

# Nursing Strategic Plan 2023-2027

## UC Davis Health

### Mission

Grounded in equity, we provide unparalleled care across California, transforming lives and communities. Our teams research and develop trailblazing therapies and technologies, educate and prepare a future-ready workforce, and drive excellence into all we do.

### Vision

Tomorrow's healthcare today.

### Values

Kindness, Trust, Inclusion.

### Patient Promise

Patients are at the center of everything we do.

### Nursing

#### Mission *WHY ARE WE HERE*

Provide science-based, technologically precise, compassionately delivered patient care.

#### Vision *WHERE ARE WE HEADED*

The highest quality of patient care provided through the advancement of nursing practice.

#### Values *HOW WE SHOW UP*

Extraordinary Love, Compassion, Courage, Integrity in every situation

### Strategic Pillars

Develop a Regional System of Care

Develop Exceptional Patient and Care Team Experiences

Advance Health Equity and Address Disparities

Develop and Grow Integrated, Patient-Centric Services Lines

Advance Clinical, Quality & Operational Excellence

Advance Research, Innovation & Information Technology

# Defining our Values

## Love

- We build relationships grounded in inclusivity, patience, kindness, and gratitude. In our teams and work, we bring our whole selves in an authentic and caring spirit and encourage others to do the same.

## Compassion

- We provide empathetic and compassionate care of ourselves and others through attunement, wondering, following and holding, maintaining dignity and value while developing human relationships.

## Courage

- We stay true to our values, even in the face of risk or loss. We speak up. We do this all in the service of personal and organizational integrity.

## Integrity

- We work to make decisions and meet challenges with integrity, working together to resolve issues and maintain trustworthiness, goodness, decency, honor, and respect.

# Strategic Pillars

Strategic Pillars 1 – 4 are taken directly from the UC Davis Health Clinical Strategic Plan (<https://intranet.ucdmc.ucdavis.edu/clinical-strategic-plan/pdf/csp-report-internal-final.pdf>). **Strategic Pillar 5 (Advance Clinical, Quality & Operational Excellence)** and **Strategic Pillar 6 (Advance Research, Innovation & Information Technology)** were developed by a variety of UC Davis Health Nurses across our Professional Governance structure to address priorities for Nursing throughout the enterprise with related initiatives.



## Develop a Regional System of Care

UC Davis Health aspires to build out a regional system of care, providing the right care in the right place at the right time. We will build and strengthen our partnerships, bringing UC Davis Health's subspecialty expertise and distinctive clinical trials to local providers. Strong partnerships and robust referral networks will expand our role as the provincial referral center of choice and ensure our world-class care is accessible to patients across Northern California and beyond.



## Develop Exceptional Patient and Care Team Experiences

UC Davis Health aspires to be a top place to receive care and to work. For patients, UC Davis Health will be known as a trusted provider where navigating complex, interdisciplinary care is made easy by attentive care teams and smart design. For staff and care teams, UC Davis Health will foster a culture of kindness, trust, inclusion and collaboration, united around clear goals. Our workforce will be representative of the patients and communities we serve and will deliver care with cultural competence and humility.



## Advance Health Equity and Address Disparities

UC Davis Health has been a leader in advancing health equity through our research, our education, our clinical care, and our partnership with the community. Through our Anchor Institution Mission, we embrace our economic and social role in keeping our communities healthy and we are addressing homelessness in partnership with the city and county. We will continue our efforts to lead in health equity and eliminate disparities for communities we serve. Specifically, we will work in partnership with the community to build trust, deepen our robust community relationships, provide equitable access to services, and use our hiring, purchasing, and investing power to positively impact our community. We will foster an inclusive culture where everyone feels they can bring their authentic selves to work so they can best serve our patients.

## Develop and Grow Integrated, Patient-Centric Services Lines

Over the next five years, UC Davis Health will transform key programs like our exceptional cancer, cardiovascular, neurosciences, and transplant services into integrated service lines that will organize clinical services into an integrated care continuum around a population or disease state. Our service lines will improve care for our patients by organizing care teams, clinical pathways, operations, and back-end analytics around the patient journey. And they will span care settings – from inpatient and ambulatory to digital and the home – to provide our patients with a seamless UC Davis Health experience, exceptional quality care, and improved outcomes.

