

STANDARD OPERATING PROCEDURE FOR NURSING STAFF IN THE COLLECTION OF QUALITY CARE METRICS IN OUR LADY'S CHILDREN'S HOSPITAL CRUMLIN

IN OOK LADT O OFFICIAL OROMERA		
Version Number	V2	
Date of Issue	December 2020	
Reference Number	NACQCM-12-2020-FON-V2	
Review Interval	2 yearly	
Approved By	Signature Date: December 2020	
Name: Fionnuala O' Neill		
Title: Nursing Practice Development Coordinator	formale D'weill	
Authorised By	Signature Date: December 2020	
Name: Tracey Wall	Tracey Wall	
Title: Director of Nursing		
Author/s	Name: Fionnuala O' Neill	
	Title: Nursing Practice Development Coordinator	
Location of Copies	On Hospital Intranet and locally in department	

Document Review History		
Review Date	Reviewed By	Signature
2022		

Document Change History	
Change to Document	Reason for Change

Our Lady's Children's Hospital, Crumlin		
Document Name: Standard Operating Procedure for Nursing Staff in the Collection of Quality Care Metrics in our Lady's Children's Hospital Crumlin		
Reference Number: NACQCM-12-2020-FON-V2	Version Number: V2	
Date of Issue: December 2020	Page 2 of 7	



Page Number

CONTENTS

1.0	Introduction	3
2.0	Definition of Standard Operating Procedure (SOP)	3
3.0	Applicable to	3
4.0	Objectives of the Standard Operating Procedure	3
5.0	Procedures	3
6.0	Implementation Plan	5
7.0	Evaluation Plan and Audit	5
8.0	References	5
9.0	Appendices (as per necessary)	6
	Appendix 1 - Accessing your Test your care account	6
	Appendix 2 - Creating a shortcut to your desktop for Test Your Care	7

Our Lady's Children's Hospital, Crumlin		1
Document Name: Standard Operating Procedure for Nursing Staff in the Collection of Quality Care Metrics in our Lady's Children's Hospital Crumlin		Our Lad
Reference Number: NACQCM-12-2020-FON-V2	Version Number: V2	Children
Data of Januar Danamhar 2020	Dama 2 of 7	l



1.0 Introduction

In 2012, the Nursing and Midwifery Planning Development Units (NMPDU) of the North West, North East and Dublin North enabled and supported healthcare organisations in acute care settings, older person's settings, midwifery services, children's hospitals, mental health services, intellectual disability services and public health nursing to embed a system to measure and monitor a range of nursing and midwifery care processes. A web-based software system entitled "Test Your Care" was contracted from the Heart of England NHS Foundation Trust and a core suite of nursing and midwifery process metrics were developed based on established standards from both the professional (Nursing and Midwifery Board of Ireland (NMBI)) and organisational regulators (Health Information and Quality Authority (HIQA), Mental Health Commission); and from evidence of best practice. In 2014, demand increased from Directors of Nursing and Midwifery to roll out metrics nationally. As a result, the Office of Nursing and Midwifery Services Director agreed to provide the national direction and support to embed a system of nursing and midwifery metrics within healthcare organisations. This national project titled Nursing and Midwifery Quality Care-Metrics has enabled the development and national agreement of an evidence-based set of metrics and indicators that can be used consistently to measure nursing and midwifery care processes in the areas of acute care, children's nursing, intellectual disability nursing, mental health nursing, midwifery, older person nursing and publichealth nurse care settings. (HSE Nursing Metrics Children's May 2018)

Quality care metrics (QCM) are a measure of the quality of nursing clinical care processes aligned to evidence based standards and through national consensus in healthcare settings in Ireland. Donabedian's Conceptual model for evaluating quality of care (1966) Structure/Process/Outcome have been used in the development of these standards.

An extensive literature review was carried out around nursing metrics in 2017 followed by 3 rounds of a Delphi study. This study formed the basis for the metrics included in the new version of Quality Care Metrics to be launched in 2019.

