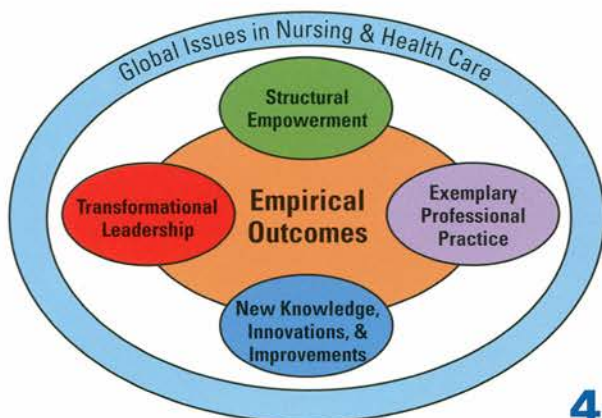


magnetattractions

How We Attract and Retain the Best



'A Friend of Nursing'



4



inside this issue

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Remembering Peggy Fleming—Her passion for nursing mirrored her love of animals and gardening. Learn more on page 6 about this woman who supported nursing programs and raised fancy chickens.

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2008 U.S. News & World Report

our magnet story

Magnet hospitals are so named because of their ability to attract and retain the best professional nurses. *Magnet Attractions* profiles our story at Lehigh Valley Hospital and Health Network and shows how our clinical staff truly magnifies excellence.

The 'Smart Chair'

When colleagues come to me to talk through a challenging situation, I tell them to sit in the “smart chair”—the beautiful wooden chair that signifies our Endowed Chair of Nursing. For seven years it has helped many people find wisdom, including myself.

Lately, I find myself thinking a lot about the couple responsible for the chair: Dick and Peggy Fleming. Peggy passed away in June. (Read about her legacy and nurses’ tributes to her on page 4.) In 2001, Dick surprised Peggy when he announced they were establishing a \$1.5 million chair in her honor to support nursing research and education. What a beautiful gift, for Peggy and for us. Shortly thereafter, I was named the holder of the chair. It’s an honor that continues to humble me today.

That chair represents so much: the value we place on our nurses, our drive toward constant improvement and the support we receive from our community. Its impact is evident throughout the pages of this issue of *Magnet Attractions*, from the research involving emergency department triage nurses (page 8) to the lists of presentations and published articles (page 10).

The Flemings also helped establish our Friends of Nursing program. If you’ve attended a regional or national conference, had your research supported, donated your time to a medical mission or experienced the annual Friends of Nursing Celebration, you’ve felt the impact of their generosity.

The Friends of Nursing Celebration was one of Peggy’s favorite events. I remember a year when she attended just days after she suffered a concussion in a serious accident. Her doctor advised she make it a short night. Not Peggy. She thoroughly enjoyed meeting and talking with nurses—one of the reasons her annual luncheon at her farm lasted all afternoon. Her company was worth every minute.

The Flemings thought so highly of nursing, which is evident in all of their actions. What a compliment to be the health network to benefit from their kindness. In memory of Peggy and the generosity she and Dick have graciously shown us, we will hang a framed photograph of Peggy outside the patient care services administration offices in the John and Dorothy Morgan Cancer Center (suite 408). It’s a photograph of Peggy sitting in the “smart chair.”

As you walk by, think of the wise woman and her husband who embraced nursing so passionately they left a legacy with an endowed chair that will help make us all smarter.

Terry Ann Capuano

Terry A. Capuano, R.N., M.S.N., M.B.A., F.A.C.H.E., N.E.-B.C.
Senior Vice President, Clinical Services



“The Flemings thought so highly of nursing... what a compliment to be the health network to benefit from their kindness.”



New Vision for Magnet

The new Magnet Model streamlines our practice with an emphasis on outcomes



Since initiation of the Magnet Recognition Program in 1994, the 14 Forces of Magnetism have been a guiding light for Magnet organizations, reminders of what creates the ideal practice environment and how to take our practices to higher levels—all proven through research. Yet as health care evolves, so does our guiding light. Recently the American Nurses Credentialing Center introduced a new model for the Magnet Recognition Program. "The new model configures the 14 Forces of Magnetism into five model components," says Kim Hitchings, R.N., manager of the Center for Professional Excellence. "This new model is designed to provide a framework for nursing practice and research in the future." It serves as a road map to the ideal practice environment, and thus, optimum patient outcomes. Learn more about the five new model components and how they apply to our everyday practice.

