



## CLINICAL NURSE LEADER PRACTICE PARTNER SURVEY CONDUCTED JUNE-SEPTEMBER 2005

81 out of the 179 practice partners (45%) submitted the practice survey. The results below represent data from those 81 practice sites. Only numerical data is represented in this summary.

### 1. Introduction

Welcome . . .

### 2. Contact Information

1. Name of individual completing this survey and healthcare institution represented.

### 3. Leadership Role Prior to CNL

2. Prior to joining the AACN CNL project, did your institution create a new role similar to the CNL role?

**68 (84%)** No

**13 (16%)** Yes, what is the role title?

**N=81**

If you answered "Yes" to the previous question, please send a copy of the job description for this role to [anniea@aacn.nche.edu](mailto:anniea@aacn.nche.edu) or Anne Alesandrini, AACN, One Dupont Circle, Suite 530, Washington, DC 20036-1120

### 4. Unit Selection

3. Have you selected the unit(s) that has (have) been targeted to be involved in the initiative?

**47 (58%)** Yes

**33 (40.7%)** No

**1 (1.2%)** Did not respond

**N=81**

**5. Selected Units Described**

4. How many units are targeted? (enter number)

- 16 (34%)** 1 unit
  - 14 (29.8%)** 2 units
  - 9 (19.1%)** 3 units
  - 2 (4.3%)** 4 units
  - 1 (2.1%)** 5 units
  - 1 (2.1%)** 6 units
  - 2 (4.3%)** 8 units
  - 1 (1.2%)** 9 units
  - 1 (1.2%)** 32 units
- N=47

5. If you have selected only one unit now, please briefly describe it.

Type of Unit	Patient Population Served	Average # of Patients
Medical Oncology	General medical and oncology - adult	35
Acute Medicine Unit	Medicine, hem/onc, rehab	30
Comprehensive Rehab Unit	Acute & subacute rehab pts	21
Medical/surgical	Respiratory/Peds	30
Oncology	adult medical oncology	40
Inpatient Pediatric Rehab	complex physican rehab needs ages 1-21 years	10
3E- 31 bed general medical	Primarily general medicine with surgical overflow and some telemetry	26
Telemetry	Open Heart	
Cardiac Telemetry combined med/surg and intermediate care unit	MI, pre/post heart transplants, cardiac cath & MI; titration of vaso active/cardiac drips	32
Respiratory Intermediate Care	Weanable ventilator patients	6
Surgical Unit	Post op surgical patients	20
General Medicine	Veterans with medical problems	30
General Medicine	Adults	33
Surgical Inpatient Unit	Surgical	20
Medicine	Medicine/telemetry	28
Orthopedic Unit	PostOp General Orthopedics	28
Medical Surgical Unit	Adult Surgery, Diabetes, CHF	30

6. If you have selected more than one target unit, please briefly describe your target units:

Type of Unit	Patient Population Served	Average # of Patients
Cardiothoracic	Post Open Heart Surgery	30
Medical	oncology, GI, Respiratory	44
Med/Surg/Oncology	medical needs, post op, oncology	28
Medical Surgical	Surgical	23

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Medical/Surgical	Adult medical and general surgical. Pediatric inpatients	36
4E	Med/Surg	15
Surgical Orthopedics	post surgical patients - including total joints and bariatrics	21
Medical	Oncology	14
Telemetry	Patients requiring cardiac monitoring	28
Area 5	Elementary, middle and high school children ages 3 years - 20 years	30
Medical Surgical	Oncology	18
Critical Care	adult med-surg critical care and tele	30
Med/Surg	Urology and nephrology	25
All adult med/surg for first semester	Adults	
7 South Med-Surg	Complex medical patients with co- morbidities. LOS 3-5 days	28
Ward 42 Medical	Acute med /gen med. patients	26
Adult Medical/Surgical	Primarily ortho, neuro, medical	38
Medical Surgical	medical surgical	40
They are at 3 of our hospitals on Med, Surg, ICU, Peds, NICU, Ortho, OR, OB, ED, etc.	all	32
11th Floor Medical Unit	Oncology, dialysis, and infectious disease	36
stepdown	pulmonary , vent pts and cardaic patients with MAi	36
Med ICU	Intensive care medical patients	10
Med/Surg	Med/Surg patients	25
Cardiovascular	CHF, Post Open Heart, Pacemakers	38
5B-Oncology	Cancer Patient	23
Hospice inpatient	Patients of all ages with a prognosis of 6 mon or less with acute needs	20
medical surgical	Medical surgical	30
Medical Surgical 8SW	General Surgery	24
General Surgical Step Down	General Surgical, Bariatric, Surgical Oncology	17
Acute Medicine/Oncology	Patients with complex medical problems often including several chronic diseases such as diabetes and hypertension - may have acute stroke, pancreatitis, pneumonia, syncope, and the cancer and HIV pts	22
Oncology	Acute INPT and End of Life	36
Stepdown	Cardiac, tele	24
Medical Telemetry	Cardiac/Pulmonary	28
Medical Surgical	Renal/Oncology	42
Possibly burn center	burn care- acute through early rehab	10
Ortho/Neurosurgical	Adult orthopedic and surgical inpatients	10
4W	Med/Surg	15
Medical Neurological	Medical, oncology, neuro surgery patients	34
Surgical	Surgical/orthopedic	20

