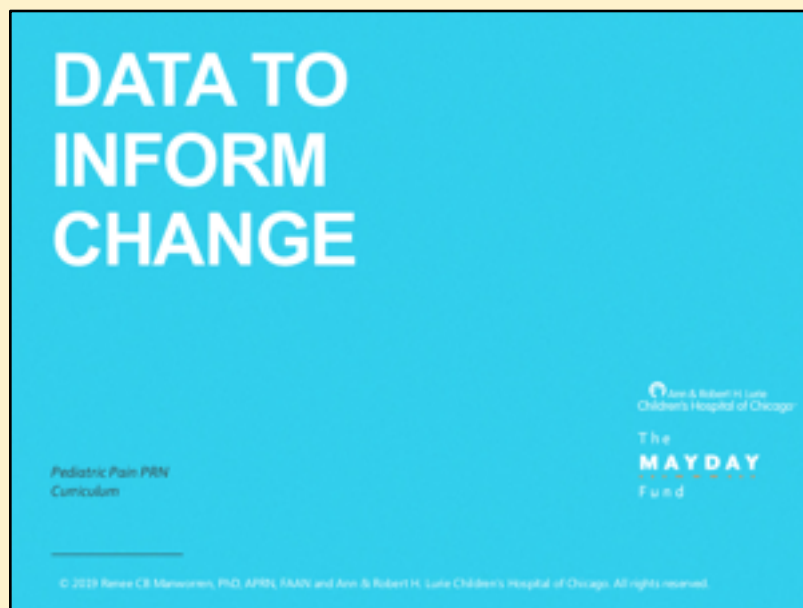# PRN Program: PRN Role Data

Materials: Participant guide to be provided to participants at least 1 week in advance.

Flip chart or whiteboard and Markers

Room setup in tables of 4- or 6-8 depending on number of participants

Participant Guide –pages 47-56, 58-63

Display slide as participants walk in

Welcome & Introductions: *Introduce facilitator if necessary*

THIS SESSION IS 45 MINUTES

In this session we will take your project idea, **your first effort** for the quickest win and biggest reward and define the data you need to proceed and the data you need to show you have made a difference in pain care.

PRN Program: PRN Role Data

Understand data sources and the analytic process

What do actionable data look like?

- Where can you **focus your first effort** for the quickest win and biggest reward?
- Who are key members of your team?
- Do you have the **resources** you need to secure success?

ASK: Let's work through some similar projects. Who has an idea? And who has a similar idea?

Choose 3 popular projects and write these on flipchart or whiteboard.

[Limit discussion to 1minute/participant, up to 3 minutes]

[5 MINUTES of 45 minute session is complete]

PRN Program: PRN Role Data

SMART goals and metrics

Performance Improvement Ideal Goals & Objectives	Performance *Measurement* Ideal Metrics
Specific	*Sensitive:* Can measure the difference that really happens
Measurable	*Meaningful:* The patients & the providers agree that what is measured is important
Achievable	*Accurate:* Valid and precise
Relevant	*Reliable:* Means the same with repeated measurement
Time-bound	*Timely:* The data are on time for decisions

READ: Now Re-state your project as a smart goal?

*Write ideas as SMART goals to demonstrate **measureable** change as compared to original project written on the flip pad or whiteboard.*

[Limit discussion to 1minute/participant, up to 3 minutes]

[10 MINUTES of 45 minute session is complete]

PRN Program: PRN Role Data

Measures

Processes
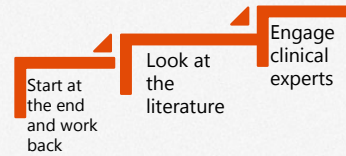
Example: Decrease procedural pain in children

Start at the end and work back
- What is the expected change in practice?
  (Pain assessment, comfort plan, evidence-based interventions
- What are indicators of that change?
  (Documentation of pain assessments, comfort plan, intervention)
- How can they be measured?

Look at the literature
- What are you currently measuring?
- How hard would it be to collect new data?

Engage clinical experts when needed

Start at the end and work back

Look at the literature

Engage clinical experts

Outcomes

Example: Decrease procedural pain in children

Start at the end and work back
- What is the expected outcome of this change?
  (Decreased procedural pain)
- What are indicators of that outcome?
  (Pain ratings)
- How can they be measured?
  (Documentation review)

Look at the literature
- What are you currently measuring?
- How hard would new data be to collect?

Get clinical experts when needed

| 4

READ: Do these projects need outcome or process measures?