Transformational Leadership

Forces: Quality of Nursing Leadership, Management Style

In summary: It is relatively easy to lead people where they want to go; a transformational leader must lead people to where they need to be in order to meet the demands of the future. This requires vision, influence, clinical knowledge and strong expertise relating to professional nursing practice.

In practice: For years, regional medical-surgical nurses traveled to the Delaware Valley for regional Academy of Medical-Surgical Nurses (AMSIN) meetings. Now nurses don't have so far to go. A group of our nurses—Tracie Heckman, R.N., April Gheller, R.N., Denise Pisciotto, R.N., and Deb Peter, R.N.—recently formed the Greater Lehigh Valley chapter of AMSIN. "This group was a long time coming," Peter says. "Medical-surgical nurses are one of the largest groups of nurses in the network." The group, which also includes nurses from other area health organizations, will offer continuing education opportunities and focus on recognizing medical-surgical nursing as a specialty that it is.

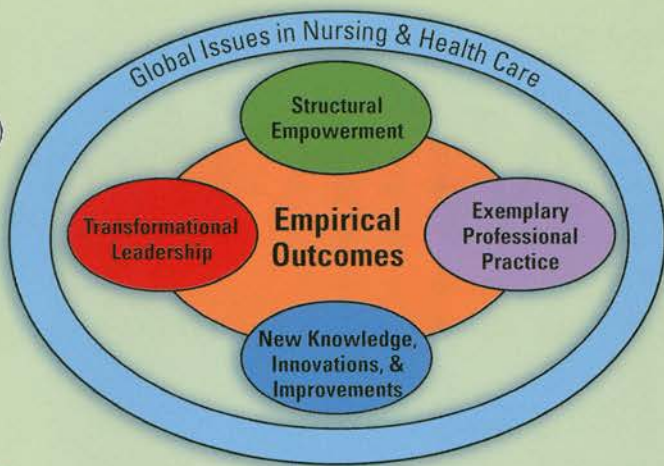
Structural Empowerment

Forces: Organizational Structure, Personnel Policies and Programs, Community and the Health Care Organization, Image of Nursing, Professional Development

In summary: Solid structures and processes developed by influential leadership provide an innovative environment where strong professional practice flourishes and where the mission, vision and value come to life. Further strengthening practice are the strong relationships and partnerships developed among all types of community organizations to improve patient outcomes and the health of the community.

In practice: When **Cameron Clapp** (right) lost his right arm and both legs after being struck by a train seven years ago, he was told he'd never walk again. He defied the odds. He now runs marathons and is an avid golfer. Clapp was a guest of honor during the recent Lehigh Valley Hospital Amputee Support Group Golf Tournament, organized by **Kim Bartman, R.N.** (left), one of the support group's founders. The event raised more than \$13,000 to purchase adaptive devices for daily living and send members who serve as peer visitors to a national conference.





New Magnet Model—Overarching the new Magnet Model Components is an acknowledgment of global issues in nursing and health care. While not technically a component, this category represents the various factors facing nursing and health care today.

New Knowledge, Innovation and Improvements

Force: Quality Improvement

In summary: Magnet organizations contribute to patient care, the organization and the profession in terms of new knowledge, innovations and improvements. Current systems and practices are redesigned and redefined to be successful in the future.

In practice: Hospitals across the country—and the globe—often consult us to learn how to improve practices. Recently colleagues from Mission Hospital in Mission Viejo, Calif., visited us to learn what makes us a Magnet hospital. Mission Hospital colleagues are on their journey toward Magnet designation. During a tour of 5K, Debra Peter, R.N., shared the unit's professional practice model, patient lifts, medication drawers and more.

Empirical Quality Results

Force: Quality of Care

In summary: Magnet hospitals are in a position to become pioneers of the future and to demonstrate solutions to numerous problems in health care. Through innovative structure and processes, they answer the question, "What difference have you made by demonstrating empirical quality outcomes?"

In practice: Emergency department colleagues at LVH-Cedar Crest are researching what experience and characteristics are necessary for triage nurses. Learn more on page 8.

Exemplary Professional Practice

Forces: Professional Models of Care, Consultation and Resources, Autonomy, Nurses as Teachers, Interdisciplinary Relationships

In summary: The true essence of a Magnet organization stems from exemplary professional practice within nursing. This entails a comprehensive understanding of the role of nursing, the application of that role with patients, families, communities and the interdisciplinary team, and the application of new knowledge and evidence.