## Advance Clinical, Quality & Operational Excellence

Nurses at UC Davis Health aim to provide excellent clinical care. This requires delivering consistent, safe and high quality care through standardization of workflows and adherence to established goals. Focus on operational excellence drives efficiency, access, and throughput while alleviating capacity constraints.

## Advance Research, Innovation & Information Technology

Research, Innovation and Information Technology support our UC Davis Health Nursing Mission to provide science-based, technologically precise, compassionately delivered patient care. These priorities link our inquiry and innovation to clinical care. This work also supports collaboration with internal and external partners.

# How We Do It

Within each of the Strategic Plan pillars, initiatives are sorted according to how they fit within our Nursing Strategic Objectives (4 B's). Initiatives are placed in one of the 4 B's within one of the Strategic Plan pillars, although they may also address other B's. These B's are How We Do It.

**Best People & Practice Environment** – Our work and practice environment attracts & retains the best people

**Best Patient Experience** – We deliver exceptional, patient centered care with each patient interaction

**Best Quality** – We have exceptional clinical and performance outcomes

**Best Financial Stewardship** – We have the resources to pursue the fulfillment of our Mission & Vision

A letter next to an initiative indicates matched text below that offers specific examples. Initiatives in different clinical practice areas may vary. Each clinical practice area will have a different combination of initiatives to address the specific issues and priorities in that area.

# Develop a Regional System of Care

- **Best People & Practice Initiatives**
  - Build out partnerships in target geographies for strategically aligned programs (A)
  - Expand ambulatory sites of care for infusions, diagnostics, and outpatient surgeries and procedures in target geographies
  - Expand nurse involvement in community organizations
- **Best Patient Experience Initiatives**
  - Expand telehealth and remote care capabilities (B)
  - Wraparound program (C)
  - Support patient and families locally during acute phase of care and transition to their community
- **Best Quality Initiatives**
  - Transitions of care infrastructure and initiatives (D)
- **Best Financial Performance Initiatives**
  - Improve patient referral and repatriation processes
  - Expand ambulatory sites of care for infusions, diagnostics, and outpatient surgeries and procedures in target geographies

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Note: Letters in parentheses above correspond to items below. These are detailed initiatives that fit within the broader topic areas.

- A. Specific examples:
  1. High-risk obstetrics doula program FCTC population
  2. Radiology infusion centers PCP's referrals
- B. Specific examples:
  1. Virtual follow up transition of care visits to avoid readmission/missed complications
  2. PREP clinic including telemedicine, multidisciplinary, referrals
- C. Focus on resource allocation in their community and planning
- D. Specific examples:
  1. Optimize patient flow transitions across the health system
    - a. Anticipatory management of all transfer requests including procedural, ambulatory and research admissions
    - b. Partner with service-line leadership to optimize patient care
    - c. Increase all interfacility tertiary and quaternary transfers
    - d. Increase utilization of Discharge Reception Area
  2. Transition of care workflow focus and development

# Develop Exceptional Patient and Care Team Experiences

- **Best People & Practice Initiatives**
  - Implement policies which support cultural humility, respect people's time and support wellness
  - Sustain peer support programs (A)
  - Implement relationship-based culture and team building initiatives to build a culture of service (B)
  - Attain and maintain recognition & accreditation programs (C)
  - Recognition: Awards and events for distinction (D)
  - Evaluate practice model and scope of practice
  - Review and prioritize compensation and benefits to promote retention and recruitment of top talent and equity (E)
  - Provide opportunities and resources for professional development (F)
  - Encourage nursing involvement in community and organizations external to UCDH
  - Assess and adapt practices to support nurses working at the top of their scope of licensure (G)
  - Invest in leadership development and training to support career growth of all employees
- **Best Patient Experience Initiatives**
  - Involve patients and families in plan of care (H)
  - Improve responsiveness to patient calls/inquiries
  - Develop strategies to focus on the psychosocial needs of the patient including mental emotional and social needs (I)
  - Increase patient rounding practices
- **Best Quality Initiatives**
  - Promote best practice to prevent injury (J)
  - Explore and implement complementary and integrative therapies (K)
  - Systematically develop process to review IR's, Patient Relations concerns for service recovery response and performance improvement identification.
  - Explore environmental safety/security interventions for patient and staff safety. (L)
- **Best Financial Performance Initiatives**
  - Expand gratitude heals funds impact, sustainably powered by philanthropy (M)
  - Expand Health Sciences Development (HSD's) System Impact (N)

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Note: Letters in parentheses above correspond to items below. These are detailed initiatives that fit within the broader topic areas.

