

UPMC
Nursing

Pathways to Excellence



Message from the Chief Nursing Officer

The ending of a year and the beginning of a new year is a time of reflection and remembrance. Reflection is a great tool for personal and professional growth and development. Christopher Johns, in his book *Becoming a Reflective Practitioner*, says one should "reflect with the intention of learning through our thinking to develop new insight or perceptions of self and to shift the way we view and feel about the world." As professional nurses, we focus more of our energy on others. It is rare when we pause to congratulate our colleagues who repeatedly manage complex patient clinical conditions, perform heroic acts of compassion, and give selflessly their emotional, technical, and intellectual selves.

We need to make more of a conscious effort in recognizing ourselves and colleagues. I recently gave a presentation to a non-patient-care business unit. I wanted to emphasize the aspect of nursing that they hear so little about, so I told a story of a nurse who was side by side with a patient as he approached a life-altering surgery. The story centers around the patient's thoughtful and appreciative description to the nurse of how she helped him face his surgery of which he and his physicians were uncertain of the outcome. There was many a tearful eye in the audience as they began to understand 'the art of nursing.' It is this 'art of nursing' that I want each of us to reflect on, to recognize the impact we make on patients and families, and the powerful stories we have, and should share.

My challenge to you is to share your stories with each other and applaud our colleagues, and ourselves. I can't think of another profession that should be more proud of the influence and outcomes they impact.

Holly Lorenz, RN, MSN
UPMC Chief Nursing Officer

UPMC Response to the Novel A H1N1 Influenza Outbreak

Background

All anyone needs to do these days is turn on the television to learn that the H1N1 influenza is a major health concern in the United States and around the world. The Novel A H1N1 Virus (also called Swine Flu) first surfaced in April 2009. This differs from normal seasonal influenza because it seems to affect younger populations whereas seasonal influenza primarily impacts people over 65. Typically, about 36,000 people die from the seasonal influenza, 90% of these are over 65.¹ In 2009, H1N1 deaths in persons over 65 are about 9% while deaths in the 24 to 59 age group are 41%.

As of the time of this writing, the CDC is reporting widespread outbreaks in 46 states, including Pennsylvania. As of Oct. 2, 2009, PA had documented 4714 confirmed cases of H1N1.² UPMC is experiencing a significant increase in the number of persons with Influenza Like Illness (ILI) coming to the Emergency Departments, outpatient clinics, and physicians' offices. In the month of October, about 173 specimens per day were processed in the Virology Lab at UPMC Presbyterian. Approximately 38% of these specimens were found to be positive for H1N1. Most patients are sent home to recuperate and do quite well.

Since the spring of 2009, UPMC has mounted a response to this emerging health crisis. This effort has included the formation of an H1N1 Flu Task Force comprised of experts from Infection Control, Emergency Medicine, Employee Health, Corporate Communications, Human Resources, OB, Pediatrics, Virology, Operations, and Emergency Management as well as Public Health officials. This group has developed all of the communication and update material found on Infonet at <http://flu.infonet.upmc.com>.

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UPMC Nursing Vision

UPMC Nursing will create the best patient experience, nationally and internationally, through the selection, development, retention, and reward of the highest-performing nurses, while creating systems and programs that create consistency and excellence in patient care.

H1N1 continued

What every UPMC staff member needs to know

The protection of our staff, patients, and visitors is the primary responsibility of every person working in a UPMC facility. There are several critical ways we can each accomplish this:

- Always use proper hand hygiene procedures before and after contact with any patient. Use hand hygiene frequently during the day, even if you do not come into contact with patients.
- If a patient or visitor in your department/area is reporting flu symptoms, have them put on a surgical mask right away. Request that visitors who are showing flu symptoms not visit at that time.
- Use proper cough and sneeze etiquette. Cover your mouth and nose with a tissue when coughing or sneezing, or sneeze or cough into your sleeve.³

One very important way to protect your co-workers and patients is to stay at home if you feel sick. Symptoms of H1N1 include fever (temperature of 100°F [37.8°C] or greater) and one or more of the following symptoms: cough, runny nose, sore throat, body ache, extreme fatigue in the absence of a KNOWN cause other than influenza.

