

SUPPLEMENTAL MATERIAL

Figure S1. Sample of Monthly Scorecard Received by Nurse Leaders on Nurse Feedback Units

Rank	Unique Identifier	CURRENT MONTH				Previous Month
		Number of Doses Prescribed	Proportion Administered	Proportion missed	Proportion Refused	Proportion Administered
1	Nurse A	50	100%	0.0%	0.0%	100%
2	Nurse B	45	100%	0.0%	0.0%	100%
3	Nurse C	40	100%	0.0%	0.0%	100%
4	Nurse D	35	100%	0.0%	0.0%	94.0%
5	Nurse E	30	100%	0.0%	0.0%	91.0%
6	Nurse F	20	100%	0.0%	0.0%	93.0%
7	Nurse G	20	95.0%	0.0%	5.0%	92.0%
8	Nurse H	50	94.0%	2.0%	4.0%	81.0%
9	Nurse I	40	90.0%	5.0%	5.0%	80.0%
10	Nurse J	25	92.0%	0.0%	8.0%	82.0%
11	Nurse K	25	88.0%	8.0%	4.0%	80.0%
12	Nurse L	20	85.0%	0.0%	15.0%	79.0%
Overall Unit		400	95.3%	1.3%	3.4%	89.0%
Overall Department		3000	89.0%	3.7%	7.3%	88.0%

A monthly scorecard of venous thromboembolism (VTE) prophylaxis administration was given to the nurse leader on each unit participating in the nurse feedback arm. The scorecard reflected individual nurse and unit-level administration practices. Data included the number of doses prescribed and the proportions administered, missed, and refused. Nurses were ranked according to the percentage of doses not administered and performance color-coded based on reaching a 96% goal. We used the 96% goal because leaders of The Johns Hopkins Hospital and the health system established this as the common goal for quality improvement efforts aimed at externally reported core measures. Thus, it was a goal familiar to many frontline staff and unit leaders. Performance on administration is coded green when $\geq 96\%$, yellow when between 90.0%-95.9%, and red when $<90.0\%$. Nursing leaders provided peer coaching to nurses who performed below 96% administration, or in the yellow and red zones.