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Surgical Unit	Pre and post op patients	30
PBC - Area 3	Elementary, middle and high school children ages 3 years - 20 years	30
Medical Surgical	Renal	28
Med/Surg	mixed adult med/surg including neuro surgical patients	34
Med/Surg	Cardiology, pulmonary, vascular surgery, medical	28
Acute Pediatrics for second semester	IP/OP	
53S1 Nursing Home Care Unit	24 bed skilled nursing unit. LOS 14-20 days	24
44	Acute med/gen med patients	23
Adult Medical/Surgical Oncology	Primarily oncology	38
Oncology/surgical	oncology	40
10th Floor Surgical Unit	Surgical patients including ortho, gyne, and general surgery	25
Telemetry medical floor	geriatric medical floor	38
SICU	Surgical Intensive care patients	13
Orthopedic Unit		39
Dialysis, Oncology	As above	40
Rena-Cardio Unit - 6B	PTE with Renal/Cardio Problem	23
Hospice home care	Patients of all ages with a prognosis of <6 months	130
Medical surgical	med-surg	30
Medical- surgical 8SW	Urology	24
General Medical/Telemetry	as above	30
Acute Medicine/Cardiology/Pulmonary	Acute Coronary Syndrome patients, post cath, MI, acute pulmonary Problems from COPD, Cardiac arrhythmias, heart failure, chronic ventilator patients	18
Breast Care Center	Breast Cancer All Stages	Varies
Surgical	orthopedics/general surgery	24
ICU	Critical Care	8
Medical Surgical	Medical/Pulmonary	18
Comprehensive Care Center	Adult critical care and intermediate care	24
5E	Med/Surg/Ortho	15
Medical Unit	Medical patients not requiring cardiac monitoring	34
PBC - Area 4	Elementary, middle and high school children ages 3 years - 20 years	30
Labor/Delivery/Womens for summer semester	Women	
Ward 5A Surg.	Surgical and Short Stay	16
8th Floor Medical Unit	Medical patients including diabetics, congestive heart failure, and pneumonia	36
GI Procedure	GI (colonoscopy suite--outpatient)	100
Sub Acute	Post Acute Care Patients	15
Ventilator Unit	PTE with respiratory problems	26

Post-op cardiac	cardiac	30
Medical Surgical 8SE	GI and Trauma	24
Surgical Program including SICU and Acute Surgical Unit	full gamet of surgical patients - General, Thoracic, Neruosurgery, vascular, ENT, orthopedics, and urology	18
Geriatric	Elderly Medical Population	33
5W	Med/Surg/Oncology/Pedi	15
Ward 5B	Geriatric, Vascular, Podiatry	24
Telemetry Unit	Patients with chest pain or other indications requiring continuous cardiac monitoring	18
3North (Surgery)	30 bed general surgery/Same Day Procedures	Av Daily Census=24
Rehabilitation unit		12
Medicine Unit	PTE with medicine problems	27
Ortho/Neuro Unit	Surgical	36
Ward 41 Transition unit	Cardiothoracic Nursing, pt. transition from ICU	15

**6. Changes in Units**

7. Have changes or transformations to these selected units/practice settings begun?

**29 (61.7%)** No (Skip to # 10)

**18 (38.3%)** Yes

**N=47**

8. Are these changes or transformations:

(check all that apply)

**12 (25.5%)** Organizational: Administration, Management

**13 (27.7%)** Patient Care Staffing Patterns

**13 (27.7%)** Nature of Clinical Practice

**12 (25.5%)** Other (please specify)

**N=47**

9. Have any CNL students begun clinical experiences on the previously-described unit

(s)?