2.0 Definition of Standard Operating Procedure

The term 'Standard Operating Procedure' is a way of carrying out a particular course of action and includes operations, investigations, pharmaceutical treatment, examinations and any other treatment carried out. In terms of Quality care Metrics this SOP will detail how Quality Care Metrics are carried out in CHI at Crumlin¹ in all departments.

3.0 Applicable to

All nursing staff

4.0 Objectives of Standard Operating Procedure

The aim of this SOP is to identify the metrics which the nursing staff in CHI at Crumlin will use in the clinical areas and how this action will be carried out.

5.0 Procedures

It has been agreed that nursing staff in CHI at Crumlin will collect data for eight metrics (inclusion of five metrics were commenced in June 2018). These include:

¹ Formally known as Our Lady's Children's Hospital

Our Lady's Children's Hospital, Crumlin		
Document Name: Standard Operating Procedure for Nursing Staff in the Collection of Quality Care Metrics in our Lady's Children's Hospital Crumlin		Our Lady's Children's He
Reference Number: NACQCM-12-2020-FON-V2	Version Number: V2	Cru
Date of Issue: December 2020	Page 4 of 7	1



Metrics	Total Number of Standards
1. Medication Management	25
2. Nursing Care Planning	16
3. Healthcare Associated Infection and Prevention	5
4. Nutrition	3
5. Pain Assessment and Management	4
6. Vital Signs Monitoring/PEWS	6
7. Child Adolescent and Mental Health	5
8. Discharge Planning	3

Table 1-Metrics and the no. of standards incorporated in each metrics

Process

- The Quality Care Metrics lead in CHI at Crumlin is Fionnuala O' Neill, Nursing Practice Development Coordinator.
- The NMPDU lead for Quality Care Metrics is Mary Nolan, NMPD Project Officer.
- The Steering Committee membership in CHI at Crumlin are:
 - Michelle Cullinane(Theatre Rep)
 - Deborah O'Grady(NPDU)
 - Josephine Chacko(Quality Assurance)
 - Warren O' Brien(Quality Improvement)
 - Daryl Humberstone (Quality Department)
 Karen McGuire (Assistant Director of Nursing)
 - Sunimol Joseph(PICU Rep)
 - Caroline Reddy(CNEF group rep-Children's Ward)
 - Anne McLoughlin(CNM group rep)
 - Theresa Nyham (CNEF group rep-Infant wards)
 - Bridget Conway(ED Rep)
 - Teresa Slevin/Mairead Lee(Oncology Reps)
 - Sarah Eustace(Day unit Rep)
- The Steering group will meet quarterly each year to discuss any issues or for any updates.
- Data collectors will be selected and nominated by individual ward managers and will receive education and training organised by Quality Department prior to being requested to collect data.
- Metrics will be collected on a monthly basis whatever day is decided by the individual clinical area.
- Minimum metrics collection for each area: approximately 25% of the bed capacity of each clinical areas or areas with lower bed numbers will have to collect metrics for minimum of 5 charts (See appendix 3).
- Initially data collection will take place in your own clinical area, followed by peer review collected in another
 location accordingly. This can be organized locally among data collectors perhaps cross collecting based
 on proximity. Quality Department will be conducting peer reviews of all the clinical areas every 6 months.
- Each metric to be measured has a number of standards (see table 1) that support the metric and each of

¹ Formally known as Our Lady's Children's Hospital

Our Lady's Children's Hospital, Crumlin Document Name: Standard Operating Procedure for Nursing Staff in the Collection of Quality Care Metrics in our Lady's Children's Hospital Crumlin		Ospidéat Mhuire na Leanai, Cromghlian Our Lady's Children's Hospital. Crumtin
Reference Number: NACQCM-12-2020-FON-V2	Version Number: V2	Crumtin
Date of Issue: December 2020	Page 5 of 7	

these has some advice that is given to assist the data collector choose the correct answer (refer to NQCM guidelines 2018).

