



“Finding nursing” in Australia and New Zealand

BY SHEILA MCCREVEN



Former YSN Dean Donna Diers '64, PhD, RN, FAAN, and current Annie W. Goodrich Professor Emerita of Nursing, has been making international connections for the school for the past fifteen years. By disseminating her research on evidence-based management, she has contributed to shaping health policy in Australia and New Zealand with partners who share her keen interest in examining the way nursing's impact can be measured.

Diers describes how her involvement in this aspect of nursing management began when she made connections with colleagues at Yale. She says, “When I relinquished the deanship here at YSN in January 1985, I took a semester-long sabbatical, which I spent with the Health Systems Management Group (HSMG), a partnership between Yale's School of Management (SOM) and Epidemiology and Public Health (EPH).” The two principals of HSMG, John Thompson, a professor at both YSN and EPH, and Robert Fetter at SOM, were winding up research on what became Diagnosis Related Groups (DRGs), which is the basis of payment used when Medicare pays a hospital.

“John was a hospital administrator, but he was a nurse to start with, so his view of the health care delivery world was very much informed by his understanding of how you get stuff done in hospitals—including the care of patients, but that turns out to be the easy part.”

“Bob was an operations researcher, an engineer essentially. He was also interested in how you get things done. One concept he had learned from his engineering work is that in order to measure the quality of anything you need to be able to describe what the thing is that you are measuring the quality of.” Diers comments that this sounds like it would be easy, “but it's really not, when you're talking about patient care or hospital functions.”

She explains, “At the time—and still today—DRG payment rates did not include any recognition of nursing. So Thompson sought and received funding, and researchers at HSMG set out to see if known methods of measuring nursing—called generically nursing acuity or nursing intensity—could be used to modify DRG payment rates such that they would reflect better the contribution of nursing, both to the cost and to the income in health care settings.”

“I had never done this kind of research and I found it to be absolutely thrilling work,” Diers says. She and her colleagues were

on what she describes as “the bleeding edge of public policy change. I got to talk with people who were actually writing legislation, taking the results of research and putting them into policy.”

This work was being spread throughout the world, where most countries—other than the United States—own the health care system. Thompson and Fetter and the HSMG team started annual conferences, called Case Mix Conferences. By the time Diers attended the Second Annual Case Mix Conference in Australia to present, she recalls, “I had fallen in love with international travel.”

Diers met Debora Picone, the director of nursing in a Sydney hospital at that time (she is now the Director General of Health for New South Wales). Picone seized on the ideas she heard at the conference, and she and her colleagues began to convert nursing intensity measures into “service weights” for Australia's version of DRGs. Her team included an economist, George Palmer, and Chris Aisbett, a statistician. In the late 1980s as they were introducing their ideas in Australia, they invited Diers for a three-week visit during which, each day, all day long, she would present DRG work to audiences of physicians, nurses and hospital administrators as they began to adopt these new ideas of how to measure hospital operations and set budgets for hospitals.

She says, “They picked me to represent ‘the human face of DRGs,’ as they called it. Coming from America, where we had rolled these ideas out years earlier, I could address the negative reactions and fears, and get to the real point of the system—that it provides a way to reveal hospital operations, including nursing.”

Diers continues, “Nursing is hidden, but it can be found in the data that have been kept by hospitals in their billing and medical records coding systems for so many years. When I describe what you can do with data to reveal nursing, that really excites the nurses. I learned how to present data in a way that engages people. Narrative combined with data.”

Back at YSN when her sabbatical ended, Diers developed course work in nursing that paralleled what her HSMG colleagues had been teaching. She continued to teach with them, at one time holding a triple joint appointment as a faculty member at YSN, EPH and SOM, until Fetter's retirement, and later, Thompson's death in 1992.

Diers explains that using administrative data systems to examine nursing is difficult, because there is nothing in these systems

labeled nursing. “You can’t track nursing work to patients, because nurses do not admit patients, for example, so there’s no record of their individual patient assignment. So we began to do data mining to get at the nursing component of care, starting at Yale-New Haven Hospital, and have published on this extensively,” she says.

According to Diers, there are indeed ways to “find” nursing in administrative data systems, “if you’re clever about it,” she says. “And that’s what I’ve dedicated the last fifteen years of my life to revealing.”

“When you do ‘find’ the nursing, my goodness—what fun you can have!” she exclaims. “Guess who gets people in and out of the hospital? It’s not doctors—it’s nurses. Nurses are hospital operations,” according to Diers. This work has come to be known as the theory and practice of evidence-based management.

Diers goes on to explain, “As we got our studies into the literature, I was invited to speak on the topic internationally.” In immersing herself in this discipline, she says, “I got to work all over the world. My focus has been primarily in Australia, and more recently it has widened to New Zealand, as well.”

At the invitation of then-Dean Jill White, Diers spent a semester beginning in January 2000 as a Visiting Professor at the University of Technology, Sydney (UTS), with the Faculty of Nursing, Midwifery and Health. While there, she and another UTS faculty member, Dianne Pelletier, developed two courses on uses of data in decision-making, taught in intensive mode.

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“We only had the students four full days each, spread out over a six-week period, and in between, the students had assignments.” Diers explains that this is where her present course in YSN’s Nurse Management Policy and Leadership (NMPL) program originates. “When I learned how to do this in Sydney I knew I had to bring it home with me to share with my colleagues at YSN,” she says.

Together with Pelletier, she published work on the teaching program and about the data they analyzed in Australia. She now has spent several years teaching at UTS over the summer months. “We’ve probably put 300 people through the course there,” she estimates.

Diers says it is exciting to work with these students because, like YSN’s NMPL students, most of them are working in hospitals and other care settings full-time, where they have access to their own data. “Once you teach nurses how to look at the data, they find ways to solve problems. They are changing practice because they are now able to reveal a problem that no one knew was there—until they saw it in the data,” she says.