**5 (10.6%)** Yes

**41 (87.2%)** No

**1 (2.1%)** Did not respond

**N=47**

## 7. CNL Students and Support

10. Is your institution providing financial support to employees to enroll in the CNL education program?

**48 (59.3%)** Yes  
**28 (34.6%)** No (Skip to # 14)  
**5 (6.2%)** Did not respond  
**N=81**

11. If you answered yes to the previous question, enter the number of CNL student employees who fall under the following categories:

Full pay + not working + tuition reimbursement

**6 (12.5%)** 0 students  
**42 (87.5%)** Did not respond  
**N=48**

Full pay + not working

**6 (12.5%)** 0 students  
**42 (87.5%)** Did not respond  
**N=48**

Full pay + tuition reimbursement + working full time

**9 (18.8%)** 0 students  
**18 (37.5%)** 1-10 students  
**1 (2.1%)** 11-20 students  
**20 (41.7%)** Did not respond  
**N=48**

Full pay + working part time + tuition reimbursement

**4 (8.3%)** 0 students  
**11 (22.9%)** 1-10 students  
**33 (68.9%)** Did not respond  
**N=48**

Partial pay + working part time + tuition reimbursement

**5 (10.4%)** 0 students  
**4 (8.3%)** 1-10 students  
**1 (2.1%)** 11-20 students  
**38 (79.2%)** Did not respond  
**N=48**

Partial pay + working part time + no tuition reimbursement

**6 (12.5%)** 0 students  
**2 (4.2%)** 1-10 students  
**40 (83.3%)** Did not respond  
**N=48**

Not working + not receiving pay + tuition reimbursement

**6 (12.5%)** 0 students  
**1 (2.1%)** 1-10 students  
**41 (85.4%)** Did not respond  
**N=48**

Not working + not receiving pay + no tuition reimbursement

**6 (12.5%)** 0 students  
**42 (87.5%)** Did not respond  
**N=48**

12. Is your institution offering any other incentives to nurse employees to enroll in the CNL education program?

**47 (58%)** No  
**30 (37%)** Yes, please describe  
**4 (4.9%)** Did not respond  
**N=81**

“Yes” Descriptions

- Tuition and work time off
- Possibly full time benefits if they reduce work hours
- Scholarships
- Paid residency/clinical time
- Educational grant, stipend
- Tuition reimbursement; some salary during last year of immersion experience
- Working around the school schedule
- Opportunities for advancement on the 'clinical ladder'
- The opportunity to work in our organization as a CNL post graduation from program!
- When the University is accepting students, VA employees who are in the program will be eligible to apply for funding through NNEI
- Tuition Waivers
- We plan on selecting one or two nurses who we feel will do well and may utilize a reduced schedule, full pay and tuition option as well as above options
- Tuition support available up to \$10,000 per year
- Tuition support for part-time education
- Classes on site at hospitals. Going through the courses as a group.
- Loan forgiveness and tuition reimbursement program for all employees

- Yes, but they are no different than all benefits available to DHMC nurses who are returning to school. These include an annual tuition reimbursement and eligibility to receive one of the annual DHMC auxiliary nursing scholarships-this pool is \$40,000.
- Program located on site
- Payment of half tuition Salary during 740 clinical hours Benefits eligible

13. If you responded "Yes" to the previous 2 questions, what is the expected time commitment for an employee to work after completion of the CNL education program? (check one)

- 9 (11.1%)** No commitment
- 4 (4.9%)** One year
- 21 (25.9%)** Two years
- 12 (14.8%)** Other (please specify)
- 35 (43.2%)** Did not respond

**N=81**

“Other” Descriptions

- 3 years
- Up to 5 years depending on the size of the educational grant.
- will have a 1-3 year time commitment upon completion, using the National Nursing Education Initiative
- 3 years
- Have not determined at this time
- Maximum of 3 years if attending school full time.
- Expect to improve retention... but retention for Team Coordinators is excellent now too.
- Three years
- Probably two years, but haven't specified. Do not have definite students yet, so don't know work/reimbursement blend yet
- They can have 6 hours free tuition without further obligation
- Tuition reimbursement at a set dollar amount for the final semester of school if MNHP student commits to working here for one year post graduation.