In practice: Our 400 physician assistants, nurse practitioners, nurse anesthetists, nurse midwives and psychologists recently formed the Advanced Practice Clinicians group to support, advocate, promote, facilitate and integrate their professional interests. Newly elected executive council members include (from left): first row, **Paul Evans, C.R.N.A.**, and **Jim Miller, C.R.N.A.**; second row, **Eugenia Pearson, C.R.N.P.**, and **Lauren Jacobsen, C.R.N.P.**; third row, **Wendy Prutsman, C.R.N.P.**, **Michelle Hartzell, P.A.-C.**, and **Brian Damweber, P.A.-C.**; fourth row, **Susan Kunsman, C.R.N.A.**, and **Angela Pistoria, P.A.-C.**


Sally Gilotti



REMEMBERING

A Friend of Nursing

Peggy Fleming left an indelible mark on our nurses and profession



Peggy Fleming could only cover her face in disbelief when her husband Dick announced they were establishing a \$1.5 million endowed chair in Peggy's honor to support nursing education and research. "That's our gift to Lehigh Valley Hospital—and that's my gift to you, Peggy, my sweetheart, my wife and my best friend," Dick said to her. It was the first endowment of its kind in the nation at a non-university hospital.

Peggy passed away in June at age 86, and left behind her indelible mark on a profession she loved and admired. Peggy was not a nurse, but she possessed the attributes of one as she cared for her family, farm animals and gardens. She was kind-hearted and compassionate, yet strong-willed and determined.

In addition to sponsoring a series of endowment programs to support cancer care, pain management, hospice programs, trauma services, and research and technology for the disabled, the Flemings helped found the Friends of Nursing program 21 years ago. Peggy was very involved, especially in the Friends of Nursing awards program, participating in interviews and holding an annual luncheon for recipients at her farm.

At Peggy's memorial service, her close friend, Kim Hitchings, R.N., manager of the Center for Professional Excellence, read "The Nightingale Tribute." Although the tribute was designed by the Kansas State Nurses Association to recognize a nurse's service to her profession, Hitchings felt it was appropriate for Peggy. White roses, symbolizing love and care, were presented by nursing colleagues and personal friends as memories of Peggy were read. Here is an excerpt from Peggy's tribute:



When a calming, quiet presence was all that was needed, Peggy was there.

Lois Guerra, R.N., 5B director, remembers a luncheon on Peggy's farm.

"We had a wonderful luncheon served on Peggy's finest china. She gave each of us a little china gift, which I still have on my dresser. She showed us her beautiful flower garden and productive vegetable garden. Of course, we all went home with something. I remember that wonderful afternoon like it was yesterday."

When a silent glance could uplift a family member or friend, Peggy was there.

Molly Sebastian, R.N., vice president of patient care services, describes her first introduction to Peggy when she was a very nervous Friends of Nursing Award nominee.

"Peggy was part of the interview panel. I found her to be sweet. She made me feel comfortable at once. I wondered who this petite, quiet lady was. I knew her husband to be a powerful, dynamic, generous businessman. In future years, I would sit on Friends of Nursing panels with Peggy. As I got to know her, it became apparent that she was a powerful, dynamic and very generous woman!"

To witness humanity—its beauty, in good times and bad, without judgment, Peggy was there.

Sue O'Neil, R.N., trauma neuro intensive care unit patient care specialist, remembers the unveiling ceremony for the Peggy Fleming Endowed Chair in Nursing.

"Dick spoke of how Peggy always admired nurses and how he felt Peggy exhibited the attributes of a nurse. As Peggy sat in that chair, she looked so happy and content. If I could have one wish, it would be to touch so many nurses as Peggy did with her generosity."

To embrace the woes of the world willingly and offer hope, Peggy was there.

Amy Wisniewski, R.N., telemedicine coordinator, recalls what happened when she needed to find a good home for one of her chickens.

"Peggy wanted it. She came to my home, easily handled the chicken and told me she had a coop just for it with heat and light. She obviously cared about everyone's feelings—even that of a little chicken. I'm sure God has a special place for a woman who would go to so much trouble for a little chicken."

