



APPLICATION QUESTIONS for Cycle 9 (2019-2022)

Facility Demographic Information

Questions in this section focus on the demographic characteristics of your facility and emergency department.

1. Which of the following best describes your facility?

- Non-government, not-for-profit..... 1
- Investor-owned, for-profit..... 2
- State or local government 3
- Federal government/military/VA 4

2. Please indicate which of the following characteristics apply to your hospital/emergency department:

	<u>Yes</u>	<u>No</u>
Academic medical center (hospital aligned with a university)	1	0
Teaching hospital, non-academic affiliated (hospital where students of various disciplines come for their clinical experience).....	1	0
Community hospital in/near a metropolitan area.....	1	0
Rural hospital	1	0
Free standing emergency department	1	0
Non-U.S. hospital	1	0

3. Which of the following best describes your emergency department's patient population?

- *General (both adult and pediatric patients) 1
- *Adult only 2
- ** Pediatric only 3

PLEASE NOTE:

* IF YOU ANSWER "GENERAL" OR "ADULT ONLY," SECTION Q WILL BE SKIPPED IN THE ONLINE APPLICATION

** IF YOU ANSWER "PEDIATRIC ONLY," SECTIONS O & P WILL BE SKIPPED IN THE ONLINE APPLICATION

Do not include identifying information in your responses; See the Lantern Award Handbook for details.



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4. What types of accreditation and recognition does your hospital currently have?

	Yes	No
The Joint Commission	1	0
Healthcare Facilities Accreditation Program (HFAP)	1	0
DNV Healthcare Inc., National Integrated Accreditation for Healthcare Organizations (NIAHO).....	1	0
Magnet status	1	0
Beacon award(s)	1	0
Baldrige award	1	0
Critical Access Hospital certification	1	0
Designated trauma center	1	0
Designated chest pain center	1	0
Designated stroke center	1	0

5. Using a rolling calendar, for the most recent four (4) quarters for which you have data, what was the total number of patient visits to your ED?

_____ patient visits

6. Which of the following best describes how your facility defines the age of a pediatric patient?

- Birth through 12 years of age (< 13 years of age) 1
- Birth through 15 years of age (< 16 years of age) 2
- Birth through 17 years of age (< 18 years of age) 3
- Birth through 21 years of age (< 22 years of age) 4
- Our facility does not have a definition for
pediatric patients 5
- Other 6

Please specify: _____

7. Of the total ED patient visits for the most recent four (4) quarters for which you have data, what was the total number of **pediatric** patient visits?

_____ pediatric patient visits



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8. Using a rolling calendar, for the most recent four (4) quarters for which you have data, how many patient visits did your ED have for the following facility levels?

Note: Facility level refers to the hospital billing code (not physician/professional fees) assigned to each patient visit.

The combined total number of visits for the following categories should not exceed the total number of ED visits to your facility during the same period.

Total Facility Level 1 (CPT 99281 / APC 609) patient visits _____

Total Facility Level 2 (CPT 99282 / APC 613) patient visits _____

Total Facility Level 3 (CPT 99283 / APC 614) patient visits _____

Total Facility Level 4 (CPT 99284 / APC 615) patient visits _____

Total Facility Level 5 (CPT 99285 / APC 616) patient visits _____

Total Facility Level 6 (CPT 99291 / APC 617) patient visits _____

9. Using a rolling calendar, for the most recent four (4) quarters for which you have data, how many **designated treatment spaces** did your ED have? (Do not include overflow treatment spaces such as hall stretchers, chairs, etc.)

_____ designated treatment spaces

10. Using a rolling calendar, for the most recent four (4) quarters for which you have data, on average, how many **overflow treatment spaces** did your ED need daily? (Includes hall stretchers, chairs, etc. utilized during high census)

_____ overflow treatment spaces

11. Using a rolling calendar, for the most recent four (4) quarters for which you have data, what percentage of patients admitted to your hospital **came through the ED**?

_____ %

12. Using a rolling calendar, for the most recent four (4) quarters for which you have data, what percentage of your ED patients were admitted to the hospital?

Note: Include observation patients in the calculation.

_____ %

13. Using a rolling calendar, for the most recent four (4) quarters for which you have data, how many **total licensed inpatient beds** did your hospital have, not including newborn bassinets?

