

# Talk Data to Me

## Using Data to Drive Improvement

*Cohort 5*

*Learning Session 1*



**Steven J. Schweon, RN, MPH, MSN, CIC, HEM**

Infection Preventionist

[Sschweon@ptd.net](mailto:Sschweon@ptd.net)

## Objectives

- Identify how project data supports the program goals.
- Summarize the data to be collected and submitted.
- Recognize how data collection and measurement evaluation support quality improvement efforts in your facility.

## Why is Data Collection Crucial?

We use the data collected to:

1. Assess the impact of the project's clinical and cultural interventions on the program goals to:
  - Reduce urinary catheter use and CAUTIs
  - Improve patient safety culture
2. Guide quality improvement efforts by:
  - Highlighting areas of success
  - Identifying opportunities for improvement

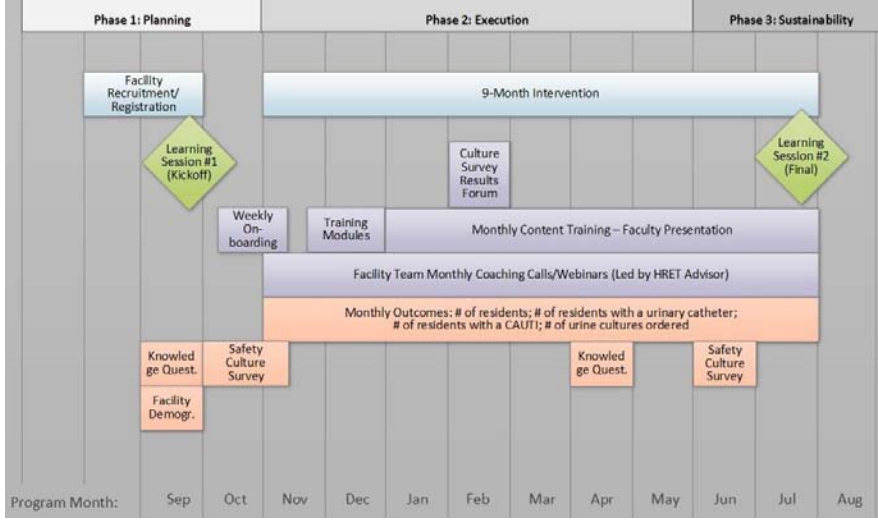
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## Program Measurement Schedule

Component	Item	Frequency/Schedule	Submission
Descriptive & Cultural Measures	Registration	Once, by <b>Sept 30</b>	Online (Cvent) One per facility
	Demographics	Once, by <b>Sept 30</b>	Online (Cvent) One per facility
	Safety Culture Survey	<ul style="list-style-type: none"> <li>• Program month 4/5</li> <li>• Program month 12</li> </ul>	Online (Cvent) One per staff
Process Measures	Knowledge Questionnaire	<ul style="list-style-type: none"> <li>• By <b>Sept 30</b></li> <li>• Program month 10</li> </ul>	Online (Cvent) One per staff
	Training Evaluation	After each event	Online (Cvent) One per attendee
	Team Communication Guide (Optional)	<ul style="list-style-type: none"> <li>• Program month 6</li> <li>• Program month 9</li> <li>• Program month 12</li> </ul>	Online (CDS) One per facility
Outcome Measures	<ul style="list-style-type: none"> <li>• Resident days</li> <li>• Resident-catheter days</li> <li>• CAUTIs</li> <li>• Urine cultures ordered</li> </ul>	Monthly, beginning in program month 5	Online (CDS) One per facility/month

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# Data Collection Timeline



Cvent & CDS

# DATA SUBMISSION SYSTEM OVERVIEW

## Cvent

- Secure, web-based platform used for data submission and reporting
- Data submission
  - Facility Registration **due September 30**
  - Facility Demographics **due September 30**
  - Staff Knowledge (Skills) Questionnaires (twice, month 3 and 10)
  - Staff responses to Safety Culture Survey (twice, program month 4-5 and 12)
- Reporting
  - Facility status on submission of required data elements

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## Data Collected via Cvent Cultural Measures & Process Data

