program. This two-step process consists of:

Step 1: Signing an NQuIRE Central Data Base Agreement

Step 2: Completing a registration form that will be made available on the NQuIRE system. This registration form solicits organizational demographic data (e.g. health sector, organization size, etc.) and information about the BPGs selected and the implementation site(s) (e.g. nursing unit, program, service or team).

BPSO® leads for all cohorts will enroll their organizations in accordance with the timelines shown in the chart below. When enrolling, they will be asked to indicate whether they wish to share their aggregate data. This will include them in the comparative analysis with other like BPSO®s at the local, national and/or international levels that have also chosen to share their data.

2. Indicator Selection: Each BPSO® in the 2012-2015 cohort will select up to five of the BPGs they are implementing for which they will collect and submit data. They will have the opportunity to select from the initial 15 clinical BPGs included in phase one of the program as well as from the remaining BPGs as they are added to the NQuIRE Central Data Base. BPSO®s in the previous cohorts will select a maximum of five of the BPGs they are implementing from the list of BPGs for which indicators have been developed at the time of their enrolment, for which they will collect and submit data. RNO will provide the corresponding indicators to each BPSO upon notification of their BPG selection.

3. Data Collection: NQuIRE enables BPSO®s to capitalize, wherever possible, on the information infrastructure available within their organizations by aligning indicator definitions with existing performance measurement initiatives and available administrative data. BPSO®s may use databases and data retrieval systems already in place in their organizations to capture BPG indicator data for NQuIRE.

To maintain privacy, NQuIRE requires data collected at the patient level to be de-identified and aggregated by the BPSO®s to the level of the nursing unit or health program/service/team implementing the guideline, prior to submission. BPSO®s in the 2012-2015 cohort will collect baseline structural indicator data and BPG clinical process and outcome data beginning in September 2012, where possible prior to BPG implementation. They will collect post-implementation data on a quarterly basis thereafter.

BPSO®s in Cohorts 1,2 and 3 will collect structural indicator data and post-implementation clinical process and outcome data on a quarterly basis beginning with the first quarter in 2013.



4. Data Submission: BPSO®s will submit data to the NQuIRE Central Data Base through a user friendly, web-based data submission form.

HOW WILL THE DATA BE STORED?

The NQuIRE Central Database, which is located at the RNAO, will house indicator data submitted by our local, national and international BPSO®s. A high level of privacy and security is ensured through the de-identified nature of the indicator data, the user role-based access and the data encryption processes, which render data unreadable by unauthorized users.

WILL THERE BE TRAINING OFFERED TO HELP US WITH QUESTIONS AND DATA SUBMISSION?

RNAO will utilize a train-the-trainer approach to build capacity for all users of the NQuIRE system prior to data submission. BPSO® leads for the 2012-2015 cohorts including our international BPSOs will be trained in September 2012. All other BPSO leads will receive training in February 2013. All BPSO leads will assume responsibility for training the staff in their respective organizations.

WHAT ARE THE NEXT STEPS AND TIMELINES THAT BPSO®s SHOULD BE AWARE OF?

Date	NQuIRE Activities: July 2012 – June 2013
July 31, 2012	Indicators available for 15 RNAO clinical BPGs
August 7, 2012	2012-2015 BPSO® cohort receives NQuIRE Data Base agreement
August 7-10, 2012	2012-2015 BPSO® cohort receives NQuIRE registration instructions
August 10-17, 2012	2012-2015 BPSO® cohort completes online registration and BPG selection
August 31, 2012	2012-2015 BPSO® cohort receives indicators for BPGs selected
August 31, 2012	2012-2015 BPSO® cohort returns NQuIRE Data Base agreement
September 19, 2012	Training session - 2012-2015 BPSO® cohort (Spanish)
September 20, 2012	Training session - 2012-2015 BPSO® cohort (English)
September, 2012	Training session – Australia BPSOs
September 30, 2012	2012-2015 BPSO® cohort begins to submit baseline data to NQuIRE
Sept 2012-June 2013	Indicators for remaining RNAO clinical BPGs are phased-in and communicated to all BPSOs as they become available
October - November 2012	BPSO® Cohorts 1,2 and 3 receive NQuIRE Data Base agreement
December 3-7, 2012	BPSO® Cohorts 1,2 and 3 receive NQuIRE registration instructions
December 10-14, 2012	BPSO® Cohorts 1,2 and 3 complete online registration and BPG selection
January 2013	2012-2015 BPSO® cohort submits data to NQuIRE for 4 th Quarter in 2012
January 14-18, 2013	BPSO® Cohorts 1,2 and 3 receive indicators for BPGs selected
January 18, 2013	BPSO® Cohorts 1,2 and 3 return NQuIRE Data Base agreement
February 2013	2012-2015 BPSO® cohort receives internal/comparative reports
February 2013	Training session - BPSO® Cohorts 1,2 and 3
April 20, 2013	All BPSO® cohorts submit data to NQuIRE for 1 st Quarter in 2013
May 2013	All BPSO® cohorts receive internal/comparative reports



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Appendix A

Guidelines from Phase I for which there will be Structure, Process and Outcome Indicators Developed by July 31, 2012

Assessment & Management of Foot Ulcers
Assessment & Management of Pain
Assessment & Management of Stage I–IV Pressure Ulcers
Breastfeeding;
Client Centred Care
Decision Support for Chronic Kidney Disease
Nursing Management of Hypertension
Risk Assessment & Prevention of Pressure Ulcers;
Stroke Assessment;
Ostomy Care;
Prevention of Falls
Reducing Foot Complications
Screening for Delirium, Dementia & Depression
Self-Management in Chronic Conditions
Smoking Cessation