Definition of Licensed Inpatient Beds: The maximum number of beds for which a hospital holds a license to operate. Many hospitals do not operate all of the beds for which they are licensed.

Responses to Questions 13. and 14. should not be the same number

_____ total licensed inpatient beds

Do not include identifying information in your responses; See the Lantern Award Handbook for details.



APPLICATION QUESTIONS for Cycle 9 (2019-2022)

14. Using a rolling calendar, for the most recent four (4) quarters for which you have data, how many **total staffed beds** did your hospital have, not including newborn bassinets?

Definition of Staffed Beds: Beds that are licensed and physically available for which staff is on hand to tend to patients who may occupy the beds. Staffed beds include those that are occupied and those that are not occupied but available for patients.

Responses to Questions 13. and 14. should not be the same number.

_____ total staffed beds

15. Using a rolling calendar, for the most recent four (4) quarters for which you have data, what was the average occupancy rate for your hospital, not including newborns?

_____ %

16. Using a rolling calendar, for the most recent four (4) quarters for which you have data, did your ED track the number of hours that admitted patients boarded in your ED?

Note: Boarding is the practice of holding patients in the emergency department or another temporary location after the decision to admit or transfer has been made. (The Joint Commission)

Yes 1
No 0

[If answered "No," skip to question #18.]

17. Using a rolling calendar, for the most recent four (4) quarters for which you have data, what were the total number of hours that admitted patients boarded in your ED?

18. Which of the following describes who provides nursing care to admitted patients that board in your ED?

Our ED does not have boarders..... 1
ED nurses only..... 2
Non-ED nurses only..... 3
Combination of ED nurses and non-ED nurses 4
Other 5

Please specify: _____

Do not include identifying information in your responses; See the Lantern Award Handbook for details.



APPLICATION QUESTIONS for Cycle 9 (2019-2022)

Leadership – Practice

Questions in this section focus on qualities that foster professional pride, confidence and a community of support for emergency nurses.

A. Professional Practice

A.1 Provide an exemplar from the past two years that describes how shared governance, collaborative decision-making and staff nurse autonomy affect change in nursing practice in your ED **and** your organization. Highlight specific changes in practice or innovative ideas and report measurable outcomes. **[1,000-word limit]**

A.2 How are nursing staff recognized? **[300-word limit]**

A.3 Is the manager/director in the emergency department a registered nurse (RN)?

Note: ED manager/director refers to the individual who oversees the day-to-day operations for the ED and is responsible for the ED nurses.

Yes..... 1
No..... 0

A.4 Does ED leadership report to a nurse at the senior administrative level?

Yes..... 1
No..... 0

A.5 Assign this question to a physician in your ED:

Provide an exemplar from the past two years regarding the collaborative working relationship between nurses and physicians in your ED (examples of initiatives started more than two years ago are acceptable but must still be active). Highlight an innovative event, initiative or program that required collaboration to achieve a goal and include outcomes. **[1,000-word limit]**

A.6 Assign this question to a staff nurse in your ED:

Provide an exemplar from the past two years regarding the collaborative working relationship between nurses and physicians in your ED (examples of initiatives started more than two years ago are acceptable but must still be active). Highlight an innovative event, initiative or program that required collaboration to achieve a goal and include outcomes. **[1,000-word limit]**

Do not include identifying information in your responses; See the Lantern Award Handbook for details.



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B. Emergency Department Staffing

B.1 Using a rolling calendar, for the most recent four (4) quarters for which you have data, what was the total number of **budgeted FTEs** for the ED?

Include RNs as well as other staff in this number. _____ budgeted FTEs

B.2 Using a rolling calendar, for the most recent four (4) quarters for which you have data, what was the total number of **budgeted direct care RN FTEs** for the ED?

Include bedside RNs only in this number. _____ budgeted direct care RN FTEs

B.3 As of the date that you are responding to this question, what is the number of **actual FTEs employed** in your ED for the following personnel?

Note: If any of the following types of personnel are not utilized in your ED, please enter zero ("0").

