Diamond Level

Domain 1: Principles

A. Equity/Diversity/Inclusion (E/D/I)

Provide an example of how your unit identified biases or inequity. Explain how E/D/I principles were used to provide excellent patient-centered care and the interventions for social determinants of health.

Include:
1. **The method to identify biases or inequities is described**
2. **Biases or inequities that were identified**
3. **One of the following:**
   - **Clear description of the application of E/D/I principles to patient care**
   - **A clear description of the intervention to address social determinants of health**
4. **Evidence to support is included (committee minutes, policies, education, patient experience)**

Examples may include but are not limited to:
- Include the E/D/I statement in the unit mission statement
- Regularly use interpreters or certified staff as interpreters when caring for families who do not speak English

B. Holistic Care

Demonstrate the implementation of unit-driven holistic care by collaboration with allied health professionals in unit improvement projects to improve patient experiences/outcomes.

Include:
1. **Project background**
2. **Disciplines involved**
3. **How the project was implemented**
4. **How it impacts the unit patient population**
5. **Outcomes of project**

Examples may include but are not limited to:
- Nurse collaboration with a child life specialist, recreational therapist, art therapist, music therapist, chaplain in a project that has positively impacted patient experiences or outcomes

C. Patient and Family-centered Care

Choose _one_ of the two topics to submit

-Provide an example of a completed or in-progress performance improvement project based on your patient satisfaction survey results.

Include:
1. **Project description, methods (goals, interventions) and results or current state (how measuring), disciplines involved**
2. **Patient satisfaction results prompting the project**

Examples may include but are not limited to:
- High scoring unit for response to call lights

-Describe how the unit incorporates perspectives of patients and their families into patient and family-centered care decisions. **Include:** 1. **Method for obtaining and communicating patient and family perspectives** 2. **Describe opportunities patients/families are invited to participate in on the unit** 3. **Example of a time it impacted patients/families**	**Examples may include but are not limited to:** • Establish or have a Family Advisory Group for specific patient populations or demonstrate how active family advisors participate on unit performance teams

Domain 2: Values

A. Advocacy

Maintain a nursing chain of command and/or incident reporting system and culture of safety in reporting.
 	
Include:
1. **Method for reporting error or near miss event**
2. **Report system used**
3. **Supporting documentation for:**
    a. **How reports are used to improve unit or system-wide processes**
    b. **How learning from reports is shared with staff**
    c. **Methods used to demonstrate a culture of safety in the unit**
	Examples may include but are not limited to:
	• Share how the organization communicates about the culture of safety, what system is used for reporting, how staff/organization learn from reports

Describe how nurses advocate for families at the bedside to ensure families are a part of rounds and/or connected with support services as needed.
 	
Include:
1. **Process for parent participation in rounds**
2. **Process to contact a parent if not present for rounds**
3. **If the below services are available include:**
    a. **Family support: services provided, how often available**
    b. **Psychologist/Therapists: the process of educating parents of service**
    c. **Process for families to request service**
4. **Statement of services not available if applies**
	Examples may include but are not limited to:
	• Standard process to contact parents on the phone during rounds if not present in the room
	• Psychologist on staff who provides regular support to families

Provide an example of one or more ways the unit has demonstrated advocacy for any of the listed entities. Describe the efforts and the outcomes of the initiatives. (Patients, families, communities, target populations, and/or national policy). **Include:** 1. **Entity unit demonstrated advocacy for** a. **Patients, families, communities, target populations, and/or national policy** 2. **Event or initiative involved with** 3. **Who was involved by role**	**Examples may include but are not limited to:** • Provide yearly education on child/family abuse indicators and human trafficking, as well as relevant state, local, and mandatory reporting laws.

4. **Interventions or efforts applied**
5. **Outcome of initiative**
6. **Include any fliers, handouts or presentations given**

B. Ethics

Provide an example of how the unit identifies and resolves care-related ethical issues or other issues that create moral distress for staff. Demonstrate how the learning is shared with the unit.

