

Identification of **N**ursing **S**ensitive **Q**uality Indicators (NSQIs)

K S Nitu

DGM-Nursing
Yashoda Hospital, Hitec



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What is the first word comes in your mind when you hear term Nursing-Sensitive Quality Indicators (NSQIs)?

Introduction to NSQIs

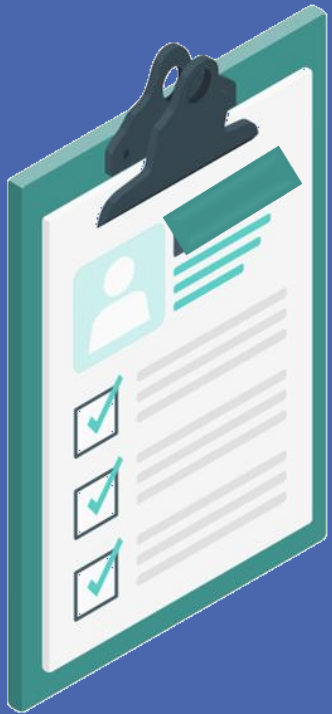
Nursing-sensitive quality indicators reflect the structure, process, and outcomes of nursing care. These indicators focus on elements of patient care that are directly affected by nursing practice.

— *American Nurses Association (ANA) 1996*

Developed by the American Nurses Association (ANA) to evaluate nursing's impact on patient care.

- ☐ NSQIs help track how nursing care influences clinical outcomes, patient safety, and satisfaction.
- ☐ They focus on areas that nurses can directly control or influence, such as preventing falls, infections, and pressure injuries.

Importance of NSQIs



- ✓ Promotes **accountability and transparency** in nursing.
- ✓ Drives **quality improvement** and **evidence-based practice**.
- ✓ Enhances **patient safety** and **clinical outcomes**.
- ✓ Supports data driven **decision making**
- ✓ Drives resource **optimization**
- ✓ Assists in **benchmarking** and identifying best practices.



Which of the following do you think nurses are most responsible for tracking in terms of quality?

Categories of NSQIs

Structure indicators

- **organizational, and resource-related attributes** support the quality nursing care.
- Focus on **nursing workforce capacity**, education, and the **infrastructure**.
- Reflect **readiness to provide care**, not the care itself.



What are the Structure Indicators?

① The [Slido app](#) must be installed on every computer you're presenting from

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Categories of NSQIs

Structure indicators

- **organizational, and resource-related attributes** support the quality nursing care.
- Focus on **nursing workforce capacity**, education, and the **infrastructure**.
- Reflect **readiness to provide care**, not the care itself.

1. Nurse-to-patient ratio
2. Total nursing care hours per patient day
3. Percentage of RNs with specialty certification
4. Skill mix (RN, LPN, Nursing Assistants) Nurse turnover rate
5. RN vacancy rate
6. Availability of clinical resources (e.g., IV pumps, PPE)
7. Number of nursing staff with advanced degrees

Structure

Categories of NSQIs

Process indicators

- measure the **specific nursing activities, assessments, and interventions.**
- Focus on **what nurses do.**
- **Evidence-based nursing standards.**
- Directly **influence patient outcomes.**

1. Timeliness of nursing assessments
2. Adherence to pain assessment
3. Compliance with medication administration rights
4. Documentation of patient education provided
5. Use of care bundles (e.g., for CAUTI, CLABSI)
6. Monitoring and documentation of restraint use

Process

Categories of NSQIs

Outcome indicators

- Measure the **results or impacts** of nursing care.
- Reflect the **effectiveness and quality**
- help evaluate **patient safety, recovery, and satisfaction.**
- Often used for **benchmarking & QIP**

1. Hospital-acquired pressure injuries
2. Patient falls with or without injury
3. HAIs
4. IV infiltration and phlebitis rates
5. Patient satisfaction with nursing care (e.g., HCAHPS scores)
6. Incidence of medication errors or near misses
7. Unplanned extubations