RNs (Direct Care/Bedside Only)	_____	FTEs
Nurse Practitioners (NP)	_____	FTEs
Clinical Nurse Specialists (CNS)	_____	FTEs
Agency RNs	_____	FTEs
Traveler RNs.....	_____	FTEs
LPNs/LVNs.....	_____	FTEs
EMT/Paramedics.....	_____	FTEs
Aids/Techs.....	_____	FTEs
Care Coordinators.....	_____	FTEs

B.4 Describe how you develop your annual staffing plan for the emergency department including: **[500-word limit]**

1. The individuals involved in developing the plan
2. The factors used to determine annual staffing levels
3. The patterns, trends and outcomes analyzed to evaluate the effectiveness of the staffing plan throughout the year.

B.5 Describe the factors that are considered on a daily basis to distribute and adjust the number of staff working in the emergency department. In addition, include who is involved in making decisions/requests. **[300-word limit]**

B.6 Using a rolling calendar, for the most recent four (4) quarters for which you have data, what was the annual **average** RN vacancy rate in the ED?

Enter an exact percentage; do not enter a range. _____ %

Do not include identifying information in your responses; See the Lantern Award Handbook for details.



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B.7 Using a rolling calendar, for the most recent four (4) quarters for which you have data, how many days did it take, on average, to fill vacant RN positions?

Include all ED positions held by an RN

B.8 Using a rolling calendar, for the most recent four (4) quarters for which you have data, how many individual RNs did you hire in the ED?

Enter the actual number of individuals, not FTEs.

B.9 Using a rolling calendar, for the most recent four (4) quarters for which you have data, how many of your hires were new graduate RNs?

If you had no hires during this period, enter "N/A".

B.10 Using a rolling calendar, for the most recent four (4) quarters for which you have data, how many nurses hired in your ED were referred by current employees?

If you had no hires during this period, enter "N/A".

B.11 Using a rolling calendar, for the most recent four (4) quarters for which you have data, what was your turnover rate (percent) for RNs in your ED?

Note: Turnover rate is calculated as the number of RNs who resigned, retired, expired or were terminated divided by the number of RNs employed during the same period. Do not include per diem (those that float to numerous units), agency, supplemental, and travelers.

_____ %

B.12 Using a rolling calendar, for the most recent four (4) quarters for which you have data, what was your turnover rate (percent) for **controllable resignations** of RNs from your ED?

Note: This turnover rate is calculated as the number of RN controllable resignations (i.e., RN employees that left as a result of an issue or environmental feature or trait that is under the control of the employer) divided by the number of RNs employed during the same period. Do not include per diem (those that float to numerous units), agency, supplemental, and travelers.

_____ %

Do not include identifying information in your responses; See the Lantern Award Handbook for details.



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C. Nurse Satisfaction

C.1 How do you measure nurse satisfaction?

We do not measure nurse satisfaction 1

[If answered "1," skip to question C.3]

External data collection company 2

In-house surveys 3

Other 4

Please specify: _____

C.2 Based on a recent nurse satisfaction survey in your emergency department, describe how your department responded to an area that needed improvement. Include details regarding the specific satisfaction indicator(s) addressed, the improvement plan, and measurable outcomes.

[500-word limit]

Question C.3 must be assigned to a staff nurse in your ED.

The nurse assigned should generally work a different shift and have a different experience level than the nurse assigned to question C.4.

C.3 Staff Nurse #1:

Provide an exemplar from the past two years that highlights factors that contribute to each of the following (examples of initiatives started more than two years ago are acceptable, but must still be active): **[1,000-word limit]**

1. Your professional satisfaction, growth and development
2. Your willingness to stay in your emergency department
3. The impact that you feel you make on safe patient care

Please include the shift you generally work and how long you have been working in your emergency department.

Question C.4 must be assigned to a staff nurse in your ED.

The nurse assigned should generally work a different shift and have a different experience level than the nurse assigned to question C.3.

C.4 Staff Nurse #2:

Provide an exemplar from the past two years that highlights factors that contribute to each of the following (examples of initiatives started more than two years ago are acceptable, but must still be active): **[1,000-word limit]**

1. Your professional satisfaction, growth and development
2. Your willingness to stay in your emergency department
3. The impact that you feel you make on safe patient care

Please include the shift you generally work and how long you have been working in your emergency department.

Do not include identifying information in your responses; See the Lantern Award Handbook for details.