Include:
1. **Policy/procedure for reporting ethical concerns**
2. **Summary of Ethics Committee**
   a. **Disciplines of members**
   b. **Frequency of meeting**
   c. **On-call services**
3. **Methods used to educate nurses on how to submit ethics report**
4. **Methods by leadership in a unit or organization to support nurses through the entire process**
5. **Services in the organization to support staff and facilitate debriefs of ethical issues**

Examples may include but are not limited to:
- Maintain policies and procedures for informed consent, LGBTQIA+ issues, end-of-life care, confidentiality, and resource allocation
- Provide proof of consistent pediatric nursing representation on your organization's Bioethics Committee

C. Quality of Life

Demonstrate the activities your unit engages in to improve patients' quality of life.

Choose two of the six topics:

-Demonstrate competence in assessing and managing pain across the lifespan.

Include:
1. **Pain scales used for assessing and managing pain for all age levels**
2. **Supporting documentation: pain documentation audits, competency tools, policy for assessing/reassessing**

-Demonstrate how your facility provides a child-friendly physical environment for pediatric patients.

Include:
1. **Photographs of child-friendly environment (colors, patterns, equipment sized and adapted for children)**
2. **Supporting documentation to provide context of pictures and facility highlights**

-Demonstrate how your unit provides toys and learning activities to assist the child in understanding care processes and distractions for care suitable for all developmental and age-appropriate patients.
Include:

Examples may include but are not limited to:
- Pain scale audits to demonstrate appropriate use of pain scales, policy adherence for assessment/reassessment of pain
- Provide photographs of the environment that showcase what makes it child-friendly (colors, patterns, equipment sized and adapted for child, etc.)
- Provide examples of programs and events held for patients to socialize and engage in fun

1. **Provide the services (child life, music therapy, etc.) available to unit and types of activities**
2. **Provide details regarding toys, learning development tools that are available to patients on the unit, and how staff utilize them in caring for and distracting patients**

-Demonstrate how your unit screens for mental health/suicide risks to ensure early interventions and access to appropriate care are provided.

Include:
1. **Process for screening patients for mental health/suicide risk**
2. **Provide a copy of the screening tool and policy**
3. **Supporting documentation of the outcomes of using the tool**

-Demonstrate your unit's ability to provide bedside education if the child requires schooling while admitted to their facility for long-term care.

Include:
1. **Method for assisting school-age patients in continuing schoolwork while inpatient**
2. **Supporting documentation on how unit staff provide care while supporting schooling in collaboration with educators**

-Demonstrate how your unit encourages developmentally and socially appropriate interaction between pediatric patients while maintaining their rights and protecting their health.

Include:
1. **Provide activities and processes in place to facilitate developmental/social interactions between patients**
2. **How are patients' privacy and rights maintained**

Domain 3: Engagement

A. Professionalism

Provide examples of how nurses on the unit practice self-care and any services/benefits provided by the organization for nursing self-care.

Include:
1. **Provide a summary of activities/practices done on the unit to promote self-care by nurses**
2. **Provide a summary of any activities/practices provided for nurses (or any staff member) for self-care by the organization**
3. **Provide an example of a nurse utilizing self-care practices and how they benefitted from them**

Examples may include but are not limited to:
- Therapy dogs, massage room, employee assistance services (counseling, financial assistance, etc.)

Demonstrate how nurses participate in unit or hospital-wide initiatives (which may include committee work) that have affected change in operations, processes, or practices for either pediatric patients or nursing.
 	
Include:
1. **Provide a summary of the unit or hospital-wide work nurses collaborated or led that describes:**
    a. **Length of work**
    b. **Disciplines involved**
    c. **Background and goals**
 	
2. **Changes to process or practice for patients or staff**
    a. **Development**
    b. **Implementation**
    c. **Evaluation**
    d. **Describe the overall impact on operations, processes, or practice for pediatric patients or nursing**
	Examples may include but are not limited to:
	• Development of clinical ladder, new seniority or holiday staffing policies,
	• Implementing pH testing for NG placement by development of policy, education, implementation on units

B. Professional Development

Provide documentation of pediatric specialty certified nurses and % of staff certified.
 	