**8. About Partners**

14. Have you communicated with the following individuals/groups in your institution regarding the CNL project? (check all that apply)

- 67 (82.7%)** Executive Leadership Team
- 9 (11.1%)** Board of Trustees
- 15 (18.5%)** Patient Partnership Council
- 70 (86.4%)** Nursing Management Team
- 27 (33.3%)** Medical Staff
- 49 (60.5%)** Nursing Staff

**N=81**

15. What other groups or organizations have you communicated with regarding the CNL project? (check all that apply)

- 21 (25.9%)** State Board of Nursing
- 15 (18.5%)** State Nursing Association
- 16 (19.8%)** Local Community Leaders
- 28 (34.6%)** Other Health Systems/Institutions in Community
- 31 (38.3%)** Other Health Professionals in Community
- 12 (14.8%)** Other (please specify)

**N=81**

“Other” Descriptions

- Case managers
- Corporate leaders
- State Nursing Association and State Nurse Executive Association in the fall
- Our academic partner has communicated with the Sate Board of Nursing
- College
- Other Health Care Nurse Executives
- Newspaper
- Schools of nursing in the community
- Nurse practice Council, nurse education council, affiliating schools of nursing, department directors in the hospital and clinics
- Nursing leaders in corporation
- University
- Robert Wood Johnson Executive Fellows

**9. Quality Indicator Measurement**

16. Please check all benchmarking programs in which you are participating.

- 49 (60.5%)** American Nurses Association NDNQI [National Database Nursing Quality Indicators]
- 11 (13.6%)** VANOD (Veterans Administration hospitals only)
- 3 (3.7%)** CalNOC (California hospitals only)
- 17 (21%)** OASIS (Home Health)
- 0 (0%)** Minnesota Public Health Indicators
- 65 (80.2%)** JCAHO (Oryx Database)
- 8 (9.9%)** NQF [National Quality Foundation] (Nursing Home measures)
- 12 (14.8%)** Nursing Home MDS
- 23 (28.4%)** Other (please specify)

**N=81**

**10. Satisfaction - Employee**

17. Is employee satisfaction being measured at your institution?

- 72 (88.9%)** Yes
  - 6 (7.4%)** No (Skip to # 24)
  - 3 (3.7%)** Did not respond
- N=81**

**11. Employee Satisfaction Measurement**

18. Please check all tools you are using to measure employee satisfaction:

- 9 (12.5%)** Gallup
  - 8 (11.1%)** Press-Ganey
  - 28 (38.9%)** Institutionally developed
  - 34 (47.2%)** Other standardized tool(s) (e.g. Mueller-McCloskey) Please list
- N=72**

19. Can satisfaction of registered nurses be specifically separated out from other staff in the institution?

- 63 (87.5%)** Yes
  - 8 (11.1%)** No
  - 1 (1.4 %)** Did not respond
- N=72**

20. Can satisfaction of registered nurses and or other staff on specific units/practice settings be separated out from staff on other units/practice settings?

- 65 (90.3%)** Yes
  - 6 (8.3%)** No
  - 1 (1.4 %)** Did not respond
- N=72**

21. How frequently are these measures of employee satisfaction assessed? (check one)

- 0 (0%)** Monthly
  - 4 (4.9%)** Quarterly
  - 49 (60.5%)** Annually
  - 17 (21%)** Other (please specify)
  - 11 (13.6%)** Did not respond
- N=81**

22. Date last collected:

- 1 (1.2%)** 2001
  - 2 (2.5%)** 2003
  - 36 (44.4%)** 2004
  - 27 (33.3%)** 2005
  - 15 (18.5%)** Did not respond
- N=81**

23. Will you be able to add one or two questions about the anticipated CNL program outcomes to employee satisfaction questionnaires?

