### Mission
**Changing Medicine. Changing Lives.**

### Vision
**World Class People. World Class Medicine**
For Iowa and the World.

### Values

### Clinical Quality & Service
- Provide world class nursing care to optimize health for everyone.
- Advance world class discovery through excellence and innovation in nursing research and EBP.
- Develop world class nurses through excellent, innovative, and humanistic educational curricula for learners at every stage.
- Foster a culture of excellence that values, engages, and enables our workforce.

### Research Goal
- Develop an educational infrastructure that supports critical thinking, clinical practice excellence and professional development for passion for life-long learning.
- Develop and use creative, innovative and evidence-based educational strategies to promote excellence in clinical practice.
- Foster collaborations with educational, clinical and regulatory agencies, and professional organizations.

### Education Goal
- Continue to build a pipeline for professional health care providers (RN, LPN, MA, Surg Tech) through development and enhancement of academic clinical placements at UIHC.
- Develop and market products and services for EBP dissemination and implementation within and across sites.

### People Goal
- Create innovation through the Research and EBP internship programs to improve quality/safety.
- Expand collaboration with CoN and other disciplines to support clinical and translational research priorities that align with nursing/UIHC clinical and programmatic priorities or innovations.
- Support independent and/or interdisciplinary teams.

### Diversity Goal
- Foster a culture of excellence that values, engages, and enables our workforce.
- Create an environment of inclusion where individual differences are respected and all feel welcome.

### Growth and Finance Goal
- Optimize a performance-driven business model that assures financial success.

### Strategies and Tactics
- **Strategies and Tactics**
  - Improve patient care quality and safety through collaboration with physicians and interdisciplinary teams.
  - Reduce Hospital Acquired Infection Rates (Q5).
    - Improve hand hygiene compliance rates.
    - Utilize national benchmarks to follow progress toward reducing HAIs.
    - Implement evidence-based interventions to reduce HAIs.
  - Optimize patient safety by reducing falls with injury, HAPU, CAUTI, CLABSI, core measures and ambulatory care-sensitive events (Q5).
  - Improve patient safety by improving nursing sensitive aspects of: (Q5)
    - TJC/CMS unit-specific Core Measures.
    - Med errors that cause harm.
  - Enhance the use of the QI dashboard for NSI (R7).
  - Disseminate "lessons learned".

### Accountable Leaders
- **Accountable Leaders**
  - Sharon Tucker, RN (All directors reporting to the CNO)
  - Lou Ann Montgomery, RN (All directors reporting to the CNO)
  - John Wagner, RN (All directors reporting to the CNO)
  - Kenneth Rempher, RN (All directors reporting to the CNO)

### Written: 2/28/13
### Revised: 9/1/13; 1/10/14; 8/10/14; 4/27/15; 7/11/15; 7/27/15; 9/13/15; 10/26/15; 4/25/16
Identify ambulatory EBP projects

Collaborative research within NSPC non nursing areas
- Impact local/national/international nursing through expansion of consultation and dissemination of nursing research and EBP programs and products
- Investigate compensation for unit participation in research studies
- Improve/grow scientific infrastructure
  - o Identify and disseminate funding opportunities for nursing research
  - o Expand portfolio of grant submission with different agencies
- Explore development opportunities with UI Foundation
  - o Continue developing a partnership with IT, HCIS, and CoN to guide data warehouse for nursing research
  - o Identify and develop resources for grant writing and funding targets to achieve extramural funding
- Increase nurse initiated research & participation in other research teams
- Establish interdisciplinary work groups that focus on clinical and research priorities as defined under Clinical Quality & Service pillar
- Develop nursing expertise at the divisional and unit level for leading research & EBP, and beginning to create division or specialty-based EBP consultation teams
- Create linkages with interdisciplinary research collaboratives on campus, e.g., ICTS and Obesity Cluster
- Horizon scan for cutting edge innovations for translation
- Create linkages from student and nurse residency projects within infrastructure
- Optimize technological innovations that match research and EBP priorities