Testing procedures for employees have been established and can also be found on the Infomet Flu site.

The Federal Government has embarked on a massive effort to provide vaccination against the H1N1 virus. These vaccines are being provided free of charge to UPMC employees through Employee Health.

Should the impact of the virus cause significant staffing shortages there may be occasions when staff members are asked to do work not in their normal job description. It is important that we all understand this and be prepared to both assist and be patient with those trying to do jobs they are not accustomed to doing.

It is impossible to determine what the future holds for the H1N1 virus. Unlike seasonal influenza, we know that the virus did not disappear over the summer of 2009. The UPMC H1N1 Task Force continues to monitor the outbreak on a daily basis and will address procedures, guidance, and support where needed. This is a continually evolving situation that will require collaborative effort from all sectors of the organization to accomplish the protection of staff and patients as well as provide positive outcomes for those we treat. ■

System Professional Practice Council Participates in New Care Delivery Model Simulation

On Wednesday, Oct. 7, the System Professional Practice Council (PPC) participated in the first “live” new care delivery model simulation at the UPMC Mercy South Side Outpatient Center. Tami Minnier and her team from CQI2 have been working on piloting a new care delivery model that redefines and reassigns patient care to specific caregivers. PPC members actively participated in a simulation scenario as patients and staff observers for 45 minutes of simulation on a busy medical/surgical floor. Following the simulation process, a debriefing and discussion occurred. Even though this simulation of the new care delivery model is in its infancy, it definitely shows great merit, strive, and determination of the UPMC Nursing force and gives great hope to the nursing process through evidence-based practice. Many PPC members welcomed the opportunity and have shown interest in continuing with the development of this care delivery model. The PPC will assist with the simulation process in the future and serve as an advisory board when needed. ■



Members of the System Professional Practice Council participating in October's simulation scenario.

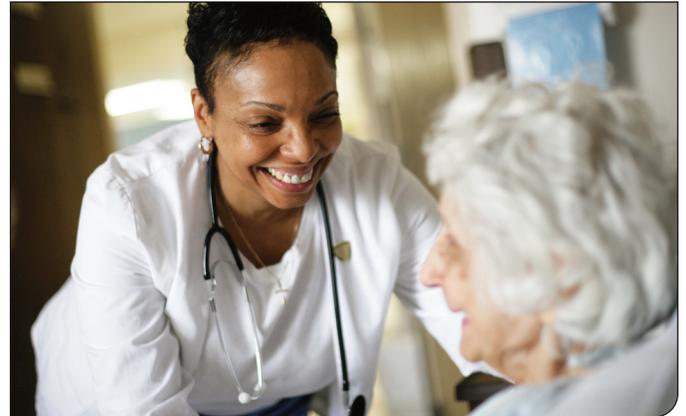
¹ CDC, <http://www.cdc.gov/h1n1flu/qa.htm> (2009)

² PA Department of Health, <http://www.h1n1inpa.com/newsroom/pa-situation-update> (2009)

³ UPMC <http://flu.infonet.upmc.com/StaffInformation.htm> (2009)

Cameos of Caring

On Oct. 17, nurses from across western Pennsylvania gathered in celebration at the 11th Annual Cameos of Caring Awards Gala sponsored by the University of Pittsburgh. Cameos of Caring was created in 1999 at the University of Pittsburgh by former Dean Ellen Rudy, PhD, RN, FAAN. The primary purpose of the celebration is to honor exceptional bedside nurses, as well as nurses in advanced practice and education or leadership roles. Please join us in congratulating the UPMC nurses that achieved this prestigious award and were recognized at the gala.