APPLICATION QUESTIONS for Cycle 9 (2019-2022)

D. Healthy Work Environment

D.1 Describe your organization's policy and plan including the emergency department's protocol for addressing **patient and visitor violence** before (prevention), during (mitigation), and after (debriefing, reporting, evaluating, etc.) a workplace violent incident in your emergency department. **[500-word limit]**

D.2 Describe your organization's policy and plan including the emergency department's protocol for addressing **staff/horizontal violence** before (prevention), during (mitigation), and after (debriefing, reporting, evaluating, etc.) a workplace violent incident in your emergency department. **[500-word limit]**

D.3 Describe your organization's policy and plan including the emergency department's protocol for preventing and addressing caregiver (e.g., nurse) work-related injuries (e.g., due to patient handling, slips/trips/falls, needlesticks) in your emergency department. **[500-word limit]**

D.4 Describe your organization's policy and plan including the emergency department's protocol for reducing workplace stress and supporting a healthy lifestyle among caregivers in your emergency department. **[500-word limit]**

D.5 Provide an example with outcomes that highlights your organization's response to one of the following that occurred in your emergency department during the past two years: patient/visitor violence, staff/horizontal violence, workplace physical injuries, or workplace stress. **[500-word limit]**



APPLICATION QUESTIONS for Cycle 9 (2019-2022)

Leadership – Operations

Questions in this section focus on operational improvement activities and development of systems and processes.

E. Throughput – Patient Flow

E.1 Using a rolling calendar, for the most recent four (4) quarters for which you have data, what was the annual percentage of patients who left your ED before they were supposed to leave?

Note: The percentage should include all patients in the following categories:

- Patients who left without being seen (leaving the ED before initiation of the medical screening exam)
- Patients who left before treatment was complete (leaving the ED after the medical screening exam but before the provider documented treatment complete)
- Patients who left against medical advice (leaving after interaction with the ED staff but before the ED encounter officially ended, including completion or refusal to complete document confirming the intent to leave against the recommendation of medical care staff)
- Patients who eloped (elopement is defined as an event where a patient who is cognitively, physically, mentally, emotionally and/or chemically impaired wanders, walks away from, or escapes from the care of the facility unsupervised prior to discharge)
- Patients who eloped who were in police custody or under arrest (refers to individuals who are in police custody, under arrest or incarcerated who are brought to the ED for medical evaluation and escape from the facility)

_____ %

E.2 Explain your process for achieving or improving the rate at which patients leave your ED before they are supposed to leave. Address all patient categories included in Question E.1. **[500-word limit]**

E.3 What is the earliest point at which you record your patients' arrival to the emergency department?

- At sign-in or bedside immediately after the patient enters the ED 1
- During quick registration 2
- At the start of triage 3
- At the end of triage 4
- Other 5

Please specify: _____

Do not include identifying information in your responses; See the Lantern Award Handbook for details.



APPLICATION QUESTIONS for Cycle 9 (2019-2022)

[Hospitals that answered “Pediatric only” to Demographic Question 3 will not be able to view/answer question E.4 in the online application system]

E.4 Using data from Q2, Q3, Q4 of 2017 and Q1 of 2018 (or the most recent four (4) quarters for which you have data), what was the **median time** to pain management for patients with long bone fractures.

****Enter “N/A” if metrics are not tracked****

_____ median time

E.5 Using a rolling calendar, for the most recent four (4) quarters for which you have data, what was the **median** admit decision time to ED departure time for **admitted** patients. ****Enter “N/A” if metrics are not tracked****

_____ median time

E.6 Using a rolling calendar, for the most recent four (4) quarters for which you have data, what was the **average number of minutes** for ED length of stay (from ED arrival time to ED departure time) for **discharged** patients. ****Enter “N/A” if metrics are not tracked****

_____ average # of minutes

E.7 Provide an exemplar from the past two years that demonstrates your facility’s/hospital’s commitment to decreasing the time from decision-to-admit to patient physically in an inpatient bed.

Do not include ED observation patients, Clinical Decision Unit patients, and Clinical Decision Area patients.

[1,000-word limit]

F. Patient Satisfaction

F.1 How do you measure patient satisfaction/experience in the ED?