Rick Martuscelli

Always with a smile—(clockwise from top left) Peggy and Dick Fleming with president and Chief Executive Officer Elliot Sussman, M.D., and senior vice president of clinical services Terry Capuano, R.N.; the Flemings; Peggy visiting a patient care unit; Peggy with nurses at the

Nursing Endowed Chair Dedication; Peggy with Kim Hitchings, R.N., manager, Center of Professional Excellence, during a Friends of Nursing interview.

QUALITIES OF A TRIAGE NURSE

Staff members conduct study to identify characteristics necessary for the job

RESEARCH PROJECT:

The relationship between emergency department (ED) triage accuracy and triage nurses' experience and attitude.

Background: Triage nurses are the first to see ED patients. After an initial examination, the nurse assigns patients an emergency severity index (ESI) score, ranging from 1 (immediate care) to 5 (not serious). This score determines the order in which patients are seen.

Staff recognized inconsistencies in triage nursing in our EDs. "We have varying requirements concerning the experience needed to perform triage," says Andrew Martin, R.N., a charge nurse in LVH—Cedar Crest's ED. "Plus, there is no evidence that suggests how much experience a nurse needs to accurately assign ESI scores."

Triage nursing can be difficult because of the large number of patients who come to the ED, especially at night. "There's a lot of emotion," Martin says. "Patients get frustrated when they have to wait while we care for patients with more serious conditions."

PICO Question: Do experience and attitude affect a nurse's ability to accurately triage patients?

Triage trial—Emergency department triage nurse Andrew Martin, R.N., helped design a study in which 60 percent of our ED nursing staff is participating to find the experience and attitude a nurse needs to perform triage accurately.



Research Planning: A team of ED staff nurses, physicians, clinical leaders, administrators, case managers and patient representatives planned the study with assistance from research experts and a college nursing professor. "The research proposal we submitted to the Institutional Review Board (IRB) was so thorough, it's being used as a prototype for future proposals," says Carolyn Davidson, director of quality, practice and research.

Data Collection: In January, more than 120 ED nurses began participating in the study. Nurses first complete a survey to determine their attitudes toward performing triage. They are asked about:

- The optimal amount of time to perform triage during a shift
- The amount of experience necessary to perform triage
- Their triage abilities

During one shift, triage nurses complete a form for each patient. Nurses assign an ESI score, predict the number of resources needed (e.g. X-rays, lab tests) to make a diagnosis, and list the most risky and most likely diagnosis.

Data Analysis: Two triage experts at each ED compare the forms with corresponding patient charts to determine the accuracy of ESI scores. Forthcoming, they will review nurses' surveys to determine a correlation between their experience and attitudes and the ESI accuracy. "We'll also determine if inaccuracies are more likely to occur late in a shift," Martin says.

Application to Practice: The team hopes to use the evidence to design new triage protocols. "If the results are definitive, we can say, 'research has supported triage nurses needing a certain experience level or to work a minimum number of hours in triage,'" Martin says. "We also can use the data to improve triage nurse education."

Force: Quality of Care

Magnet Expectation: There is integration of research and evidence-based practice into clinical and operational processes.

Rick Martuscelli

CAROLYN'S CORNER

Science and Art United



Carolyn Davidson, R.N.,
D.N.S., C(C), C.R.N., A.R.P.
R.N., Director, Quality,
Practice and Research

Nursing is the uniting of science and art to promote the best outcomes for our patients. Nurses on the front lines in emergency department (ED) triage, especially, must exhibit professional values and essential competencies that respect each individual patient. The relationship of nursing attitudes to chronic illness, psychiatric illness and the dying process are common in literature, but the linkage of attitudes and triage experience is not well-represented.

McNair and Gurney (2005) reflect that "education, experience and empathy are still the most important factors at triage, no matter what triage scale is used" (p. 600). Wiman and Wikblad (2004) note that caring is being "genuinely concerned about patients, morally responsible, truly present for patients and dedicated, while having the courage to be appropriately involved as a professional nurse" (p. 424).

In the ED triage study, the theoretical American Association of Critical Care Nurses (AACN) Synergy Model (AACN, 1998) was selected as the conceptual framework because attitude is reflected by the four nurse competencies: advocacy/moral agency, collaboration, diversity response and caring. The model accurately unites science and art and accounts for the ever-increasing complexities evident in the ED marked by unpredictability and variability.