A. Specific examples:

1. Support U

B. Specific examples:

1. Advancement of therapeutic competencies through Relationship Based Culture workshops
2. Collaborate on organization-wide interprofessional workplace violence prevention initiatives

C. Specific examples:

1. Magnet
  - a. Enhance nursing staff understanding the nursing professional practice model (NPPM)
  - b. Sustain NPC All Here Day
  - c. Preferentially hire nurses with BSN or higher educational preparation

- d. Conduct annual evaluation of the NPPM and professional governance structure
  - e. Leverage NPC All Here Days to strengthen professional governance and clarify council actions
- 2. Beacon
- 3. PRISM
- 4. Lantern
- 5. PTAP accreditation
- 6. NICHE designation
- D. Specific examples:
  - 1. APP Recognition Week
  - 2. Leader Recognition
  - 3. Recognize and celebrate council accomplishments
  - 4. Continue Nursing Science and Professional Governance Conference
  - 5. Nurses Week Programming
  - 6. Specialty Certification Day
  - 7. Thank Goodness for Staff Awards
  - 8. BEST Program
  - 9. DAISY Awards
  - 10. Advance Practice News
  - 11. UCD Nurse Annual Report
  - 12. Always Nurse
- E. Specific examples:
  - 1. Sustain and maintain staffing resources as guided by regulatory, policy, and practice assessments
  - 2. Recruitment/retention - nursing practice focus
  - 3. Embed mentoring and succession planning for nurses at all levels
  - 4. Hire APPs with national board certification aligned with clinical practice setting and population
- F. Specific examples:
  - 1. Advance career ladder across enterprise
  - 2. RNL
  - 3. Bridges to excellence
  - 4. Develop leadership capacity at all levels
- G. Specific examples:
  - 1. Support advanced practice programs
  - 2. Patient panels for APPs
  - 3. Add others to include relevant items for LVNs RNs etc.
  - 4. Provide dedicated provider (physician and APP) education to optimize the capture of APP-performed reimbursable services
- H. Specific examples:
  - 1. Care delivery design and evaluation
  - 2. Leader rounding with staff and patients
  - 3. Design environments that promote a joyful patient-centered aesthetic
  - 4. Bring patients back to UBPC or staff meetings post discharge
- I. Specific examples:
  - 1. Advance our inpatient CARE Program to support expansion of Art Therapy, Recreational Therapy, PHUR, CARE Cuts and CARE Cart
  - 2. Child Life programming
- J. Specific examples:
  - 1. Ergonomic health
  - 2. Blood born pathogen exposure
- K. Specific examples:
  - 1. Aromatherapy
  - 2. Reiki
  - 3. Music therapy
  - 4. Meditation and guided imagery resources
- L. Specific Examples:
  - 1. Safety check for belongings
  - 2. Screening at UCDH entry points
  - 3. Communication devices/strategies for duress alerting
- M. Specific examples:
  - 1. The CARE Project, Reigniting the Spirit of Caring Endowment, Patient Assistance Support Fund, Child Life Support Fund
- N. Specific examples:
  - 1. Leverage fundraising knowledge, training, and experience
  - 2. Encourage participation in events, employee giving, referrals, retirement giving.
  - 3. Honor annual Gratitude Heals Award winner for dedication to advancing philanthropy in clinical nursing

# Advance Health Equity and Address Disparities

- **Best People & Practice Initiatives**
  - Develop an inclusive, culturally humble, and representative workforce and culture (A)
  - Implement leadership and governance diversity, equity and inclusion goals and accountability structures
  - Engage in community trust-building and dialogue
  - Support participation in employee resource groups
  - Support staff participation in volunteer events serving the local anchor institution mission (AIM) communities
  - Collaborate with HEDI and BIMSON to advance DEI (B)
- **Best Patient Experience Initiatives**
  - Leverage language and literacy resources to support communication (C)
- **Best Quality Initiatives**
  - Implement strategies to support individual patients (D)
  - Provide support and interventions for substance use and opioid stewardship (E)
  - Provide resources/access/placement for unhoused patients (F)
  - Bring an equity lens to our patient care delivery models, including investing in data and analytics to eliminate health disparities and bias in clinical delivery
  - Develop strategies to address social determinants of health for patients
- **Best Financial Performance Initiatives**
  - Evaluate equity, compensation, and market analysis of nursing roles
  - Engage in community trust-building and dialogue

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Note: Letters in parentheses above correspond to items below. These are detailed initiatives that fit within the broader topic areas.