External data collection company 1

Internal data collection process..... 2

We do not measure patient satisfaction 3

[If answered “3,” skip to question G.1]

Other 4

Please specify: _____

F.2 Based on your last four quarters of patient satisfaction surveys, describe two issues that consistently were identified by your emergency department patients as needing improvement. Include your plan for improvement and outcomes. **[500-word limit]**

Do not include identifying information in your responses; See the Lantern Award Handbook for details.



APPLICATION QUESTIONS for Cycle 9 (2019-2022)

G. Patient Safety

G.1 Based on the information regarding “Never Events” at <http://psnet.ahrq.gov/primer.aspx?primerID=3>, describe one outcomes-based quality improvement initiative from the past two years related to a Never Event. **[300-word limit]**

[Please ensure that you have reviewed the list of Never Events on the AHRQ website via the link above.]

G.2 Describe a medication error that occurred in your emergency department in the past two years and what you did to prevent future occurrences. **[500-word limit]**

G.3 Describe how you support safe patient care, for example, as it relates to mislabeled lab specimens, infusion errors, transfusion errors, etc. **[500-word limit]**

G.4 Describe the hand-off processes and communication techniques that your emergency department uses to enhance patient safety. **[500-word limit]**

G.5 Select one of the following areas and describe the process by which you achieved improved outcomes: pain management, fall prevention, restraint reduction, or a core measure initiative. **[500-word limit]**

H. Emergency Management and Preparedness Planning

H.1 Effective emergency management and preparedness requires the combined strategies of preparation, planning, mitigation and recovery. Explain how your **department and facility** has successfully utilized these strategies and incorporated innovative processes to prepare staff. **[500-word limit]**

H.2 Explain your **facility and community’s** joint training and involvement for emergency management and preparedness. Identify the position(s) responsible for the management and coordination of emergency management and preparedness. **[500-word limit]**

Do not include identifying information in your responses; See the Lantern Award Handbook for details.



APPLICATION QUESTIONS for Cycle 9 (2019-2022)

Education

Questions in this section focus on demonstration of instilling knowledge and competency through quality and accessible education.

I. Education

I.1 Using a rolling calendar, for the most recent four (4) quarters for which you have data, what were the **average number of paid educational hours** for a single RN in your ED (e.g., meetings, classes, mandatory training or other courses)? **Do not include orientation hours.**

Example: In one year, an average RN might attend 12 one-hour staff meetings, 4 hours of annual safety training, 8 hours of annual competency testing, and 8 hours of re-certification (ACLS, etc.), so $12+4+8+8 = 32$ hours.

_____ hours

I.2 Are the following personnel involved in staff education in the emergency department?

	Yes	No
Clinical Nurse Specialist (CNS) (Minimum Masters-prepared)	1	0
ED-Based Clinical Educator	1	0

I.3 Explain your methods/strategies for orienting new emergency nursing staff, including new graduates, nurses without ED experience, and nurses with prior ED experience. **[500-word limit]**

I.4 Explain your methods/strategies for ongoing emergency nursing staff development. **[300-word limit]**

I.5 Explain your methods/strategies for mentoring staff in your emergency department. **[300-word limit]**

I.6 Describe the methods that are used to allow your staff the opportunity to contribute to the practice of emergency nursing and advance knowledge in this specialty. **[300-word limit]**

I.7 Describe how your ED leadership remains current, shares expertise, and/or contributes to the body of knowledge as it relates to emergency nursing practice. **[300-word limit]**

Do not include identifying information in your responses; See the Lantern Award Handbook for details.



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J. Verifications and Memberships

J.1 Which of the following verifications are required in the RN job description?

	Yes	No
ACLS	1	0
PALS	1	0
ENPC.....	1	0
TNCC.....	1	0
GENE	1	0
Other	1	0

Please specify: _____

J.2 What percentage of your ED nurses are current members of a professional nursing association?

_____ %

K. Certifications

K.1 What percentage of RNs in your ED have obtained a Certified Emergency Nurse (CEN) certification?

_____ %

K.2 What percentage of RNs in your ED have obtained a Certified Pediatric Emergency Nurse (CPEN) certification?

_____ %

K.3 What percentage of RNs in your ED have obtained at least one of the following certifications?