If you want to learn more about research or share an idea for a research project, contact me at 610-402-1813 or carolyn_l.davidson@lvh.com.

AACN (1998). *AACN Synergy Model*. Retrieved Nov. 2, 2007, from <http://web.aacn.org/DesktopModules/Certifications/pages/Certifications/general/synmodel.aspx>

McNair, R. and Gurney, D. (2005). *It takes more than string to fly a kite: 5-level acuity scales are effective, but education, clinical expertise, and compassion are essential*. *Journal of Emergency Nursing*, 31(6), 600-603.

Wiman, E. and Wikblad, K. (2004). *Caring and uncaring encounters in nursing in an emergency department*. *Journal of Clinical Nursing*, 13, 422-429.

Our Magnet Moments

sharing our knowledge

PRESENTATIONS

American Nephrology Nurses Association 39th National Symposium **Philadelphia, Pa., April 2008**

Donald Jones, R.N., C.N.N.
Keep Scanning: Tips for Bar-coding Compliance (poster)

Susann Groller, B.S.N., M.B.A., R.N., C.N.N.
Computerized Water Treatment Education: The Wave of the Future (poster)

Success in Educating Staff on Hand Off Communication with an Interactive CD ROM (poster)

Society of Trauma Nurses Annual Meeting **New Orleans, La., April 2008**

Donna Grather, R.N., B.S.N., C.E.N., P.H.R.N.
ATV Injuries (poster)

American Heart Association 9th Scientific Forum on Quality of Care and Outcomes Research in Cardiovascular Disease and Stroke **Baltimore, Md., April 2008**

Donna Petrucelli, M.S.N., R.N., C.N.S., C.R.N.P.
Successful Implementation of a Multidisciplinary Quality Initiative to Improve Adherence to the Heart Failure Performance Measures (poster)

Nursing Management Recruitment and Retention Conference **Boston, Mass., April 2008**

Hope Johnson, R.N., M.S.N., C.N.O.R.
Gwenis Browning, R.N., B.S.N., C.N.O.R.
You've Got a Friend in Me, A Mentorship Program for New and Experienced Staff (poster)

American Operating Room Nurses 55th Annual Congress **Anaheim, Calif., March 2008**

Lisa Farthing, R.N., B.S.N., C.N.O.R.
Brian Leader, M.B.A.
Robert Ruhf

The Role of Sterilization Processes in Enhancing the Longevity of Sensitive Surgical Instruments (poster)

American Society of PeriAnesthesia Nurses Annual Meeting **Dallas/Fort Worth, Texas, May 2008**

Beth Pam Carrion, R.N., C.P.A.N.
Carol Shalaway, B.S.N., R.N., C.C.R.N.
Paving the Way to Staffing Success: Developing a PACU Internship Program (poster)

American Association of Critical Care Nurses National Teaching Institute **Chicago, Ill., May 2008**

Cindy Meeker, R.N., C.C.R.N.
Collaboration, Evidence and Cultural Shift (poster)
Collaboration: The Focus of Your Heart (poster)

Roslyn Harris, M.S., B.S.N., R.N., C.C.R.N.
SBAR Can You Hear Me Now? (poster)

Matthew Karpowicz, B.S.N., R.N., C.C.R.N.
Continuum of Competence: Trials of Educating in a Tele-ICU (poster)

Susan McCauley, B.S.N., R.N., C.C.R.N.
Is Your Patient in the Zone? If Not, Consider Automated Prone! (poster)

National Association of Orthopedic Nursing Annual Conference **San Jose, Calif., May 2008**

Donna Pilon, R.N.
"Back to Basics"—A Unit Initiative Promoting Excellence in Skin Integrity (poster)

Eileen Sacco, M.S.N., R.N., C.N.R.N.
Professional Development Leads to a Stellar Future (oral)

Oncology Nursing Society Annual Congress **Philadelphia, Pa., May 2008**

Nicole Reimer, B.S.N., R.N., O.C.N.
Diedre Kutzler, R.N., B.S.N.
Forces of Magnetism in Oncology Services: May These Forces Be With You! (poster)

Nicole Reimer, B.S.N., R.N., O.C.N.
Proven Strategies to Make the Most Out of Employee Satisfaction Assessments (poster)

American Organization of Nurse Executives **Seattle, Wash., April 2008**

Molly Sebastian, M.S.N., R.N., N.E.A.-B.C.
Courtney B. Vose, M.S.N., R.N., C.R.N.P., C.E.N.
What's Now in Succession Planning: A Multi-Tiered, Systematic Approach to Develop and Retain Talent in Your Organization (oral)

APPOINTMENTS

Susann Groller, B.S.N., M.B.A., R.N., C.N.N., director of nephrology services, was invited to become a member of the American Nephrology Nurses Association's Continuing Education Approval Board (CEAB).