Include:
1. **The following data:**
    a. **Total number of nurses on the unit**
    b. **Total number of nurses on the unit with a specialty-specific certification (Ex: CCRN, APHON, CPEN, CMSRN, CEN)**
    c. **Total number of nurses on the unit with pediatric certification (CPN)**
    d. **% of all certified nurses on the unit**	

Demonstrate your unit's professional development activities.
 	
Choose <u>one</u> of the below four topics:
 	
-Provide evidence of the Nurse Residency program, an example of curriculum, schedule, goals, and deliverables. Explain the process for staff to join and the time commitment.
 	
Include:
1. **Summary of Nurse Residency Program**
    a. **Background of the program (when started, who leads, any accreditation)**
    b. **Curriculum (session topics, discipline/title of speakers)**
    c. **Schedule**
    d. **Goals**
    e. **Deliverables**	

f.   **Method of participation (self-enroll, assigned by leader, enrolled upon hire)**
       g.   **Time commitment**
 	
-Provide your leadership structure and include a narrative on how leaders foster unit leadership development.
 	
Include:
   1. **Summary of leadership structure**
       a. **Unit organizational chart**
       b. **Description of each role**
       c. **Methods used by leaders to foster unit staff leadership development**
 	
-Describe the education team structure and process for identifying learning needs and what practices are in place to meet those needs. Provide at least two examples.
 	
Include:
   1. **Summary of education team structure**
       a. **Methods used to identify learning needs**
       b. **Methods used to meet staff learning needs**
       c. **Two examples of needs and how met**
 	
-Provide evidence of how nurses have been able to present on clinical research or QI in your organization.
 	
Include:
   1. **Summary of process for nurses to submit scholarly work to conferences or other learning events**
       a. **Copy of presentation**
       b. **Event presented at and date**
       c. **Supporting documentation of how leadership enables staff to present (Ex: financial support, recruitment of speakers, research/QI support service for nurses)**	

C. Collaboration

Provide documentation of how your unit successfully established and maintains professional relationships with other departments or units within the organization or collaborative agreements with other organizations to ensure excellent patient care and family support. **Include:** **Choose _one_ of the three methods:** 1. **Letter provided by collaborating unit or department addressing how applying unit collaborates and maintains a relationship to improve patient care and family support**	**Examples may include but are not limited to:** • Letter of reference or support from another unit or example of how the unit did this and the impact it had (collaboration with ED, PICU, LAB)

2. Supporting documentation of successful collaboration with another unit or department addressing the situation and communication to facilitate an excellent Patient/Family experience. Include any feedback from families that supports the collaboration if available 3. Supporting documentation of a collaborative agreement with another organization and the process, policies, and methods used to facilitate excellent patient care and continuity for families. If available, include any feedback from families that supports the collaboration	

Domain 4: Care Delivery

A. Care Coordination

Describe strategies used to collaborate with patients, families, and multidisciplinary healthcare teams and improve communication aside from patient and family-centered rounds. Include: 1. Strategy used to improve communication and collaboration between Patient/Family and the care team 2. Supporting documentation on how this process improved communication between staff and families. Include any family feedback if available	**Examples may include but are not limited to:** • Care conferences, set times for teams available to meet with families
Provide your unit's Care Coordination services by describing the essential functions of your dedicated Care Coordinators for the unit; and how the role is integrated into the multidisciplinary team. Provide one example of a patient who has required care coordination and collaboration between units, facilities, programs, home care, etc., and how your unit met those needs. Include: 1. Describe the role responsibilities, and how they participate in Patient/Family care with the multidisciplinary team 2. Patient example (no PHI) of needing care coordination and collaboration 3. Supporting documentation of situation type (between units, facilities, home care, etc.) 4. How the unit in collaboration with the Care Coordinator met Patient/Family needs	**Examples may include but are not limited to:** • Complex discharge planning, pathway to home

B. Health Promotion

Describe health literacy principles and how they are integrated into care on the unit.	**Examples may include but are not limited to:** • Demonstrate language services available, how documents are provided at appropriate reading levels, how the health literacy needs of

Include: 1. **Provide documentation on health literacy policy, program or committee** 2. **Disciplines involved in work** 3. **Methods the unit uses to integrate into the care of patients/families**	patients/families are assessed, standard processes on the unit to communicate the needs of families, utilize teach-back methods for families

Provide evidence of <u>one </u>of the two health promotion activities:
 	
-Demonstrate nurse participation in a pediatric-focused health promotion station at a health and wellness event (sponsored by your organization or other credible health or community organization).
 	