- 19 (26.4%)** Yes
  - 49 (68.1%)** No
  - 4 (5.6%)** Did not respond
- N=72**

## **12. Satisfaction - Patient**

24. Is patient satisfaction measured at your institution?

- 76 (93.8%)** Yes
  - 1 (1.2%)** No (Skip to # 31)
  - 4 (4.9%)** Did not respond
- N=81**

## **13. Patient Satisfaction Measurements**

25. Please check all tool(s) you are using to measure patient satisfaction:

- 4 (5.3%)** Gallup
  - 28 (36.8%)** Press-Ganey
  - 22 (28.9)** Institutionally developed
  - 2 (2.6%)** NDNQI [National Database Nursing Quality Indicators] -- short form
  - 5 (2.6%)** NDNQI [National Database Nursing Quality Indicators] -- long form
  - 36 (50%)** Other (please specify)
- N=76**

26. Can patient satisfaction on specific units/practice settings be separated out from patient satisfaction on other units/practice settings in the institution?

- 72 (94.7%)** Yes
  - 4 (5.3%)** No
- N=76**

27. If you use the NDNQI patient satisfaction form can the data be made available?

- 6 (7.9%)** By question/domain
  - 4 (5.3%)** By total scores
  - 66 (86.8%)** Did not respond
- N=76**

28. How frequently are these patient satisfaction measures assessed? (check one)

- 34 (42%)** Monthly
  - 23 (28.4%)** Quarterly
  - 9 (11.1%)** Annually
  - 12 (14.8%)** Other (please specify)
  - 3 (3.7%)** Did not respond
- N=81**

29. Date last collected:

**8 (9.9%)** 2004  
**56 (69.1%)** 2005  
**17 (21%)** Did not respond  
**N=81**

30. If requested, would you be able to add a question or two that specifically dealt with anticipated CNL program outcomes in future patient care satisfaction questionnaires?

**26 (34.2%)** Yes  
**46 (60.5%)** No  
**4 (5.3%)** Did not respond  
**N=76**

**14. Financial/Cost Data**

31. Are data available for the following: (check all that apply)

Length of stay/service  
**71 (87.7%)** Institution-wide  
**55 (67.9%)** By Unit  
**57 (70.4%)** By DRG  
**N=81**

Cost per case  
**60 (74.1%)** Institution-wide  
**32 (39.5%)** By Unit  
**53 (65.4%)** By DRG  
**N=81**

Avoidable days  
**38 (46.9%)** Institution-wide  
**19 (23.5%)** By Unit  
**26 (32.1%)** By DRG  
**N=81**

Cost/equivalent admission  
**40 (49.4%)** Institution-wide  
**22 (27.2%)** By Unit  
**33 (40.7%)** By DRG  
**N=81**

Readmissions  
**56 (69.1%)** Institution-wide  
**33 (40.7%)** By Unit  
**47 (58%)** By DRG  
**N=81**

Recidivism  
**33 (40.7%)** Institution-wide  
**18 (22.2%)** By Unit  
**24 (29.6%)** By DRG  
**N=81**

For nursing homes, readmissions to hospitals within 3 days  
**19 (23.5%)** Institution-wide  
**14 (17.3%)** By Unit  
**10 (12.3%)** By DRG  
**N=81**

Other cost indicators (e.g. specific indicators from non-acute settings - please list these indicators in the next question.)

32. Other cost indicators not mentioned in the previous question:  
 Institution-Wide  
 By Unit  
 By DRG

## 15. Staffing

33. In terms of staffing/human resources data, are the following available: (check all that apply)

Turnover of all nursing staff  
**68 (84%)** Institution-wide  
**58 (71.6%)** Unit  
**35 (43.2%)** Monthly  
**38 (46.9%)** Quarterly  
**43 (53.1%)** Yearly  
**N=81**

Turnover of RNs  
**68 (84%)** Institution-wide  
**55 (67.9%)** Unit  
**35 (43.2%)** Monthly  
**37 (45.7%)** Quarterly  
**39 (48.1%)** Yearly

**N=81**

Vacancy for all nursing staff  
**66 (81.5%)** Institution-wide  
**58 (71.6%)** Unit  
**42 (51.9%)** Monthly  
**31 (38.3%)** Quarterly  
**32 (39.5%)** Yearly  
**N=81**