**UPMC nurses selected as
Cameos of Caring awardees:**

Children's Hospital of Pittsburgh of UPMC
Heather Ambrose

*Istituto Mediterraneo per i Trapianti
e Terapie ad Alta Specializzazione
(ISMETT)*
Oriana DiCara

Magee-Womens Hospital of UPMC
Janet McFarland

*University of Pittsburgh Physicians
Department of Anesthesiology*
Maureen Tannous

UPMC Bedford Memorial
Tammy Lemin

UPMC Braddock
Matthew Botti

UPMC Cancer Centers
Amy Korinko

UPMC Horizon
Donna Carl

UPMC McKeesport
Sharon Carfang

UPMC Mercy
Patti Mikosky

UPMC Northwest
Jennifer Cain

UPMC Passavant
Darlene Hills

UPMC Presbyterian
Michelle Harris

UPMC St. Margaret
Kathleen Duggan

*UPMC Senior Communities,
Heritage Place*
Leslie Hamilton

UPMC Shadyside
Kimberly Sue Pringle

*Western Psychiatric Institute and Clinic
of UPMC*
Suzanne Kane

**UPMC nurses selected as
Advanced Practice awardees:**

*University of Pittsburgh Physicians
Department of Anesthesiology*
Mitchell Oblak

UPMC Cancer Centers
Diane Gardner

UPMC Presbyterian
Darlene Averell Lovasik

UPMC St. Margaret
Traci Fick

**UPMC nurse selected as
Donate Life awardee:**

Children's Hospital of Pittsburgh of UPMC
Kathleen Plansinis

**UPMC nurses selected as
Nurse Educators awardees:**

Mercy Hospital School of Nursing
Marilyn Schuler

UPMC St. Margaret School of Nursing
Deborah Yoder Lewis

UPMC Shadyside School of Nursing
Amy Stoker

**UPMC recipients of the
Endowed Nursing Scholarship:**

Magee-Womens Hospital of UPMC
Terri Bailey, Mary Kish, Jill Radtke

UPMC Cancer Centers
Marsena Pelton

UPMC Corporate Services
Lisa Painter

UPMC Presbyterian
Heather Halle, Lissa Lansdale,
Julie Muckle, Kristine Keefer Wolf

UPMC St. Margaret
Caroline Kamau

UPMC Shadyside
Suzanne Browell, Resheda House,
James Sauter Jr.

The Beckwith Innovation Award for 2009-2010

The Beckwith Innovation Award Fund was established by the Beckwith Institute and the Audrey Hillman Fisher Foundation to advocate and encourage clinical leaders to discover through innovation best practices that advance the quality of health care and to recognize those who make a positive contribution to patient care. The 2009 areas of focus included research, pilots, and new programs that support innovation and excellence within the following four categories:

- *nurse retention*
- *evidence-based practice within a targeted clinical quality improvement area*
- *improving health care quality through models of care delivery*
- *healthy workforce*

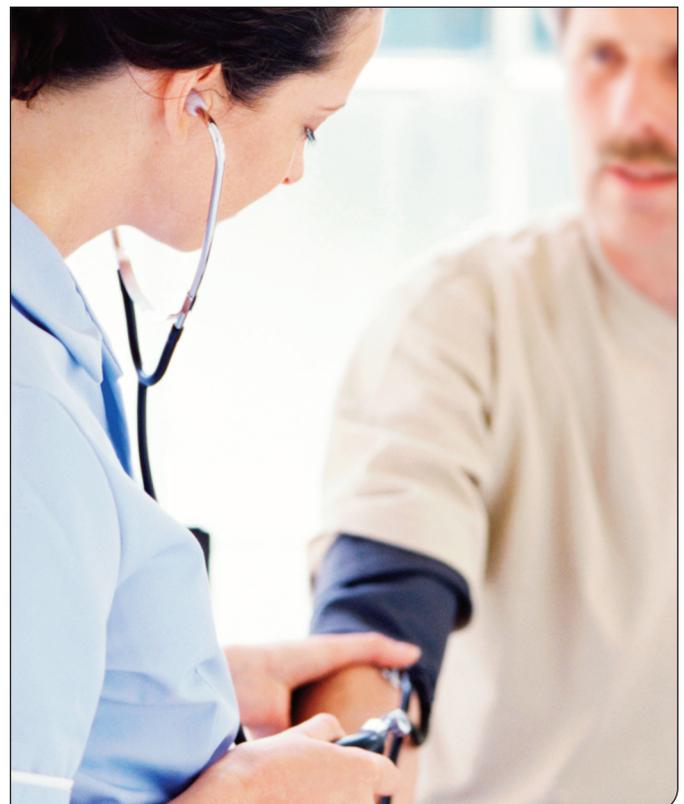
Here are this year's award recipients and a summary of the winning entries:

Chelsey Runski, BSN, RN, professional staff nurse, Children's Hospital of Pittsburgh of UPMC *iPatient: Patient Admission and Treatment Information and Experience Network Tool* – Creation of a multimedia, web-based tool designed for patients and families to help with the transition into the Pediatric Intensive Care Unit (PICU). Links that contain educational materials on important topics help make the stay at Children's Hospital as comfortable as possible. The information provided will cover topics such as:

- *PICU consents (blood products, central line placement, emergent intubation)*
- *Ventilators: helping families become accustomed to what they sound like, look like, and why they are used.*
- *different alarms and the process of the nurse call system*
- *the patient care team*

Other links will go directly to patient satisfaction surveys. To make it as easy as possible for patients and families, photographs could be provided of the doctors for the family or patient to click on to fill out the survey. For more information email chelsey.runski@chp.edu.

Eileen Roach, MSN, RN, CCRN, CNRN, advance practice nurse - Critical Care, UPMC Presbyterian, *Screening for Post Traumatic Stress Disorder (PTSD) in the Trauma Patient* - Early detection and intervention for patients at risk for developing PTSD is of utmost importance. Early, evidence-based interventions in the high-risk trauma population may not only prevent the adverse effects but may also hasten physical injury and emotional recovery following traumatic injury. Recovery from long-term disability is hastened when PTSD is detected and treated early. A current review of the literature revealed that no level one trauma center in the United States is currently screening the civilian trauma population for PTSD. Since Jan. 2009, the UPMC Presbyterian Outpatient Trauma Clinic began screening patients for PTSD symptoms approximately two weeks following discharge from the hospital after their traumatic injury. From Jan. to June 2009, the trauma clinic has screened 477 patients. Of these patients, 21 percent have had a positive PTSD screen where a psychiatric referral was recommended, and 89 percent of patients accepted this referral. One of the current challenges related to this project is the organization and maintenance of the growing electronic database. This database currently contains over 600 patients with multiple elements of data that have not yet been analyzed. This grant will be used for data mining the electronic database to identify best practices. For more information email roache@upmc.edu. ■



UPMC Shadyside School of Nursing is Awarded The National League for Nursing's Designation as a Center of Excellence

In 2004, the National League for Nursing (NLN) established the Center of Excellence program to recognize nursing schools that have achieved a level of excellence in one of three areas:

- *creating environments that enhance student learning and professional development*
- *promoting the pedagogical expertise of faculty*
- *advancing the science of nursing education*

“The faculty of the UPMC Shadyside School of Nursing strives to teach its students to use critical thinking, problem-solving, and communication and adapt to the health care demands for the future,” said Linda Kmetz, PhD, RN, director UPMC Shadyside School of Nursing. “It is an honor to be nationally recognized for our dedication to student success and satisfaction,” said Dr. Kmetz.

The prestigious designation was given at the NLN's annual Education Summit in Philadelphia on Sept. 25. The School was recognized for its innovation, commitment to quality in safety education, and its collaboration among faculty, student, and clinical partners. “Our involvement in national initiatives with TCAB and QSEN reflect the faculty's collective vision of preparing a safe and reliable graduate who can assimilate into practice with relative ease.”

This year, only five schools were recognized by the NLN as a Center of Excellence. The UPMC Shadyside School of Nursing is the second diploma program in the nation to receive this designation. The school will carry the Center of Excellence designation for three years, at which point it may apply for continued designation. “Work is already underway for a second designation: Advancing the Science of Nursing Education” according to Dr. Kmetz. ■

UPMC Shadyside Unit Receives the Beacon Award

In March 2009, the Surgical Intensive Care Unit (SICU) at UPMC Shadyside submitted the Beacon document to the American Association of Critical Care Nurses (AACN). The Beacon Award is a prestigious award given to ICUs that exhibit excellence in critical care nursing. There are an estimated 6,000 ICUs in the United States. The AACN has given the Beacon Award to only 186 pediatric and adult critical care units since the award's inception in 2003. The AACN is the largest specialty nursing organization in the world, representing more than 400,000 nurses who work with critically ill patients.