- Certified Critical Care Nurse (CCRN)
- Certified Flight Registered Nurse (CFRN)
- Certified Pediatric Nurse (CPN)
- Certified Transport Registered Nurse (CTRN)
- Gerontological Nursing (RN-BC)
- Nurse Executive – Board Certified (NE-BC)
- Nurse Executive, Advanced – Board Certified (NEA-BC)
- Sexual Assault Nurse Examiner-Adult/Adolescent, Board-Certified (SANE-A)
- Sexual Assault Nurse Examiner-Pediatric, Board-Certified (SANE-P)
- Trauma Certified Registered Nurse (TCRN)

_____ %

Do not include identifying information in your responses; See the Lantern Award Handbook for details.



APPLICATION QUESTIONS for Cycle 9 (2019-2022)

L. Nursing Education

L.1 What percentage of RNs in your ED hold the following as their **highest** educational preparation/degree in **nursing**?

Diploma.....	_____	% of RNs
Associate degree.....	_____	% of RNs
Baccalaureate degree	_____	% of RNs
Master's degree	_____	% of RNs
Doctoral degree	_____	% of RNs

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Do not include identifying information in your responses; See the Lantern Award Handbook for details.

APPLICATION QUESTIONS for Cycle 9 (2019-2022)

Advocacy

Questions in this section focus on how the future of the emergency nursing profession and quality patient care are influenced through advocacy and innovation in your emergency department.

M. Advocacy

M.1 Describe how your ED currently promotes advocacy for patient care in one of the following areas. Provide specific details related to the program/initiative, including the target population, outcomes, and any challenges encountered. **[500-word limit]**

Note: Respond to only one of the three areas below.

Please indicate the number you have chosen (1., 2., or 3.) in the beginning of your response.

1. Organizational or community collaborations that result in identifiable and sustained improvements in patient care or services.

OR

2. Community or population-targeted prevention programs that result in identifiable and sustained improvements in patient care or services.

OR

3. Involvement in program development or health care policy research with local, state or national government and/or health care agencies that results in identifiable and sustained improvements in patient care or services.

M.2 Describe how your organization currently promotes the practice of family at the bedside in the ED as defined in the ENA family presence Clinical Practice Guideline (CPG). Include any limitations, supporting policies, and innovative approaches. **[300-word limit]**

Do not include identifying information in your responses; See the Lantern Award Handbook for details.

APPLICATION QUESTIONS for Cycle 9 (2019-2022)

Research/Practice

Questions in this section focus on advancing the emergency nursing profession and practice through quality improvement, evaluation of clinical outcomes and research.

N. Research/Practice

N.1 How does your ED use ENA's book, entitled, "*Emergency Nursing Scope and Standards of Practice*" to appraise, develop, and evaluate the practice and professional development of the ED nursing staff? (*ENA Emergency Nursing Scope and Standards of Practice* is a landmark book that describes the competent level of behavior expected for the nurses practicing in the specialty of emergency nursing. The dynamic nature of the practice environment is explored in the scope of emergency nursing. The book can provide a guide for the practitioner to understand the knowledge, skills, attitudes and judgment that are required for practicing safely in the emergency department setting. This foundational book provides the details of what is expected in this specialty of care and helps other members of the professional team understand the role of the emergency nurse.) [300-word limit]

N.2 Describe 2-3 nursing-sensitive indicators that your emergency department collects and briefly describe your action plans for improvement and outcomes. **For information about nursing-sensitive indicators, see "Table 1. NDNQI Indicators" on this [ANA webpage](#).** [500-word limit]

N.3 [300-word limit]

Note: Respond to only one of the two questions below.

Please indicate the number you have chosen (1. or 2.) in the beginning of your response.

1. Describe how your department utilizes, promotes and translates evidence-based practice and research to **create safe practice and achieve optimal patient outcomes.**

OR

2. Describe how your department utilizes, promotes and translates evidence-based practice and research to **shape the future and specialty of emergency nursing.**

Do not include identifying information in your responses; See the Lantern Award Handbook for details.

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Questions N.4 – N.7 require narrative responses to support four (4) different graphs of quality metrics (from the most recent four quarters for which you have data) that demonstrate exceptional patient care/outcomes.