Include:
1. **Provide documentation on health or wellness event**
    a. **Sponsor of the event**
    b. **Date**
    c. **Location held (non-identifying: school, community center, etc.)**
    d. **Disciplines involved and how many, and any proof of participation.**
    e. **Activities performed by staff in attendance.**
    f. **Copies of any presentations given slides de-identified) and/or photos for either activity**
 	
-Demonstrate completion of a unit-based educational activity for families focused on health promotion.
 	
Include:
1. **Provide documentation on health promotion activity held by unit**
    a. **Title**
    b. **Speakers or activity hosts (first name and discipline only)**
    c. **How many families attended,**
    d. **How many unit members participated, and activities performed by staff**
    e. **Any family feedback from the event if available.**
    f. **Copies of any presentations given (slides deidentified) and/or photos for either activity**	

C. Care Planning

Demonstrate how age/diagnosis-appropriate care plans are utilized on the unit and how are they used to communicate across shifts. **Include:** 1. **Examples of care plans available for age/diagnosis-appropriate patients** 2. **Process of assigning and initiating care plans to patients** 3. **Method used to share progress between shifts** 4. **Supporting evidence of the standard of care for documentation in care plans**	

Describe the process of care conferences for patients/families on your unit and the process to request. **Include:** 1. **Method for identifying families for care conferences** 2. **Method to request care conference and who can request** 3. **Overview of the structure of a care conference** 4. **Disciplines that attend**	

Domain 5: Continuous Improvement

A. Outcomes

Provide <u>all</u> the following data outcomes: • Overall satisfaction/rating for the unit from the patient satisfaction survey platform (NRC, Press Ganey, Leapfrog, etc.) • Overall satisfaction/rating for satisfaction with nursing staff for the unit from the patient satisfaction survey platform (NRC, Press Ganey, Leapfrog, etc.) • 30-day readmission rate to unit • Medication errors per 1,000 patient days • Unit rates for one of the following: UPE, CLABSI, Pressure Injury, Bathing compliance, or other unit quality indicator rates • Hand-washing compliance rate for the unit • Safe Sleep compliance rate for the unit **Each outcome must include:** 1. **The previous 8 quarters of data (minimum of 4 quarters if newly tracking, notate date started tracking)** 2. **A list of data points or graphs with each quarter's overall rate** 3. **How data is obtained**	
Select a quality initiative targeted toward a population-specific to your unit and describe how the unit achieved or is achieving improved patient outcomes because of your initiative. **Include:** 1. **Provide the quality initiative worked on** 2. **Disciplines involved in the work** 3. **Method used to determine the need to improve, the process to determine the cause, interventions chosen, and results achieved** 4. **Include data graphs of pre- and post-results** 5. **Process to ensure sustainability**	**Examples may include but are not limited to:** • CLABSI rate high, who was involved, what was done, what results were achieved, share data graphs, sustainability plan, next steps

B. Quality Standards

Use of LEAN/Six Sigma methodologies to identify and break down a problem, then develop improvements.
 	
Include:
    1. **Provide a summary of the LEAN/Six Sigma or other methodology used to identify problems, break down problems, and develop improvements**
    2. **Example of a project or process that was improved in the unit using that methodology**	

Describe nursing involvement in huddles to improve communication, surface issues, and celebrate successes.
 	