Achieve high reliability organization targets
- Grow the Wellness program
- Implement scheduling changes based on evidence on shift length and scheduling practices on worker fatigue
- Collaborate with the CoN/other interprofessional groups for NCEC simulation accreditation
- Collaborate with CoN, Nursing HR and UHHC leadership to optimize use of CNL & DNP graduates in transitions of care programs
- Build an ongoing succession plan to keep clinical educators in the pipeline
- Continue implementation and further development of the HSP training program for nursing assistants in the organization
- Continue Clinical Leadership Development Academy and Executive Leadership Academy and options for direct staff as part of succession planning and professional development
- Continue promoting and utilizing tuition support for leaders and staff
- Continue to develop infrastructure, technology to support HR staff in recruitment efforts
- Implement Compliance/Qualifications system for improved tracking of safety and compliance
- Develop a comprehensive workforce plan that includes succession planning for clinical leaders and NPLs
- Continue to promote/maintain rewards and recognition programs
- Sustain regionally competitive compensation package
- Maintain Magnet Recognition Program® designation to attract and retain a world class workforce
- Create a CNL graduate advisory group
- Develop EBP projects to address leadership issues
- Train staff and implement AHRQ Team STEPPS on identified units
- Apply for Beacon award for units across the organization

Represented groups
- Utilize a professional recruitment site that includes diversity recruitment efforts across disciplines
- Conduct CLAS assessment in spring of 2016 followed by detailed review of outcomes and action planning as appropriate.
- Continue presenting “Working in a Multigenerational Workforce” to all nurse residents and staff
- Support plain language usage/initiatives
- Assess provider’s ability to deliver culturally competent and sensitive patient care as measured by patient satisfaction surveys
- Continue departmental participation in the MLK Diversity week activities
- Continue to promote/maintain rewards and recognition programs
- Sustain regionally competitive compensation package
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Develop a sense of shared fiscal responsibility by engaging staff at all levels in understanding cost and cost management.

Increase understanding of Value-Based Purchasing principles across all levels of nursing in the organization.

Benchmark against high performers and accepted national standards using Action O-I, Magnet, NDNQI and other standards.

Continue to educate managers and staff on hospital and unit level finance.

Develop flexibility within workforce by cross training as appropriate, hiring hourly employees to assist during times of peak need, flexing staffing down with low census.

Continue purchasing at the lowest/most local level to promote understanding of cost/waste and to support front line accountability.

Include a financial analysis in all product requests with attention to short and long term benefits.

Increase technology available to nurses at all levels to do their work.

Trend LOS and readmission rates to compare with UHC, CMS, Milliman and other industry benchmarks.

Developing plan for improvement

Horizon scan for cutting edge technologies and innovations that match research and EBP priorities

Improve delivery of care

Utilize a professional recruitment site that includes diversity recruitment efforts across disciplines

Conduct CLAS assessment in spring of 2016 followed by detailed review of outcomes and action planning as appropriate.

Continue presenting “Working in a Multigenerational Workforce” to all nurse residents and staff

Support plain language usage/initiatives

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Sustain regionally competitive compensation package

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that focus on one or more of the following: wait times, readmit rates, coordination of care, time to access clinic appointment, clinic to inpatient bed time

- Support roll-out of Hush Campaign

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<td>• Epic capabilities to facilitate innovations in nursing</td>
<td>• Online education program (ICON, My Information)</td>
<td>• Education and staff development</td>
<td>• Diversity programming, services and activities sponsored by the UHIC and the greater University of Iowa and State of Iowa, including online educational materials</td>
<td>• Data-driven business planning</td>
<td>• Robust financial and performance-reporting systems</td>
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<td>• Education and staff development</td>
<td>• EBP and research database with linkage from QM database</td>
<td>• Communications</td>
<td>• UI CON CNL faculty</td>
<td>• UHC benchmarking</td>
<td>• Increase funding from research grants/participation</td>
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<td>• NICHE curriculum</td>
<td>• Funds for travel to national/ international programs (for training and dissemination)</td>
<td>• Policy and Procedure changes</td>
<td>• Shared governance charters</td>
<td>• Epic Working Acuity Tool and other Epic resources</td>
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<td>• Magnet Recognition Program® standards</td>
<td>• CoN/Office of Nursing Research for statistical analysis &amp; consultation</td>
<td>• Human Resources</td>
<td>• AHRQ Team STEPPS curriculum</td>
<td>• Support from colleagues in PFS to assist in CDLA and other educational ventures</td>
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<td>• CMS/TJC standards</td>
<td>• HCIS</td>
<td>• Funding for professional development clinics</td>
<td>• UI CCM Cultural Affairs &amp; Diversity Initiatives Office</td>
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<td>• Policies, procedures and practices</td>
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<td>• CQSPI/Epidemiology</td>
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<td>• UHC</td>
<td>• Data management and statistical support</td>
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<td>• NDNQI/ Press Ganey™</td>
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Quality Dashboards