 Quality department will send quarterly compliance report and action plan status to each area for review to the clinical area managers and the Area Assistant director of Nursing (ADoNs).

Education /training for New Users

- The Quality Care-Metrics hub on HSELanD is also available to support education/ training plans as it is an
 online resource that provides relevant information and learning resources on Quality Care-Metrics for
 nurses and midwives.
- New users can be trained by existing users in the same clinical area or by requesting a training session with Quality Manager.
- Please send the new user login request to Quality Department with required details including Full Name and Hospital email ID.
- New User will then receive 2 emails from 'testyourcare' one with the new username and one with the password.
- You will be required to log in to your account using the password that you have been provided with. (See below)



Figure 1: Test your care login page

- There will be a shortcut created on the desktops of all the PCs that will be used to capture the metrics for ease of access.
- As with all passwords your password must not be shared with anyone else.
- Data collector should devise responsive action plans consistent with Quality Care-Metrics results as required in consultation with line manager.
- Provide feedback to ward/unit nursing staff on Quality Care-Metric results, acknowledging the achievement
 of standards and leading on improvement action plans as required.

¹ Formally known as Our Lady's Children's Hospital

Our Lady's Children's Hospital, Crumlin	
Document Name: Standard Operating Procedure for Nursing Staff in the Collection of Quality Care Metrics in our Lady's Childre Hospital Crumlin	
Reference Number: NACQCM-12-2020-FON-V2	Version Number: V2
Date of Issue: December 2020	Page 6 of 7



Process for nursing & midwifery QUALITY CARE-METRICS



Figure 2: Framework for Quality Care Metrics at Service Level

Display and share Quality Care-Metrics reports on unit/ward notice board

6.0 Implementation Plan

Implementation will occur following education and training of nursing staff in all clinical areas.

7.0 **Evaluation and Audit**

This process will be self-evaluating and will require no separate audit.

8.0 References

HSE (2015) Guiding Framework for the implementation of Nursing and Midwifery Quality Care Metrics in the Health service Executive Ireland, HSE, Dublin, Ireland.

HSE (2015) Standard Operating Procedure for Nursing and Midwifery Quality Care Metrics Data Collection in Children's Services, HSE, Dublin, Ireland.

¹ Formally known as Our Lady's Children's Hospital

Our Lady's Children's Hospital, Crumlin		Ospidéal Mhuire na Leanaí,
Document Name: Standard Operating Procedure for Nursing Staff in the Collection of Quality Care Metrics in our Lady's Children's Hospital Crumlin		Our Lady's Children's Hospital.
Reference Number: NACQCM-12-2020-FON-V2	Version Number: V2	Crumtin
Date of Issue: December 2020	Page 7 of 7	

Donabedian (1966) Evaluating the Quality of Medical Care. Accessed online 06/06/2018

https://www.google.ie/search?source=hp&ei=QbQXW5GwOluagAalml3IBw&q=donabedian+evaluating+the+quality+of+medical+care&oq=Donabedian+evaluating+&gs_l=psy-

 $\underline{ab.1.0.0j0i22i30k1l2.1826.7601.0.9531.22.19.0.3.3.0.394.2042.13j3j0j2.18.0....0...1c.1.64.psy-\underline{ab..1.21.2090...0i131k1j0i10k1.0.cRFsEoeiMf8}$

Health Service Executive (2011) *HSE Standards & Recommended Practices for Healthcare Records Management.* Dublin: Health Service Executive.

Health Service Executive (2013) National Consent Policy. Dublin: Health Service Executive

Nursing & Midwifery Board of Ireland (2015) Code of Professional Conduct and Ethnics for Registered Nurses and Registered Midwives. Dublin: Nursing & Midwifery Board of Ireland.

NMBI 2016 – Recording Clinical Practice

Nursing & Midwifery Board of Ireland (2015) *Scope of Nursing and Midwifery Practice Framework.* Dublin: Nursing & Midwifery Board of Ireland.