Include:
    1. **Method of huddle process (when, where, who attends)**
    2. **Type of huddle and information that is shared at huddle (overview, not specific details). Submit a standardized reporting sheet if applicable.**
    3. **Example of improved communication or awareness of issues by having a huddle process**
	Examples may include but are not limited to:
	• A process of meeting as a team before start of the shift to ensure all team members have essential communication needed for the shift, the ability to bring up concerns or safety issues, and/or provide recognition to others

Select <u>three</u> topics from the following when the outcomes were <u>not</u> meeting expectations and describe how the unit improved outcomes.
 	
Patient Safety
• Hospital-acquired conditions (e.g., C-DIFF, MRSA, CLABSI, CAUTI)
• Restraint documentation
• Blood transfusion errors
• Alarm fatigue
• Identifying and mitigating risks associated with behavioral health
• Medication errors
• Pain management
• Hand Hygiene
 	
Include:
Supporting documentation on the background of the outcome that was below expectations and includes all steps 1-7.
    1. **Specific metric**
    2. **Plan**
    3. **Goal(s)**
    4. **Intervention(s)**
    5. **Outcome(s)**
    6. **Description of how direct care staff participate in the process**
    7. **Include a graph with a data table**	

Describe nurses' involvement in the development and participation of simulations and/or mock code scenarios.	

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Include:
1. **Method for creating, implementing, and evaluating simulation or mock codes**
2. **Disciplines that helped create, run, and participate in an event.**
3. **One learning outcome from an event held that benefitted unit staff**

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Provide documentation of pediatric nurse participation in a Quality Improvement committee.

Include:
1. **Summary of QI-focused committee that describes:**
   a. **Disciplines involved**
   b. **Frequency of meetings**
   c. **When the committee started**
   d. **Work accomplished or in progress over the past year**
   e. **Signature of committee chair**

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C. Evidence-based Standards

Choose <u>two</u> of the six topics: -Provide documentation of unit members authoring a peer-reviewed publication. **Include:** 1. **Copy of authored/co-authored article with location and names redacted** 2. **Letter/email of acceptance to peer-reviewed publication** -Provide documentation of an evidenced-based practice or quality improvement project implemented on the unit as part of the Nurse Residency Program. **Include:** 1. **Project summary, measures, and results of project as a requirement of Nurse Residency completion** 2. **Signed by Nurse Residency program leader** -Identify how evidence-based practice improved the Patient/Family experience. **Include:** 1. **Summary of evidence-based practice** 2. **Method used to improve the Patient/Family experience** 3. **Results of impact on Patient/Family experience** -Submit an example of unit members' participation in revising, updating, or developing a new policy and/or procedure related to clinical practice. The policy, procedure, and or protocol must reflect the integration of current literature (published within the last five years).	**Examples may include but are not limited to:** • Completed article authored/co-authored by a unit nurse(s) that was accepted to a peer-reviewed publication

Include:
  1. **Submit policy/procedure of clinical practice revised or updated**
  2. **Literature references published in the last five years to support policy/procedure**
  3. **Unit staff listed as reviewers/authors, first names only**
 	
-Implement or maintain a pediatric nurse-focused journal club or method of sharing literature.
 	
Include:
  1. **A Summary of:**
     a. **Program guidelines**
     b. **Frequency of meetings**
     c. **Method used to obtain articles, process of sharing/discussing articles**
     d. **Include list of articles shared in the past two years**
 	
*Program must have been in place at least 1 year at the time of submission, if < 2 years, include program start date *The program must be led by nurses
 	
-Provide documentation of unit members involvement in the implementation of a NEW nurse-driven patient care policy, procedure, or device on the pediatric unit or hospital.
 	
Include: <u>One of the three options below.</u>
 	
  1. **Submit a copy of the policy or procedure**
  2. **Summary of the process of developing policy and unit nurses' involvement**
  3. **Provide a summary of evidence-based literature on new devices implemented in the unit**
     a. **Literature within five years**
     b. **Evidence of effectiveness through a pilot study**
     c. **Supporting documentation summarizing the pilot study and results**
	Examples may include but are not limited to:
	  • May also be an article review, evidence-based practice huddle