- A. Specific examples:
  1. Develop inclusive workspace
  2. Integrate DEI in all professional development
  3. Identify, attract, and retain a diverse staff
  4. Raise awareness and accountability in support of cultural inclusivity
  5. Increase departmental participation in DEI events (e.g., Attend Implicit Bias Series, Cultural Excellence Grand Rounds, and/or engage in any UC Davis Health DEI or Community activity).
- B. Specific examples:
  1. DEI Council engagement
  2. Provide Anti-Racism and Cultural Humility (ARC) training within nursing
- C. Specific examples:
  1. Encourage bilingual language certification in nursing
  2. Embrace multilingualism in nursing
- D. Specific examples: Considering ethnic, sexual/gender identity, neurodiversity, disability, other personhood aspects
  1. Identify diverse patients and support
  2. Neuro-diverse patient populations
  3. Inclusive care – transgender care clinic
  4. Underrepresented patient populations
  5. Unhoused
  6. At risk for missed care
- E. Specific Examples:
  1. Implement and monitor Clinical Opioid Withdrawal Scale (COWS)
  2. Pain Management
  3. Controlled Substance Accountability
- F. Specific Examples
  1. Homeless Patient RN Discharge Protocols



# Develop and Grow Integrated, Patient-Centric Service Lines

- **Best People & Practice Initiatives**
  - Expand distinctive neuroscience, cancer, cardiovascular, and transplant clinical programs
  - Expand the footprint of advanced practice fellowships
- **Best Patient Experience Initiatives**
  - Establish governance and management structures that support patient-centered care across the entire continuum
- **Best Quality Initiatives**
  - Integrate research and clinical trials, new care models, and therapies into service line delivery (A)
- **Best Financial Performance Initiatives**
  - Develop referral workflows and outreach relationships with regional hospitals
  - Increase patient access for procedure-based care
  - Develop integrated service line financials and incentives

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A. Specific examples:

1. Develop processes for communicating clinical trials information to nursing staff
2. Collaborate with investigators and CTSC to facilitate planning for clinical trials in the inpatient setting

# Clinical, Quality & Operational Excellence

- **Best People & Practice Initiatives**
  - Resources for professional development and distinction (A)
  - Peer review for advancement (B)
  - Advance professional practice by engaging in professional organization annual meetings and leadership
- **Best Patient Experience Initiatives**
  - Leverage programs that facilitate care transitions (C)
- **Best Quality Initiatives**
  - Just Culture implementation and utilization awards and acknowledgments for quality milestones (D)
  - Metric/Analytic development for registry and quality data
  - Patient safety events evaluation (RCA/SBAR)
  - Hospital acquired infection (HAI) prevention to decrease HAI's (E)
  - Implement and utilize a standardized performance improvement (A3) model
  - Conduct emergency preparedness readiness drills
  - Promote patient safety awareness activities
  - Utilize benchmarking to inform nursing practice
  - Fall Prevention to decrease falls
  - Medication Safety to decrease medication errors (F)
  - Restraint Safety with decreased restraint incidence
  - Suicide Risk Assessment and Mental Health Support
- **Best Financial Performance Initiatives**
  - Patient flow / Capacity Management (Patients receiving right care in the right setting) (G)
  - Multidisciplinary rounding
  - Promote transparency using analytics to evaluate revenue generating work (H)
  - Implement sustainability strategies (I)
  - Finance/Budget planning (J)

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- A. Specific examples:
  1. Maintain resources supporting national certification
  2. Maintain resources for nurses seeking additional educational preparation
  3. Engage in professional organizations to network and collaborate with external partners
- B. Distinction between regulatory required review vs. development-based; functions as a mechanism to sustain standards for safe and quality care
- C. Specific examples:
  1. Substance use navigator (SUN) program to facilitate care transitions for the patient experiencing substance use
- D. Specific examples:
  1. Patient Safety Awards
  2. Good Catch Awards
  3. Josie King Hero Awards
- E. Specific examples:
  1. Increase CHG Compliance
  2. Increase Hand Hygiene
  3. Decrease Blood Culture Contamination
  4. Decrease CAUTI's
  5. Decrease CLABSI's