The journey to the Beacon Award was a team effort. The Beacon Writing Team of the SICU, consisted of 10 members. Led by unit director Sharon McEwen, nurses Deborah Panos, Lynn Driscoll, Emily Mialki, Julie Seifert, Tim Herzer, Bridgett Bothell, Nicole Karpinski, Rachel Nechyba, and Toby Nalepka worked cohesively to produce a superb document.

The Beacon document is compiled by answering a series of questions created by the AACN. The Beacon Writing Team spent countless hours, for 15 months, writing the stories of the SICU and answering the questions in a detailed, narrative manner. It was a process that required dedication, commitment, and strong efforts by the team to expel the ideas, stories, and examples of excellence that are prevalent in the SICU. It was the duty of the Beacon Writing Team to make the SICU culture public and to exhibit, through the document, the high standards of nursing care that exists within the unit. The categories measured are recruitment and retention, education training and mentoring, research and evidence-based practice, patient outcomes, leadership and organizational ethics, and a healing environment.

In June of 2009, the SICU beamed with pride when it was designated a Beacon unit. Excellence in care in the SICU is evident in the staff and the unit's patient outcomes. National recognition was awarded through a national press release from the AACN. The SICU is very proud of this national, prestigious designation. ■

Savings Plan Participation

Did you know that approximately 78 percent of UPMC nurses are saving in the UPMC Savings Plan? 78 percent is good, but it can be even better. Another way of looking at this is that 22 percent of our nurses may not be saving for their retirement and are missing out on the match that UPMC offers.

Does it matter?

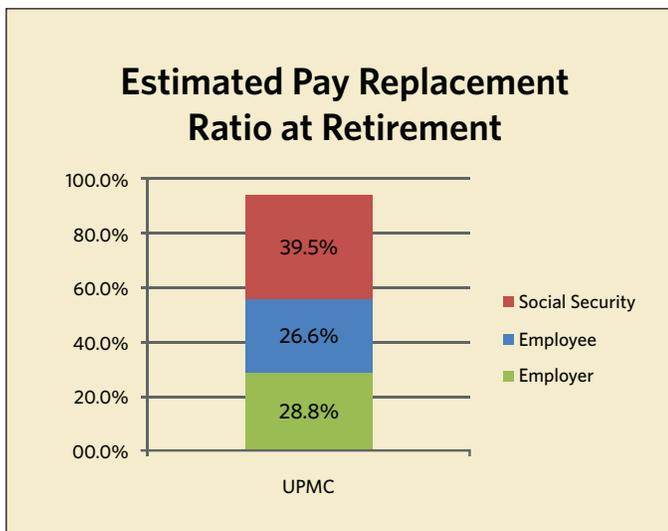
Yes, for three reasons:

1. If you are part of the 22 percent, this is the equivalent of turning down free money. Money that UPMC provides to you to save.
2. If you are part of the 22 percent, you are missing a key leg in the three-legged stool concept (Social Security, personal savings, and employer retirement plans).
3. Starting early is the key to success. The longer you wait, the less you will have in retirement.

If you are not already saving, start NOW, regardless of your age.

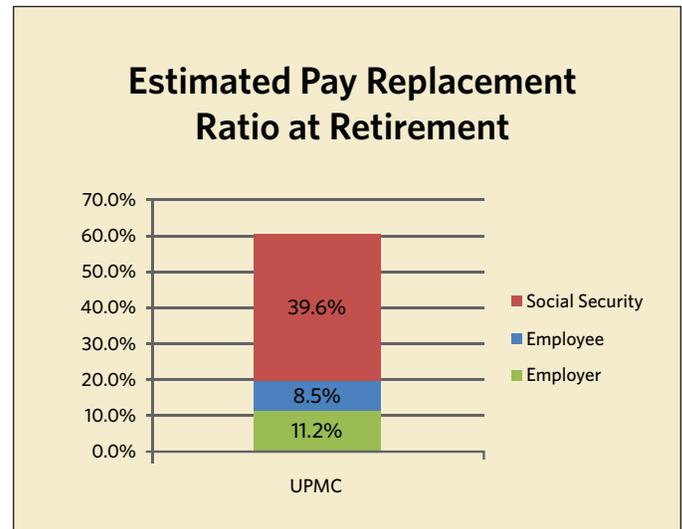
Take a look at the following examples: In both examples, the employee makes \$20.50 per hour and saves at a rate of 4 percent or \$65.60 per pay and is in the Urban Design.¹ Most financial planners now say that you will need to replace between 70%-80% of your pay to live comfortably during retirement.