Data Collected	Who Completes It	Frequency	Reports
Registration	Facility Team Lead	1x to enroll	N/A
Facility Demographics	Facility Team Lead	1x at enrollment	1 month after submission deadline
Knowledge Questionnaire	5 licensed staff 5 non-licensed staff	2x	weeks after submission deadline
Nursing Home Survey on Patient Safety	At least 60% of staff working $\geq$ 8 hours per week (contracted and employed)	2x – baseline and follow-up (end)	6 weeks after submission deadline
Educational Event Evaluation	Attendees	As they occur	N/A

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## Registration and Facility Demographics Overview

Provides valuable information for the national project team and organizational leads, by identifying:

- Facility team leadership for program communication
- Current clinical procedures and quality improvement practices
- Current data collection and monitoring efforts
- Current infection control policies and procedures

**WHO:** Facility

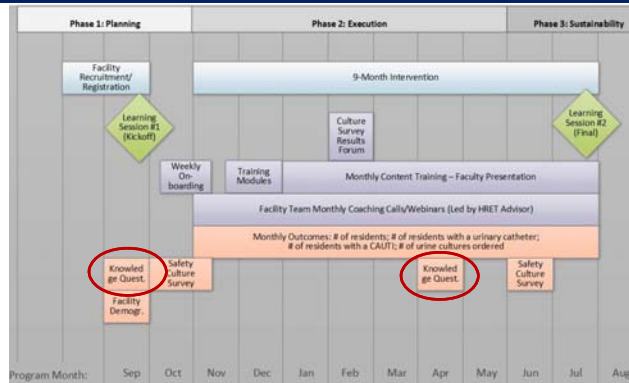
**WHEN:** Once, at program start

**WHERE:** Cvent – web link distributed to facility team lead by HRET Program Manager

**HOW:** Facility team lead completes for facility

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## Knowledge Questionnaire WHO, WHEN, WHERE & HOW



**WHO:** At least 10 staff members: 5 licensed, 5 unlicensed

**WHEN:** Months 1 and 8

**WHERE:** Cvent –web link will be distributed to facility team lead by HRET Program Manager

**HOW:** Each staff member completes online survey by end of month

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## Safety Culture Survey

Individual elements are aggregated across 12 domains to assess staff perceptions of patient safety culture:

<b>Teamwork</b>	Feedback and communication about incidents
<b>Staffing</b>	Communication openness
<b>Compliance with procedures</b>	Supervisor expectations and actions promoting resident safety
<b>Training and skills</b>	Overall perceptions of resident safety
<b>Non-punitive response to mistakes</b>	Management support for resident safety
<b>Handoffs</b>	Organizational learning

<b>WHO:</b>	All facility staff who regularly work at least 8 hrs/week (both employed and contracted)
<b>WHEN:</b>	Twice: program months 4-5 and program months 10
<b>WHERE:</b>	Cvent – web link will be distributed to facility team lead by the HRET Program Manager
<b>HOW:</b>	Each staff member completes online survey

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## Comprehensive Data System (CDS)

- Secure, web-based platform used for data submission and reporting
- Data submission:
  - Outcome data (monthly, beginning in November)
    - Resident days, resident-catheter days, CAUTIs, urine cultures collected
- Reporting:
  - Facility progress on catheter utilization, CAUTI, and urine culture collection rates

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## Data Collected via CDS

### Outcome Measures & Process Data

Data Collected	Who Completes It	Frequency	Reports
Outcome Measures*	Data Coordinator	Monthly (by the 15 <sup>th</sup> of the following month of which data is collected)	<ul style="list-style-type: none"> <li>Every Friday on CDS (run charts)</li> <li>1<sup>st</sup> week of each month for month prior</li> </ul>

\* If you are submitting CAUTI events to NHSN, your data can be transferred to CDS directly by conferring rights to an HRET group

<b>WHO:</b>	Facility
<b>WHEN:</b>	Monthly / quarterly as per above schedule
<b>WHERE:</b>	CDS – login credentials will be provided via HRET Program Manager
<b>HOW:</b>	Data coordinator collects data at facility and submits to CDS

## Clinical Outcome Measures

### Data Overview

#### Resident Days

- Every day a resident (with or without a catheter) is in your facility = one resident day.
- Collect at the same time, each day of the month.