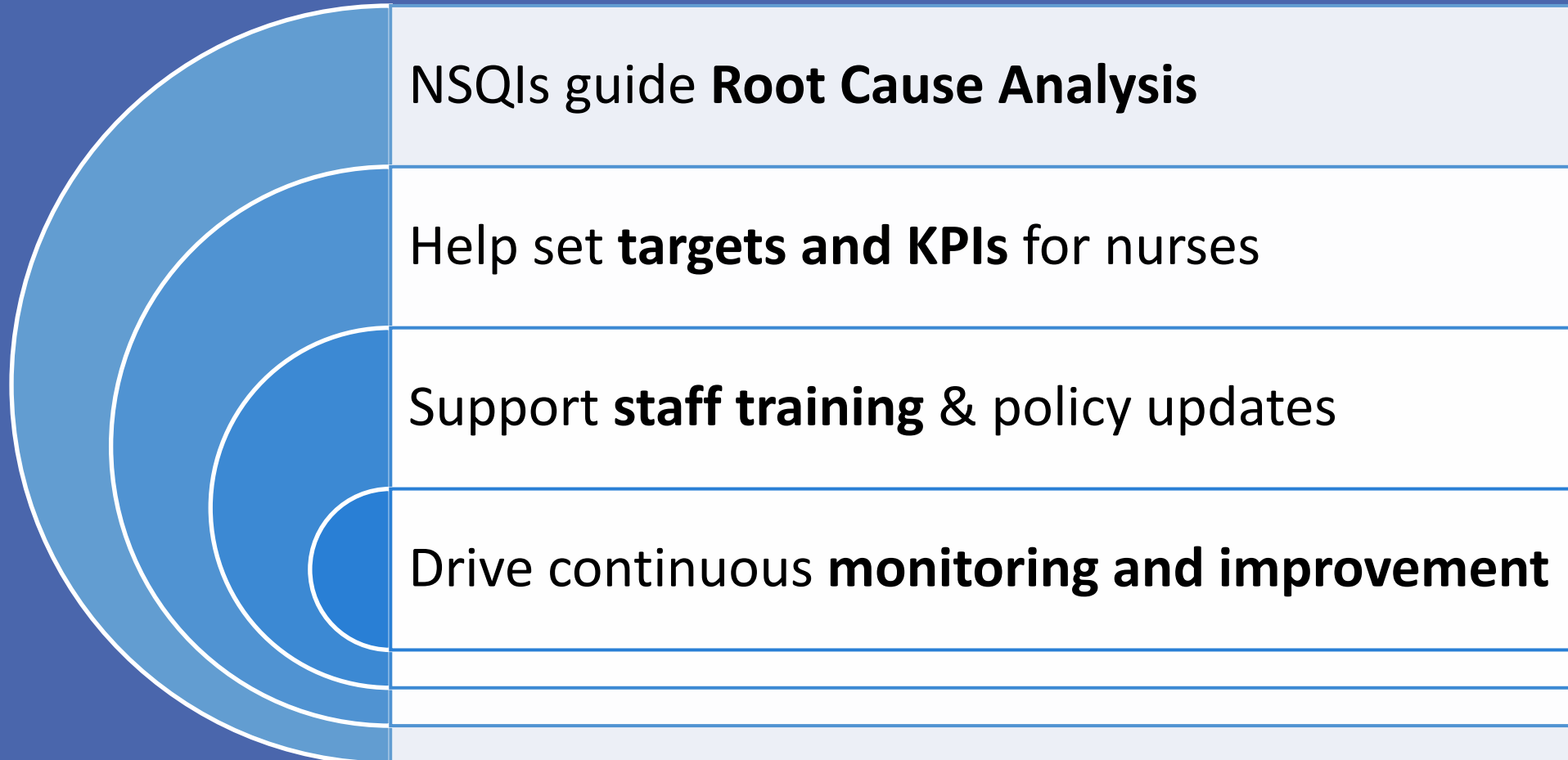
Outcome

Data Collection & Reporting

- ☐ Use of incident reports, audits, EMRs feedback from patients or other stakeholders i.e. doctors, etc.
- ☐ Regular review by Quality Teams/Nursing Committees
- ☐ Benchmarking with NDNQI/NHSN/NHSRC
- ☐ Transparent dashboard tracking



Application in Quality Improvement



Role of Nursing Leaders in NSQIs

Promote a culture of safety and accountability by encouraging incident reporting and quality-focused practices.

Monitor and analyze NSQI data to identify trends, set goals, and guide clinical improvements.

Educate and **empower nursing staff** on NSQIs, best practices, and accurate documentation.

Lead or support quality improvement initiatives, protocol development, and compliance with care standards.

Advocate for necessary resources, including staffing, training, and tools to enhance care delivery.

References

1. ANA established NSQIs in 1996 to measure outcomes most influenced by nursing care.
<https://www.nursingworld.org>
2. National Database of Nursing Quality Indicators (NDNQI) – Press Ganey
Data-driven benchmarking system for tracking NSQIs across hospitals in the U.S.
➤ Focuses on outcomes like falls, pressure ulcers, and nurse staffing.
<https://www.pressganey.com>
3. Joint Commission International (JCI)
International Patient Safety Goals & Quality Indicators
➤ Emphasizes outcome indicators like infection rates, falls, and adverse events—many of which are nursing-sensitive.
<https://www.jointcommissioninternational.org>
4. National Accreditation Board for Hospitals & Healthcare Providers (NABH), India
Nursing care quality and patient safety indicators as part of accreditation standards.
➤ Encourages hospitals to monitor nursing-sensitive metrics like fall rates, pressure injuries, and patient satisfaction.
<https://www.nabh.co>
5. World Health Organization (WHO)
Quality of care framework with a focus on nursing and midwifery roles.
➤ Promotes safe staffing, infection prevention, and care outcomes linked to nursing.
<https://www.who.int>

Conclusions

NSQIs



are essential tools that help measure the impact of nursing care on patient outcomes, safety, and satisfaction. By actively engaging with NSQIs, nurses and leaders can drive continuous quality improvement and deliver safer, evidence-based care.

"You can't improve what you don't measure."

Thank You