¹ Formally known as Our Lady's Children's Hospital

Our Lady's Children's Hospital, Crumlin		Ospidéat Mhuire na Lean
Document Name: Standard Operating Procedure for Nursing Staff in the Collection of Quality Care Metrics in our Lady's Children's Hospital Crumlin		Our Lady's Children's Hospital
Reference Number: NACQCM-12-2020-FON-V2 Version Number: V2		Crumtin
Date of Issue: December 2020	Page 8 of 7	

9.0 Appendices

Appendix 1

Accessing Test Your Care (TYC)



Please check that you are accessing Test Your Care through the **correct** website

http://www.testyourcarehse.com

NOT

http://www.testyourcare.com

(If required please create a new shortcut on your desktop with the new web address)

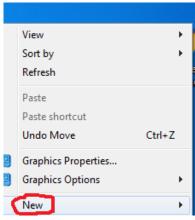
¹ Formally known as Our Lady's Children's Hospital

Our Lady's Children's Hospital, Crumlin		Ospidéat Mhuire na Leanaí,
Document Name: Standard Operating Procedure for Nursing Staff in the Collection of Quality Care Metrics in our Lady's Children's Hospital Crumlin		Our Lady's Children's Hospital.
Reference Number: NACQCM-12-2020-FON-V2	Version Number: V2	Crumtin
Date of Issue: December 2020	Page 9 of 7	

Appendix 2

To create a Short Cut for http://www.testyourcarehse.com

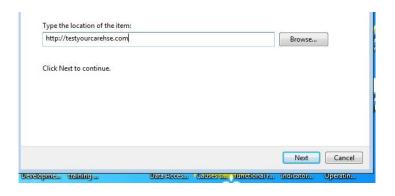
1. Right click on desktop and select New



2. Select Shortcut



3. Enter web address



4. Click Next and name your shortcut e.g. TYC

©2018 OLCHC

Copyright and Disclaimer @2018. Our Lady's Children's Hospital Crumlin, Dublin 12. All rights reserved. No part of this publication may be reproduced, stored in a retrieval system or transmitted in any form or by any means without the prior written permission of the copyright holder. Every effort has been made to ensure that the information provided is accurate and in accord with standards accepted at the time of printing.

¹ Formally known as Our Lady's Children's Hospital

Our Lady's Children's Hospital, Crumlin		Ospidéat Mhuire na Leanaí,
Document Name: Standard Operating Procedure for Nursing Staff in the Collection of Quality Care Metrics in our Lady's Children's Hospital Crumlin		
Reference Number: NACQCM-12-2020-FON-V2	Version Number: V2	Our Lady's Children's Hospital Crumtin
Date of Issue: December 2020	Page 10 of 7	

APPENDIX 3

Nursing Quality Care Metrics

Bed Capacity for Determining Monthly QCM Figures

Last updated: 10/11/2020

Department/Ward	Bed Capacity	25% of Bed Capacity	Notes
CDU	6	2	
CHC	25	6	
ED	15	4	
MDU	12	3	
Nazareth	18	5	
Nephro-Urology	7	2	
OLW	10	3	
PICU 1	17	4	
PICU 2	6	2	
Recovery/Theatre	9	2	
SDU	13 beds but average can see between 20 - 23	3-5 approx.	
St. Anne's	15	4	
St. John's	19	5	
St. Joseph's	19	5	
St. Michael's	20	5	
St. Peter's	23	6	

Minimum QCM Figure to be Reported Monthly
<mark>5</mark>
<mark>6</mark>
<mark>5</mark>
<mark>5</mark>
5
<mark>5</mark>
<mark>5</mark>
5 5 5 5
<mark>5</mark>
<mark>5</mark>
<mark>5</mark>
<mark>5</mark> 5
<mark>6</mark>
<mark>5</mark>
<mark>6</mark>