Write O (outcome) or P (process) next to each project written on the flip pad or whiteboard.

[Limit discussion to 1 minute/participant, up to 3 minutes]

[13 MINUTES of 45 minute session is complete]

PRN Program: PRN Role Data

Process your thinking!
Define your measure and identify how to get it.
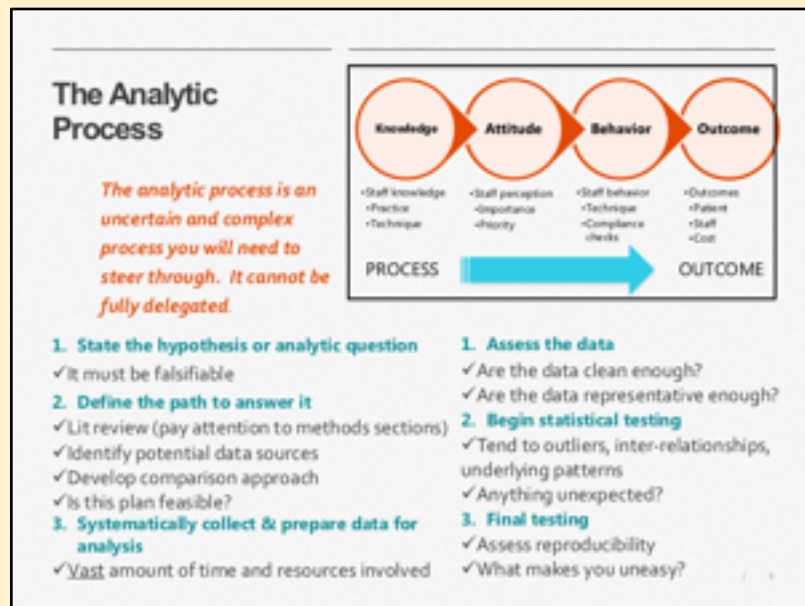
Why did you choose that answer?.

READ: How do you know if you have actionable data?

Pair up with someone looking at a different outcome or process and work together to define your measures and identify how you can get data

[Limit discussion to 1minute/participant, up to 4 minutes]

[17 MINUTES of 45 minute session is complete]

PRN Program:
PRN Role Data

The Analytic Process

The analytic process is an uncertain and complex process you will need to steer through. It cannot be fully delegated.

1. **State the hypothesis or analytic question**
   ✓It must be falsifiable
2. **Define the path to answer it**
   ✓Lit review (pay attention to methods sections)
   ✓Identify potential data sources
   ✓Develop comparison approach
   ✓Is this plan feasible?
3. **Systematically collect & prepare data for analysis**
   ✓Vast amount of time and resources involved

1. **Assess the data**
   ✓Are the data clean enough?
   ✓Are the data representative enough?
2. **Begin statistical testing**
   ✓Tend to outliers, inter-relationships, underlying patterns
   ✓Anything unexpected?
3. **Final testing**
   ✓Assess reproducibility
   ✓What makes you uneasy?

READ:

I need a volunteer to share a good example

(if time ask if anyone is struggling and try to work through their data plan as a group.)

[23 MINUTES of 45 minute session is complete]

PRN Program: PRN Role Data

What is Nursing Informatics?

Nurse informatics specialists review clinical needs and documentation input, work flows & utilization. The goal is to use technology to gain wisdom which impacts the outcomes of nursing practice benefitting patients/families. Current nursing informatics standards are published in the *Nursing Informatics: Scope and Standards of Practice*, 2nd ed (2015).

Nursing Informatics is a specialty that integrates nursing science with multiple information and analytical sciences to identify, define, manage, and communicate data, information, knowledge, and wisdom in nursing practice

Data	Discrete entities that are described objectively without interpretation
Information	Data that has been interpreted, organized, or structured
Knowledge	Information that is synthesized so that relationships are identified and formalized
Wisdom	Appropriate use of knowledge. For PRNs wisdom involves judgment about knowing what options are most appropriate for managing children's pain. The PRN must be able to place measures of pain in context of a particular patient's and families situation and be able to interpret the meaning of pain assessment and treatments.

READ: Who are key members of your team?

A Nurse Informaticist would be an excellent team member. Nursing Informatics is a specialty that integrates nursing science with multiple information and analytical sciences to identify, define, manage, and communicate data, information, knowledge, and wisdom in nursing practice.