- Each graph should be limited to one indicator/outcome
- Each graph should highlight a different indicator/outcome
- Highlight quality metrics **OTHER** than those that are part of the core measures covered in sections O, P or Q

Each graph must include all the following:

- name of the indicator measured
- timeframe of the measurement period
- labels for x and y axis
- target/goal
- sample size

N.4 Graph #1: Provide a narrative for the graph that identifies the challenges, accomplishments, and action plan to reach your goal (include the title of the graph in the narrative). **[300-word limit]**

N.5 Graph #2: Provide a narrative for the graph that identifies the challenges, accomplishments, and action plan to reach your goal (include the title of the graph in the narrative). **[300-word limit]**

N.6 Graph #3: Provide a narrative for the graph that identifies the challenges, accomplishments, and action plan to reach your goal (include the title of the graph in the narrative). **[300-word limit]**

N.7 Graph #4: Provide a narrative for the graph that identifies the challenges, accomplishments, and action plan to reach your goal (include the title of the graph in the narrative). **[300-word limit]**

O. Acute Myocardial Infarction (AMI) Core Measure

[Hospitals that answered “Pediatric only” to Demographic Question 3 will not be able to view/answer Section O. in the online application system]

O.1 Using data from Q2, Q3, Q4 of 2017 and Q1 of 2018 (or the most recent four (4) quarters for which you have data), what percentage of emergency department AMI patients or chest pain patients (with Probable Cardiac Chest Pain) without aspirin contraindications received aspirin within 24 hours of ED arrival or prior to admit/transfer? ****Enter “N/A” if metrics are not tracked****

_____ %

O.2 Using a rolling calendar, for the most recent four (4) quarters for which you have data, what was the median time (in minutes) from emergency department arrival to ECG (performed in the ED prior to admit/transfer) for AMI or Chest Pain patients (with Probable Cardiac Chest Pain)? ****Enter “N/A” if metrics are not tracked****

_____ median minutes

Do not include identifying information in your responses; See the Lantern Award Handbook for details.



APPLICATION QUESTIONS for Cycle 9 (2019-2022)

P. Timely and Effective Care Measures

[Hospitals that answered “Pediatric only” to Demographic Question 3 will not be able to view/answer Section P. in the online application system]

P.1 Using data from Q2, Q3, Q4 of 2017 and Q1 of 2018 (or the most recent four (4) quarters for which you have data), what was the **median time** from patient arrival to the ED to the time of diagnostic evaluation by the physician, APRN, or PA (defined as an institutionally credentialed provider)? ****Enter “N/A” if metrics are not tracked****

_____ median time

P.2 Using a rolling calendar, for the most recent four (4) quarters for which you have data, what is the **median time** from ED arrival to ED departure for **admitted** ED patients? ****Enter “N/A” if metrics are not tracked****

_____ median time

P.3 Using a rolling calendar, for the most recent four (4) quarters for which you have data, what **percentage** of patients who came to the emergency department with acute stroke symptoms received interpretation of brain scan (CT or MRI) results within 45 minutes of arrival? ****Enter “N/A” if metrics are not tracked****

_____ %

Q. Pediatric Quality Measures

[Hospitals that answered “General” or “Adult only” to Demographic Question 3 will not be able to view/answer Section Q. in the online application system]

Q.1 Provide a response to **TWO** of the following three questions about pediatric quality indicators.

Note: Respond to **only two** of the three questions below.

1. Using a rolling calendar, for the most recent four (4) quarters for which you have data, what percentage of emergency department patients less than 13 years of age had a current weight documented in kilograms in the ED record (measured weight or estimated weight based on the Broselow tape)?

_____ %

2. Using a rolling calendar, for the most recent four (4) quarters for which you have data, what percentage of emergency department pediatric patients received assessment of pain, treatment for pain, and reassessment of pain?

_____ %

Do not include identifying information in your responses; See the Lantern Award Handbook for details.



APPLICATION QUESTIONS for Cycle 9 (2019-2022)

3. Using a rolling calendar, for the most recent four (4) quarters for which you have data, what was the percentage of admitted pediatric asthma patients who had the first dose of a reliever or systemic corticosteroid dose administered in the emergency department?

_____ %

Q.2 Describe an adverse patient event from the past two years, the process used to evaluate the event, and the impact that the event had on nursing practice in your emergency department. **[300-word limit]**

FOR REFERENCE ONLY - CYCLE 9