RN vacancies  
**69 (85.2%)** Institution-wide  
**58 (71.6%)** Unit  
**46 (56.8%)** Monthly  
**28 (34.6%)** Quarterly  
**32 (39.5%)** Yearly

**N=81**

One-year retention of RN employment  
**52 (64.2%)** Institution-wide  
**40 (49.4%)** Unit  
**18 (22.2%)** Monthly  
**18 (22.2%)** Quarterly  
**38 (46.9%)** Yearly  
**N=81**

Proportion of RN positions covered by temp/agency nurses  
**57 (70.4%)** Institution-wide  
**49 (60.5%)** Unit  
**40 (49.4%)** Monthly  
**23 (28.4%)** Quarterly  
**29 (35.8%)** Yearly  
**N=81**

Average RN hours  
**62 (76.5%)** Institution-wide  
**61 (75.3%)** Unit  
**52 (64.2%)** Monthly  
**34 (42%)** Quarterly  
**32 (39.5%)** Yearly  
**N=81**

Average LPN hours  
**52 (64.2%)** Institution-wide  
**52 (64.2%)** Unit  
**45 (55.6%)** Monthly  
**29 (35.8%)** Quarterly  
**28 (34.6%)** Yearly  
**N=81**

Average unlicensed personnel hours  
**59 (72.8%)** Institution-wide  
**59 (72.8%)** Unit  
**49 (60.5%)** Monthly  
**31 (38.3%)** Quarterly  
**32 (39.5%)** Yearly  
**N=81**

Use of sick time/unexcused absences  
**59 (72.8%)** Institution-wide  
**53 (65.4%)** Unit  
**44 (54.3%)** Monthly  
**29 (35.8%)** Quarterly  
**32 (39.5%)** Yearly  
**N=81**

34. Can the proportion of RN hours covered by temporary/agency FTEs be identified for:  
**51 (63%)** Institution  
**57 (70.4%)** Unit  
**N=81**

**16. Patient-Specific Quality Indicators**

35. From the following list, please indicate which of the measures listed are currently tracked for the institution and/or specific units, and the indicators that you feel would be most relevant/important for the specific settings where the CNL initiative is being implemented.

Medication errors  
**68 (84%)** Institution-wide  
**61 (75.3%)** Unit  
**34 (42%)** Use for CNL  
**N=81**

Nosocomial infection  
**62 (76.5%)** Institution-wide  
**56 (69.1%)** Unit  
**41 (50.6%)** Use for CNL  
**N=81**

Falls  
**64 (49%)** Institution-wide  
**62 (76.5%)** Unit  
**40 (49.4%)** Use for CNL  
**N=81**

Falls with injury  
**63 (77.8%)** Institution-wide  
**59 (72.8%)** Unit  
**44 (54.3%)** Use for CNL  
**N=81**

Pressure ulcers  
**59 (72.8%)** Institution-wide  
**58 (71.6%)** Unit  
**50 (61.7%)** Use for CNL  
**N=81**

Pain control/management  
**49 (60.5%)** Institution-wide  
**49 (60.5%)** Unit  
**43 (53.1%)** Use for CNL  
**N=81**

36. Feel free to list other nurse-sensitive outcomes that are more relevant to your setting (e.g. specific items from the Minnesota public health indicators, OASIS measures) and denote "Institution-wide" or "Unit" application and "CNL" application.

37. How frequently are these data on Quality Indicators compiled? (check one)  
**34 (42%)** Monthly  
**46 (56.8%)** Quarterly  
**8 (9.9%)** Yearly  
**3 (3.7%)** Other (please specify)  
**N=81**

38. Date the above data was last compiled:

<b>1 (1.2%)</b>	May 2004
<b>1 (1.2%)</b>	June 2004
<b>1 (1.2%)</b>	January 2005
<b>18 (22.2%)</b>	March 2005
<b>9 (11.1%)</b>	April 2005
<b>20 (24.7%)</b>	May 2005
<b>10 (12.3%)</b>	June 2005
<b>2 (2.5%)</b>	July 2005
<b>19 (23.5%)</b>	Did not respond

**N=81**

39. Name your primary contact for all data pertaining to the CNL project for your institution or health system.