[25 MINUTES of 45 minute session is complete]

PRN Program: PRN Role Data

Implications for Informatics and Documentation of Pain Response

Informatics tools facilitate pain documentation. The PRN should contact nursing informatics and/or other organizational resources to ensure tools a) populate based on age and b) establish the workflow if the patient does not fit standard criteria and c) review metric possibilities with EHR

"If you don't know where you are going, any road will get you there."
~ Lewis Carroll

"If you don't know where you are going, you will probably end up somewhere else".
–Laurence Peter

Pain assessments and responses to treatments are usually documented in a flow sheet of the EHR. Ensure that this documentation is visible, so it can be acted upon by all relevant healthcare providers (HCPs). Documentation should portray the patient's pain experience, so HCPs can use this knowledge to continue or modify the treatment plan.

READ Consider these questions:
- Where are pain assessments documented in the EHR?
- Does this location stand out (like vital signs)?
- Do these fields need to populate areas where other providers view patient information?
- How are data extracted from healthcare provider notes to track patient care and/or is a note required to fully document patient experiences of pain?
- Does the documentation distinguish types of pain assessment tools to account for differences in measures of pain by patients' developmental levels?
- Does the EHR use conditional logic to facilitate the selection of appropriate pain assessment tools for individual patients?
- Are all necessary elements of pain assessment readily accessible in the EHR, for example, pain location, intensity, and quality? Can multiple sites of pain be monitored easily in the documentation?

PRN Program: PRN Role Data

Measuring and Improving Outcomes

In order to change outcomes, you need to change processes.

If the intervention fails to achieve the expected outcome, it may be a function of implementation failure, rather than failure of the intervention itself

If the practice change is not carried out as intended (low fidelity), outcomes may fail to improve (e.g., if steps are skipped, pain scores or satisfaction rates may not improve and could even increase).

Balancing measures are used to determine if there is risk associated with the practice change.

Deciding if the outcome met the intended goal for improvement and understanding risks is key to making a decision about next steps.

Although outcomes can be measured, they can only be managed through improvements in care processes.
- **Processes** are the steps for improvement (e.g. auditing pain assessment documentation)
- **Outcomes** are the goals for improvement (e.g. interventions given in response to pain)
- **Balancing measures** monitor for systemic effects and unintended consequences from the practice change (e.g. respiratory depression). 9

READ: In order to change outcomes, you need to change processes:

- Although outcomes can be measured, they can only be managed through improvements in care processes.

- Processes are the steps for improvement (e.g. auditing pain assessment documentation)

- Outcomes are the goals for improvement (e.g. medications given in response to pain)

- Balancing measures monitor for systemic effects and unintended consequences from the practice change (e.g. respiratory depression after pain meds).

PRN Program: PRN Role

Implications of Informatics for the Pediatric PRN

Tools are available to the PRN to incorporate appropriate resources into patient electronic health records (EHR) to document care that meets unique cultural, ethnic, and religious values and beliefs.

As technology advances, the EHR will evolve to:
- advance the patient story in the documentation of health care across the continuum of care.
- focus on health
- incorporate or download patient centric information to personalize the EHR.

Ideally, pain experiences, including all pain histories, assessments, treatments and evaluations of treatment efficacy, will flow into patients' personalized plans of care.

Plans of care should focus on patient-generated goals.

ASK: What do you need as a PRN that you can't get currently get from the EHR?

Write on flipchart or whiteboard.

[Limit discussion to 1minute/participant, up to 3 minutes]

(RESPOND with DIRECTIONS or REFERRALs to obtain these data at your institution.)

[30 MINUTES of 45 minute session is complete]

PRN Program: PRN Role

READ:

Here are the key points of the PRN role – you need to leverage informatics to influence care at the unit, specialty, organization and community level.

PRN Program: PRN Role

READ:

"The reason most people never reach their goals is that they don't define them, or ever seriously consider them as believable or achievable. Winners can tell you where they are going, what they plan to do along the way, and who will be sharing the adventure with them."

PRN Program: PRN Role

What's your plan?

Write your next steps here.

- Review the characteristics for implementing the PRN role successfully. What do you still need?
- Review the types of projects PRNs can take responsibility for. Which can immediately benefit your clinical unit or specialty?
- Review the checklist for instituting evidence-based practice. Who needs to be on your interdisciplinary team?
- Think about your own professional development. Who can be your mentor?

READ:

Take the last 10 minutes of this session to think about, develop, and write down your plan on your project guide.

Let me know how I can help in the time remaining

[35 MINUTES of 45 minute session is complete]