Post-campaign data having earlier discharge times transfer time and throughput by to transfer time, ED entry to or > 90%

Compliance with hand hygiene at required NSIs (QS1):

The following 2015 Magnet-time for the majority of the units for the indicators the majority of the national database the majority of Outperform the mean/median of a NICHE Hospital

Evaluation of staff satisfaction with

Evaluate patient satisfaction with

Improve patient flow, bed requests

Improve worker safety

Maintain a rate of NSPC staff

Maintain a rate of NSPC staff compliance with hand hygiene at or > 90%

Improve worker safety

Improve patient flow, bed requests to transfer time, ED entry to transfer time and throughout by having earlier discharge times

Evaluate patient satisfaction with

Noise on units comparing pre and post-campaign data

Evaluation of staff satisfaction with Quality Dashboards

At least one nurse at all times on the IRB Committee

Increase in the number of:

Nurse-led and nurse-involved research studies

Internal and external consultations documented

Internal and external offerings

Grants submitted and dollars allocated

Collaborations with CoN and other faculty

Presentations and publications

Newly developed products and total distributed

Research studies by non-nursing entities within NSPC

Nurse Residency Program: (E5, E6)

First year retention rate greater than 85% for program participants per cohort and per FY

UHHC outcomes data: show improvement from program beginning to end on Casey-Fink measures. On GNFPE, outperform the benchmark mean the majority of the time on commitment scores

Number of nurse residents attaining PRP Level 1 and 2

Sustain or increase in the number of students placed at UHHC and student contact hours

Increase the number of certified nurses (all levels of nurses included) within the eligible pool by 0.5-1% annually in each CY

Maintain the number of certified nurse leaders within the eligible pool to meet or exceed 90% each CY

Increase the # of BSN or higher degree RNs by 1%per CY to work toward achieving the goal of 80% BSNs by 2020 as part of the IOM Future of Nursing national goal (P6)

Number of UHHC hosted non-nursing conferences

Number of certified non-nursing clinicians (i.e. MA’s)

DEU metrics:

Number of DEUs

Number of UHHC-based clinical instructors assigned to DEU

Number of new graduates recruited to UHHC following placement in DEU

Outperform the benchmark mean or median of the annual nurse work satisfaction survey (QS4; D1)

Number of CPLs employed throughout organization

Turnover and vacancy rates measured and compared against the national recruiters’ data base

Baseline number of nurses at Level 1 and Level 2 of Professional Recognition Program; number of staff reapplying for maintenance or change to a different level

% of performance appraisals completed (P1)

Time to hire (P2)

Magnet Recognition Program® designation status maintained (P7)

HR Compliance tracking system developed and implemented (P9)

Percentage of experience nurses hired

Submit additional Beacon applications

Maintain status as a NICHE Hospital

Increase in # of Gerontology Resource Nurses through NICHE education

Increase programs/year in-services and CEUs available on multicultural and multigenerational issues

ELNEC training opportunities

Complete Cultural and Linguistically Appropriate Assessment (CLAS) by December 31, 2016

Increased diversity of workforce: baseline of age, gender and ethnicity; Men in Nursing initiatives

Outperform benchmark mean on Press Ganey survey question concerning diversity (D3)

% of nursing applicants self-reporting a non-white ethnicity

CultureVision metrics

Flex budgets for all MFks (GF2)

Decrease lost assets and increase efficiency with RTLS (Aero Scout)

Contribute to improving readmission rates through nursing discharge follow-up phone calls and increasing the number of navigators – value?

Number of NMs completing Nursing Finance Series in CY 2015 and 2016

Recruitment and hiring (GF1)

Philanthropic dollars received (GF6)

Number off DoN staff participating in “We are PHIL” (GF6)