#### Number of Urine Cultures

This includes urine cultures collected for every resident (i.e. with or without catheters) each month.



#### Number of CAUTIs

- CAUTI is counted on the **first day** that the cluster of signs and symptoms, lab reports and the presence of a catheter for more than 2 consecutive days are found together
- CAUTI is an event which may continue for days or even weeks, but it is counted **only once, not each consecutive day**
- Note that a resident may have multiple CAUTI events in one month

#### Catheter Days

Every day a resident has an indwelling urinary catheter = one catheter day.

- Catheter needs to stay in place (i.e. not an in and out catheterization)
- Catheter is through the urethra (i.e. not suprapubic or urostomies)
- Collect at the same time, each day of the month



Example:  
A facility has 7 residents with indwelling urinary catheters for the month of June. During the midnight census the following data are collected:

Resident	Days with Catheter
1	30
2	30
3	30
4	10
5	12
6	7
7	4

$(30 \times 3) + 10 + 12 + 7 + 4 = 123$  catheter days

## LTC Facility Responsibilities, Expectations and Recommendations

### COMMUNICATION & FEEDBACK IN YOUR LTC FACILITY

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## LTC Facility Team Roles & Responsibilities

We encourage you to designate a primary and back-up for each role

Facility team lead	<ul style="list-style-type: none"><li>• Completes registration &amp; demographics</li><li>• Ensures all program data are submitted</li><li>• Participate in all educational activities</li></ul>	<ul style="list-style-type: none"><li>• Review data and share results with facility staff, leadership, committees and resident/family council</li></ul>
Data coordinator	<ul style="list-style-type: none"><li>• Ensures all outcome and process data are collected and submitted</li><li>• Reviews &amp; shares data reports</li><li>• Monitors data submission rates</li></ul>	<ul style="list-style-type: none"><li>• Identify opportunities for clinical and cultural improvements to discuss with team</li></ul>
Survey coordinator	<ul style="list-style-type: none"><li>• Reviews safety culture marketing/administration survey materials</li><li>• Promotes safety culture survey with all facility staff</li><li>• Participates in Safety Culture results forum webinar</li><li>• Monitor data submission rates</li><li>• Ensures staff complete skills questionnaires</li></ul>	

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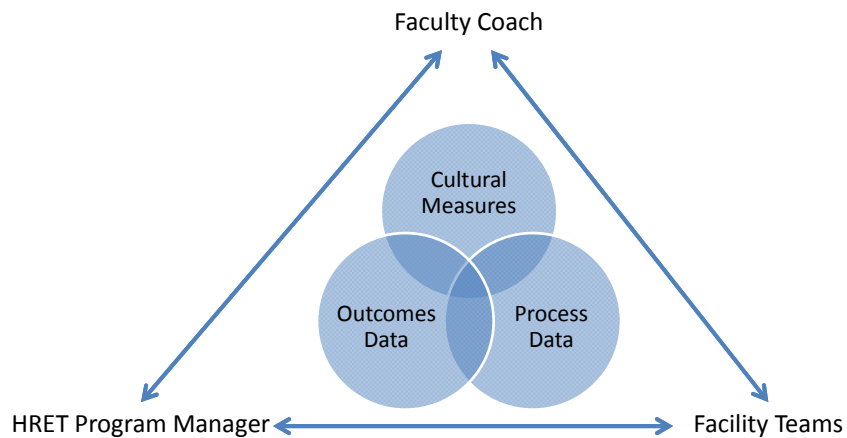


## Upcoming Data Due Dates

Data Collected	Due Date
Registration	September 30, 2015
Facility Demographics	September 30, 2015
Baseline Knowledge Questionnaire	September 30, 2015
Baseline safety culture survey	November 15, 2015

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## Resident Safety is a TEAM SPORT!



**RESULT:** Improved infection prevention skills & safe resident care to reduce CAUTIs.

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