Example 1: Employee starts saving at Age 35



UPMC Plan Account Value at age 65 = \$596,294

Example 2: Employee starts saving at Age 50



Employee contributions = \$31,722
UPMC Account Value at age 65 = \$136,132

As you can see, a delay of 15 years can make a huge difference in the monies available during retirement.

It is never too early to start planning for your future. Imagining your life after work can be exciting. Will you spend time with family and friends? Will you travel? Will you volunteer more? Will you turn your hobby into a small business?

You'll need more than a vivid imagination to prepare for your future. The choices you make today will affect the way you live your life in retirement. So take a few minutes to review your situation and learn how easy it is to start planning for your future.

To help you make your key financial decisions, UPMC's retirement benefits web site—Your Benefits Resources™—provides easy-to-use financial modeling tools to help you answer the question: Will I have enough to retire? Log on to My HUB, click on the Human Resources tab, then click on My Retirement under My Benefits to learn more.

Save, diversify, and plan for your future. Now is the time to act! ■

¹ The Urban Design provides a 1% higher Match and 1% lower Cash Balance credit. In terms of value it is equivalent to the Community Design.

UPMC's Commitment to Cultural Competency

Inclusion begins with a core belief that everyone deserves dignity and respect. Promoting inclusion in patient and family care involves cultural competency. The heart of cultural competency is understanding differences of generation, physical ability, gender, ethnicity, race, sexual orientation, religion, social and economic background, and even ideas.

In June of 2009, the Center for Inclusion in Health Care in collaboration with the Office of Pastoral Care and UPMC Presbyterian Patient and Family Support Services, created the Interfaith Pocket Brochure for Staff in an effort to ensure cultural competency related to common faith traditions. The brochure provides a brief overview of religious backgrounds and related information, to assist staff in better understanding and meeting the diverse needs of our patients and their families.

The first of a series of inclusion awareness resources that the Center for Inclusion in Health Care will offer, the Interfaith Pocket Brochure for Staff is available on Infonet at <http://inclusion.infonet.upmc.com>, where an expanded listing of faiths can also be found. We encourage you to visit the site for more information on how to order the Interfaith Pocket Brochure for Staff or to print a downloadable version.

Whether patients are strong in a religious tradition or have no religious beliefs, it is important to recognize that all patients deserve dignity and respect. Ensuring that employees have the tools and resources they need to be culturally competent and treat people the way they want to be treated is a step toward creating an environment of inclusion. ■

I SPY: Recognizing Nursing Colleagues Across UPMC

UPMC St. Margaret was recognized at the 2009 ANCC Annual Magnet Conference in Kentucky for achieving Magnet designation.

Magee-Womens Hospital of UPMC received The Hospital and Health System Association of Pennsylvania (HAP) 2009 Achievement Award for Honoring Excellence and Innovation in Health Care in Patient Safety for *Labor Induction Process Improvement: A Patient Quality of Care Initiative* **Kerri Brooks**, RN, MSN; **Susan Pedaline**, RN, BSN, MS; **Jeannine Konzier**, BSN, M.Ed; and **Maribeth McLaughlin**, RN, BSN, MPM.

Jeff Alvarez, RN, MSN, is the newly elected president of Sigma Theta Tau - Eta Epsilon chapter - Carlow University.