AWARDS

7T Leadership Award

The 7T staff was awarded first place in the leadership category for their poster presentation titled "EZ Pass to Hospital Admission" at the Lippincott 2008 Symposium in Las Vegas, Nev.

Nursing Spectrum Nursing Annual Excellence Awards

Ruth Wittmann-Price D.N.S.c., R.N., C.N.S., C.N.E., Center for Mother and Baby Care, was the recipient of the Greater Philadelphia/Tri-State Region Philadelphia region award in the "teaching" category.



Recognized for Exceptional Burn Care

Our Regional Burn Center recently received reverification from the American Burn Association and the American College of Surgeons for adults and children. This three-year verification provides a true mark of distinction and indicates our Burn Center provides high-quality care to burn patients from the time of injury through rehabilitation.

This is the second time we received verification with no deficiencies, meaning we met all core criteria. When identifying the strengths of our Regional Burn Center, site surveyors often recognized our burn team (including above, Lois Douglass, R.N.):

- "The entire burn team exhibits great commitment to burn care and patients, and is an immense resource for the community and state."
- "There is a wealth of experience and commitment in the nursing administration and practice from the nurse managers, program coordinator, educational coordinator and the center's nurse practitioners."

Learn more about our Regional Burn Center by watching an online video at lvb.org/professionals/burn.



eLearning

offers helpful knowledge with the click of a mouse

When Mary Jean Potylycki, R.N., told her float pool nurses about a new way to learn about reducing urinary tract infections, they thought the process—called eLearning—sounded "challenging." But soon they were clicking away on their computers and actively learning. "They found learning can be creative, easy and fun, even when it's about urinary catheterization procedures," Potylycki says. Her float pool nurses are among four groups that piloted eLearning. It puts knowledge at your fingertips through a database of online classes. (You can access it through your computer's SSO toolbar.) It's easy for colleagues to stay up to date on things like ever-changing regulations and for managers to easily track attendance and compliance. It'll also help you organize your educational needs and records and help minimize your credentialing headaches.



100% Certified

Congratulations to the dialysis center nurses on reaching 100 percent certification. **Shannon David, R.N.** (third from right), **Chuck Howells, R.N.** (second from right), and **Deb Stupak, R.N.** (third from left), recently received their C.D.N. certifications to reach this goal. Also celebrating this professional achievement are (from left) director of nephrology services **Sue Groller, R.N., C.N.N.**, **Cheryl Lenosky, R.N., C.D.N.**, **Jen Trubilla, R.N., C.D.N.**, and **Lisa Emery, R.N., C.D.N.**



Mark Your Calendar:

Research Day

Monday, Oct. 6, 2008

8:30 a.m.–4:30 p.m.

Auditorium and Kasych Family Pavilion
LVH–Cedar Crest

At this year's Research Day, "How Research Impacts Practice," learn how to improve patient outcomes through bedside research. The day's events include:

- Keynote address—"Creating Partnerships to Improve Health: An Overview of Community-Based Participatory Research" by Debbie Salas-Lopez, M.D.
- Colleagues' poster presentations
- "Introduction to Research Ethics" by Scott Lipkin, D.P.M., and Victoria Sabella, R.N., B.S.N., C.C.R.C.
- "Study Design and Biostats for the Bedside Healthcare Professional" by Sherrine Eid, M.P.H.
- "An Introduction to Qualitative Research in the Hospital Setting" by Lynn Deitrick, R.N., Ph.D.
- Plenary session—"International Cutting-Edge Medical and Nursing Research Abstract Review" by Edward Panacek, M.D., M.P.H., of the University of California, Davis
- Moderated poster presentations from hospital staff
- "How to Build Effective Research Programs Within a Network" by Edward Panacek, M.D., M.P.H., of the University of California, Davis
- Plenary session—"Top Four Submitted Abstracts" presentation

To register or for more information, contact the division of education at 610-402-2277.



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