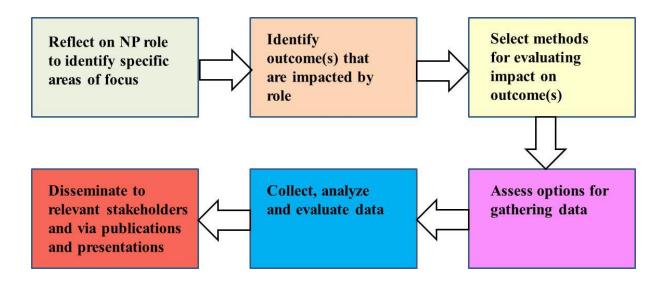
NP Patient Outcomes Toolkit

Assessing the outcomes of nurse practitioner (NP) care has become an essential aspect of practice. The Institute of Medicine (IOM) report on the future of nursing highlighted the importance of promoting the ability of advanced practice nurses to practice to the full extent of their education and training and to identify nurses' contributions to delivering high-quality care. Demonstrating NP contributions to patient care requires an assessment of the structures, processes, and outcomes associated with NP performance and the care delivery systems in which they practice. A number of studies have identified that NPs provide high quality, cost effective care. Yet, additional exemplars of how NPs impact outcomes are needed. Outcome evaluation and ongoing performance assessment are essential in demonstrating the impact of NP care.

Measuring NP Outcomes

Process:



☐ Identify NP role components for the evaluation:

Health promotion, health protection, disease prevention and treatment function; nurse practitioner-patient relationship; teaching-coaching function; professional role; management negotiating healthcare delivery systems; monitoring and ensuring the quality of healthcare practice.

□ Conduct literature review to gather information on outcomes conducted in specialty area/area of interest

□ Selecting outcome(s) to measure
□ Determine methods
□ Gather Data
□ Evaluate and Interpret Data
□ Disseminate to relevant stakeholders and via publications/presentations

Collecting the Data:

- Determine what data are currently available
- □ What are current databases that exist?
- □ What electronic data capture or records are available?

TIP: Good Outcomes are **SMART**

Specific: clear and precise

Measurable: amenable to evaluation

Appropriate: consistent with overall goal and identified priorities

Reasonable: realistic and feasible to achieve

Timed: outline a specific timeline for achievement

Bogue R. 2014¹²

TIP: Outcomes should be selected

- Easily Identifiable
- Measurable
- Practical
- Reflective of NP care

NP Outcomes Planning Grid:

	Inputs, Context (Structure)	Processes	Outcomes
Patient	Age Gender Ethnicity Marital status, social supports Educational background Health status (current and past) Previous experience with health system Special needs (e.g., visual, literacy, hearing) Expectations of provider and health system Access to care Insurance coverage	Performance of self-care behaviors Ability Willingness Family involvement in care delivery process Use of alternative or complementary therapies	Generic Physical health Mental health Symptom control Functional status Perceived well-being Satisfaction with care Adherence to treatment regimen Knowledge of condition, treatment program, and expected outcomes Specific (dependent on patient condition and need; representative examples) Serum glucose level Birth weight Reinfarction rate Transplant rejection rate Smoking quit rate Length of stay Ventilator days Wound closure, wound healing
APRN provider	Educational preparation Specialty focus Years of experience Level of self-esteem Resourcefulness Assertiveness	Expert practice Collaboration Communication patterns Interactions with other care providers & staff Expert coaching Consultation Clinical and professional leadership Ethical decision making	Productivity Provider and practice patterns, trending, benchmarking

	Inputs, Context (Structure)	Processes	Outcomes
		Evidence-based practice Case management Care delivery according to practice standards Documentation	
Setting	Geographic location (rural, urban, mixed) Type of facility (academic health center, acute care, clinic, industry) Diagnostic equipment Organizational culture and philosophy Administrative structure State regulations on advanced practice Policies and procedures Patient mix Type of care delivery model Availability of other services in vicinity Credentialing agency requirements State health department regulations Annual goals Annual budget	Care provider credentialing process Quality improvement process Communication patterns Governance process Care provider documentation process Annual performance review process Provider credentialing process	Length of stay Staff turnover rate Cost of services New program development Revenue generated Community satisfaction Provider satisfaction Staff satisfaction

^{*}Components are not all-inclusive of NP-related outcomes planning but serve as a guide for planning activities.

Adapted from Kleinpell & Alexandrov, 2014^2

Examples of NP Outcomes:



• Health status, symptoms, quality of life, functional status, self-care, knowledge, satisfaction



• Patient falls, infection rates, uptake of evidence based practice, guideline use, satisfaction with quality of care

Healthcare Utilization • Clinic wait times, hospital readmissions, length of stay, costs, no show rates, reminder systems evaluation

Care-Related

• Use/ordering of lab tests, rate of drug prescription, number of consultations

Performance

• Revenue generation, relative value units (RVUs), performance ratings, clinical competence, consultation patterns

Points to Consider:

- What are outcomes valued by your institution/organization/practice?
- Are any of these outcomes (clinical and other) directly affected by NPs?
- How do the outcomes chosen measure your NP core competencies?
- Define your outcome and goal. Example: For all patients with "X" disease, begin "Y" medication if not contraindicated for the individual patient. Goal would be 100%
- How will the outcome be measured?
- Is there data already being collected on this metric? If so, how will the data be mined and presented in a meaningful reader format?
- Can systems be created to automatically collect the data? If not, how will the NP collect the data?
- If the NP is collecting the data, can the collection process be integrated into the current workflow to maintain efficiency?
 - □ Can the data be collected manually on a checklist and entered by an assistant into a spreadsheet?
 - □ Can a simple survey be created and easily accessible for the NP to complete on each case?
 - □ Can the data collection be built into an existing electronic system, such as an electronic progress note; where the data can feed a spreadsheet, table, or dashboard?
- For the measures where the goal is a value other than 100%, what is the target value? What is a reach value? What is an unacceptable value?
- How will the NPs and others in the practice be able to view the data? Example: graphs, dashboards, scorecards
- For practice and institutional review, how are the outcomes data quantified for value?

Adapted from Kapu and Kleinpell, 20138

Tips for Getting Started:

Review the literature¹³ for examples of NP outcome assessments in your specialty area of focus or area of interest Consider contacting the author to assess specifics as needed Consider replicating an outcome assessment method/plan • Consider making the project an interprofessional/team project • Schedule project work time • Consider conducting a pilot project initially Further refine based on the results • Remember: Statistically significant results should not take priority necessarily, over clinically significant results – each has a role in judging the important of the findings • Consider continuing to track outcomes as part of the NP role • Publish/present on the results of the initiative

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