

**VANDERBILT UNIVERSITY
MEDICAL CENTER
NURSING**

**STRATEGIC PLAN
2010-2013**



MISSION

Advance health and wellness through excellence in nursing care, education, and research throughout the lifespan and across the continuum of care.

VISION

To be the national leader in nursing practice, education and research in all nursing roles, specialties, and settings.

VALUES

We value patient safety and quality.

We value having strong interdisciplinary collaboration and communication.

We value having effective shared decision making.

We value and support a continuous learning environment.

We value providing meaningful rewards and recognition.

We value highly specialized nursing care and influencing the nursing practice.

We value patient and family centered care.

We value improving the health of the community through outreach, research and wellness initiatives.

VUMC NURSING STRATEGIC PLAN

The strategic plan is comprised of three components, Vanderbilt Personalized Patient Health Care (VPPHC) Model, EBP and Effective Processes, and Transformational Leadership and Professional Development, which include statements of strategy, goals, responsible person / committees to support the work, and elements for success.

ASSUMPTION

The fundamental pieces of the work that occur within the infrastructure and committees across the Vanderbilt Nursing enterprise will support what will be accomplished with the strategic plan.

I. Vanderbilt Personalized Patient Health Care (VPPHC) Model

Statement of Strategy:

Transform the way in which health care is delivered across the continuum in order to ensure highly reliable personalized care, taking advantage of the capabilities and unique contributions of the entire care delivery team.

Goals:

Goal 1: Determine what brings value to patients and makes a difference and creates breakthroughs.	
<ul style="list-style-type: none"> • Conduct lit review of personalized health care and highly reliable systems • Define scope with appropriate key stakeholder involvement: <ul style="list-style-type: none"> ○ CCI ○ Informatics ○ Innovation pillar ○ Team • Assess and secure organizational synergy for development of VPHC and secure appropriate resources • Collaborate with CCI to develop methodology for determining key drivers of highly reliable personalized care • Perform analysis of patient care and experience in 2-3 patient care areas 	<ul style="list-style-type: none"> • 4th Qtr FY10 • 4th Qtr FY10 • 4th Qtr FY10 • 1st Qtr FY11 • 2nd Qtr FY11
Goal 2: Understand the impact of who brings the right skill set and resources to achieve a personalized health care model.	
<ul style="list-style-type: none"> • Perform gap analysis in 2-3 identified patient care areas 	<ul style="list-style-type: none"> • 2nd Qtr FY11
Goal 3: Understand and design systems to maximize the benefit and utilize the full talents of the health care team.	
<ul style="list-style-type: none"> • Rescope problem based on gap analysis and patient institutional priorities, including impact of healthcare reform and financing • Design innovations for implementation in select 2-3 areas to close gaps – Design shop prn • Pre- and post measurement 	<ul style="list-style-type: none"> • 3rd Qtr FY11 • 4th Qtr FY11 • 1st Qtr FY12

Responsible persons / committees to support the Goals work:

Executive Sponsor: Marilyn Dubree, Nursing Committees, and other Key Stakeholders across the organization to collaborate in tandem to support the personalized patient health care model

Elements for success:

- Relationships and providers
- Demand matching
- Physiologic; social
- Reconnect with Be the Best Group around their goals and bring NEB
- Recalibration of the current groups to go to for “the work”
- Perception of customization
- Medical management
- Who should resource this work: Meyers Group, others

II. EBP and Effective Processes

Statement of Strategy:

Lead the nation in producing evidence that will drive nursing practice, recognizing and legitimizing the evolution of knowledge in a rapidly changing environment. Create passion and discipline for the translation of evidence into practice that will optimize patient outcomes.

Goals:

Goal 1: Establish/create a nursing infrastructure dedicated to driving the cycle of EBP.	
<ul style="list-style-type: none"> ID a planning/oversight group to do a formal baseline assessment of formal leader knowledge of EBP <ul style="list-style-type: none"> -Performing comprehensive “lit review” analysis -Evaluating research -Translating into practice -Set targets for publications etc. Develop a plan for infrastructure over the next 5 years and be coordinated with the LDTF work and define core competency for EBP at leader, educator, CNS levels ID other organizational partners Fund and recruit assistant director 	<ul style="list-style-type: none"> 4th Qtr FY 10 4th Qtr FY 10 4th Qtr FY10 4th Qtr FY 10
Goal 2: Develop and implement core training systems for EBP processes targeted to role requirements.	
<ul style="list-style-type: none"> Develop group and individualized training plans to establish base line competence <ul style="list-style-type: none"> -Establish organization standards for sight visits -Develop plan and training/standards to proliferate effective journal clubs Develop a scalable training plan with components of the curriculum <ul style="list-style-type: none"> -Basic research -Abstracts -Presentations/posters -Articles (peer reviewed journals) 	<ul style="list-style-type: none"> 4th Qtr FY 10 1st Qtr FY11
Goal 3: Ensure the alignment of EBP, with internal/external benchmarking and quality improvement priorities.	
<ul style="list-style-type: none"> Establish benchmarks and ID QI priorities for the organization 	<ul style="list-style-type: none"> 1st Qtr FY11
Goal 4: Complete a gap analysis and create a work plan for moving forward.	
<ul style="list-style-type: none"> Conduct a gap analysis and create a work plan to address gaps and ensure that EBP and processes are implemented 	<ul style="list-style-type: none"> 2nd Qtr FY11
Goal 5: Disseminate and publish: broadcast to market what’s being accomplished.	
<ul style="list-style-type: none"> Design the process to create, use, and publish EBP 	<ul style="list-style-type: none"> 3rd Qtr FY11

Responsible persons / committees to support the Goals work:

Nancy Wells, Nursing Research Committee, Debianna Peterman, Nursing Education Committee, Nursing Research Residents, Nursing Quality Council

Elements for Success:

- Need infrastructure support
- Fundamental startup: this many articles, this many people
- Figure out how NPs provide support
- Partnerships for Nancy Wells – groom assistant director
- Have evidence in the work flow; be sure EBP is what we do in every day practice

III. Transformational Leadership and Professional Development

Statement of Strategy:

Create a leadership model that will provide current and future leaders the environments, tools, evidence and skill development to be innovative and transformational during a time of health care reform and transition.

Goals:

Goal 1: Develop transformational leaders who can create and transform programs/products/environments to meet the patient population needs and VUMC organizational goals (People, Quality, Safety, Finances, Growth, Innovation).	
<ul style="list-style-type: none"> Define which leaders we are talking about: -Ads/Asst. Ads -Charge nurses -Asst. Mgrs -Others/teams -Mgrs -Directors -Staff nurses Pick top 2-3 and focus there Build on work/partner with LDTF (do they own this strategy, including competencies) Partner with Owen/VUSN to ID appropriate assessment tool to conduct gap analysis of the current state Assess “what else” is going on for leader development in the organization and work to define/create synergy Consider: how to partner with HR 	<ul style="list-style-type: none"> 4th Qtr FY10 4th Qtr FY10 1st Qtr FY11 1st Qtr FY11
Goal 2: Develop a recruitment and retention philosophy that supports flexible standard and consistent requirements for leadership practice.	
<ul style="list-style-type: none"> Create a model that will provide a platform for consistent/standardized leadership practice -Entry level education...BSN, MSN, etc. -Orientation/Onboarding -VUMC development (required courses) -Define “what happens” if leader fails to meet expectations 	<ul style="list-style-type: none"> 1st Qtr FY11
Goal 3: Provide organizational learning opportunities for individual leaders and leadership teams to learn together and obtain or create tools to meet their desired objectives.	
<ul style="list-style-type: none"> Roll out creative learning strategies (online, classroom, mentor) based on best in class, evidence benchmarks and/or out of industry models 	<ul style="list-style-type: none"> 2nd-3rd Qtr FY11
Goal 4: Define the leadership model that is transformational and flexible with leadership competencies and a menu of tools.	
<ul style="list-style-type: none"> Create the model, including competencies, tools, resources 	<ul style="list-style-type: none"> 3rd Qtr FY11

Responsible persons / committees to support the Goals work:

Robin Steaban, Debiann Peterman, Leadership Development Task Force

Elements for success:

- Succession planning: review the work out there around this -Prep at the clinic level
- Incorporate Magnet language into this strategy -Be prepared for the different generations
- Pathways integrations: HR leadership, Frontline nursing, Owen, VUSN
- Set of criteria: Lohminger model, 360 assessment
Ex: competencies, check-on, rank where they are at, who to develop vs place against the work