- 6. Decrease IVAC
- 7. Decrease HAPI
- F. Specific examples:
  - 1. Barcode Scanning
  - 2. Controlled Substance Waste
- G. Specific examples:
  - 1. Increase DC by 2PM
  - 2. Increase DC within 2 hours of DC order
  - 3. Increase DRA eligibility
  - 4. Patient transfer efficiencies to improve movement times
  - 5. Hospital at home implementations
  - 6. Mitigate readmissions (30-day, etc.)
- H. Specific examples
  - 1. Capture of APP-performed reimbursable services among stakeholders
- I. Specific examples:
  - 1. Engagement with the sustainability committee
  - 2. Replace disinfected reusable plastic products with aluminum products
  - 3. Replace single use plastics with paper products
    - a. Non-clinical
    - b. Lab collection bays with envelopes or wax paper
  - 4. Pilot a supply ambassador in key areas across the organization
  - 5. Follow sustainable procurement guidelines
  - 6. Unit level supply use reduction
- J. Specific examples:
  - 1. FTE per ADC
  - 2. FTE variances
  - 3. Overtime monitoring
  - 4. Travel/training methodology for prioritization

# Research, Innovation & Information Technology

- **Best People & Practice Initiatives**
  - Support and prioritize nurse-led and interdisciplinary research and innovation
  - Intentionally integrate evidence-based practice (EBP) methodology into clinical and operational processes (A)
  - Promote integrative and complementary therapy programs
  - Expand nursing informatics as a program
  - Advance organizational engagement and distinction in nursing research, EBP, innovation and information technology (IT)
- **Best Patient Experience Initiatives**
  - Deploy remote physiologic monitoring
  - Provide tools for increased transparency of care and access to information via MyChart Bedside and Bedside TV
- **Best Quality Initiatives**
  - Strengthen partnerships in innovations, research, and EBP (B)
  - Build and maintain infrastructure of resources and personnel to advance and sustain tracking, management and reporting of research and initiatives (C)
  - Optimize Epic and build IT, reporting, and analytics capacity for integrated service lines
  - Bring an equity lens to our patient care delivery models, including investing in data and analytics to eliminate health disparities and bias in clinical delivery
  - Provide real time data at the point of care (D)
  - Leverage and implement tools, equipment, and resources to advance efficiency, patient and staff safety (E)
  - Evaluate new enhancements (IT, EMR, Analytics, Integration) for implementation
  - Conduct device-related research
  - Explore AI/ML model implementations
  - Develop/advance access to data and reporting for initiatives/projects, research (F)
- **Best Financial Performance Initiatives**
  - EMR/Nursing documentation evaluation for efficiency, elimination, or automation
  - Deploy innovations that demonstrate a positive cost-value equation
  - Expand telemedicine and remote care capabilities

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Note: Letters in parentheses above correspond to items below. These are detailed initiatives that fit within the broader topic areas.

A. Specific examples:

1. Maintain collaboration with Fuld Institute
2. Invite interdisciplinary colleagues to participate in EBP programming

B. Specific examples:

1. Advance partnership and collaboration in research and EBP with UCD BIMSON
2. Collaborate with other UC campus nurses in research and research infrastructure
3. Develop collaborations with regional and national peer organizations in research and EBP

C. Specific examples:

1. FTE to mentor staff to develop and implement high quality EBP initiatives to assure high yield results
2. Establish initiative intake platform for broad tracking, awareness, collaboration, and resource provisioning
3. Disseminate and facilitate external dissemination of research, innovations, and EBP
4. FTE/budget for statisticians to consult on grant and study design, methods, reporting/perform analyses

5. Collaborate with BML librarians to establish and maintain updated EBP resources
- D. Specific examples:
1. Optimize patient outcomes at point of care
  2. Provide real-time nursing sensitive indicators and safety metrics data to guide evidence-based care
  3. Optimize medication safety
  4. Inform rounding tools and reports
- E. Specific Examples:
1. Integration of equipment to eliminate manual documentation (i.e.: VSM, Vent)
- F. Specific examples:
1. Build customized Epic IT monthly reports
  2. Develop accessible and usable data access
  3. Develop KPI, Scorecards, etc. to monitor outcomes and goals