Cathy Campese, RN, CRNP; **Tracy Pasek**, RN, MSN, CCRN, CIMI; and **Erin Wright**, RN, Children's Hospital of Pittsburgh, are contributing authors to *Core Curriculum for Pediatric Emergency Nursing 2nd Edition* - Pain Assessment and Management Chapter

Lisa Donahue, DrNP, RN, UPMC Shadyside, published "A Pod Design for Nursing Assignments" in the November issue of AJN, American Journal of Nursing

Pamela Donovan RN, MSN, UPMC St. Margaret, was elected to the 2010 SWPONL board of directors.

Betsy George, RN, PhD, and **Fred Tastota**, RN, MSN, received a grant for \$1,000 from The Greater Pittsburgh Nursing Research Conference.

continued >>

Ohio University BSN Program

A RN to BSN online option is now available at Ohio University for a preferred tuition rate. To start, you can complete an application on the website, www.OhioUOnlineBSN.info. If you have any questions regarding the program or application process, please call 1-888-806-8081 using the UPMC code AP5011 or contact **Renee Thompson** at 412-647-7917.

Save the Date

Nurses Week Celebration 2010
April 28, 29, & 30, 2010

Herberman Conference Center, UPMC Shadyside

This year, the System Professional Practice Council will be holding a scrub drive in collaboration with Dress for Success Pittsburgh. For every set of scrubs you donate, you'll receive a free Chinese auction ticket. Start collecting your scrubs and nursing outfits. All colors and sizes are appreciated.

Continuous Learning

Becoming a Reflective Practitioner

C. Johns, Blackwell Publishing, 2004

American Association of Critical Care Nursing Beacon Award:

www.aacn.org/WD/BeaconApps/Content/about.pcms?menu=BeaconApps&lastmenu=divHeader_Program_Overview

American Nurse Association:

www.nursingworld.org

Baldwin, David and Grayson, Curt. (2004). **Influence - Gaining commitment, getting result.** Greensboro, NC: Center for Creative Leadership.

De Leon Slantz, M.L. (2008). **Leading change in diversity and cultural competence.** *Journal of Professional Nursing* 24(3).

H1N1: <http://flu.infonet.upmc.com/Prevention.htm>

National League of Nursing- Center of Excellence:

www.nln.org/excellence/roles.htm

ISPY continued

Jeffrey Hodges, RN, MHS, was promoted to director, Critical Care & Emergency Services, Magee-Womens Hospital of UPMC.

Susan Hoolahan MSN, RN, NEA-BC and **Jackie Stogoski**, MSN, RN, UPMC Shadyside, poster abstract *A Community Hospital's Journey to Excellence* took first place at the 2009 SWPONL annual conference.

Barbara Jordan, MSN, CCRN, NEA-BC, UPMC St. Margaret, was promoted to Chief Nursing Officer, UPMC Northwest.

Deborah Lesniak, RN, MS, Children's Hospital of Pittsburgh, is a contributing author to *Core Curriculum for Pediatric Emergency Nursing 2nd Edition* - Ethical and Legal Issues Chapter

Nancy J. Mayer, MBA, BSN, RN, UPMC St. Margaret, published *Transporting Telemetry Patients: An algorithm enables safe patient transport without an RN or monitoring* in the November 2009 issue of *AJN*, American Journal of Nursing

Kathleen Schenkel, RN, MSN, Children's Hospital of Pittsburgh, is a contributing author to *Core Curriculum for Pediatric Emergency Nursing 2nd Edition* - Thoracic Trauma

Deb Struth, MSN, RN, UPMC Shadyside, published "TCAB in the Curriculum: Creating a Safer Environment through Nursing Education" in November 2009 issue of *AJN*, American Journal of Nursing

Andy Thomas, RN and **Toni Morrison**, RN, UPMC Shadyside, presented "The Smart Room Webinar" in October for AONE.

Paula Thomas, RN, DNP, UPMC Bedford, received a grant for \$50,000 from Hospital Quality Care Investment Grant Program.

Renee Thompson, MSN, RN, CMSRN, successfully completed her Medical Surgical Certification exam.

Shelley Watters, DNP, RN, was podium presenter of "Shared Leadership: Taking Flight" at the 2009 Biannual Sigma Theta Tau National Conference. ■

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