

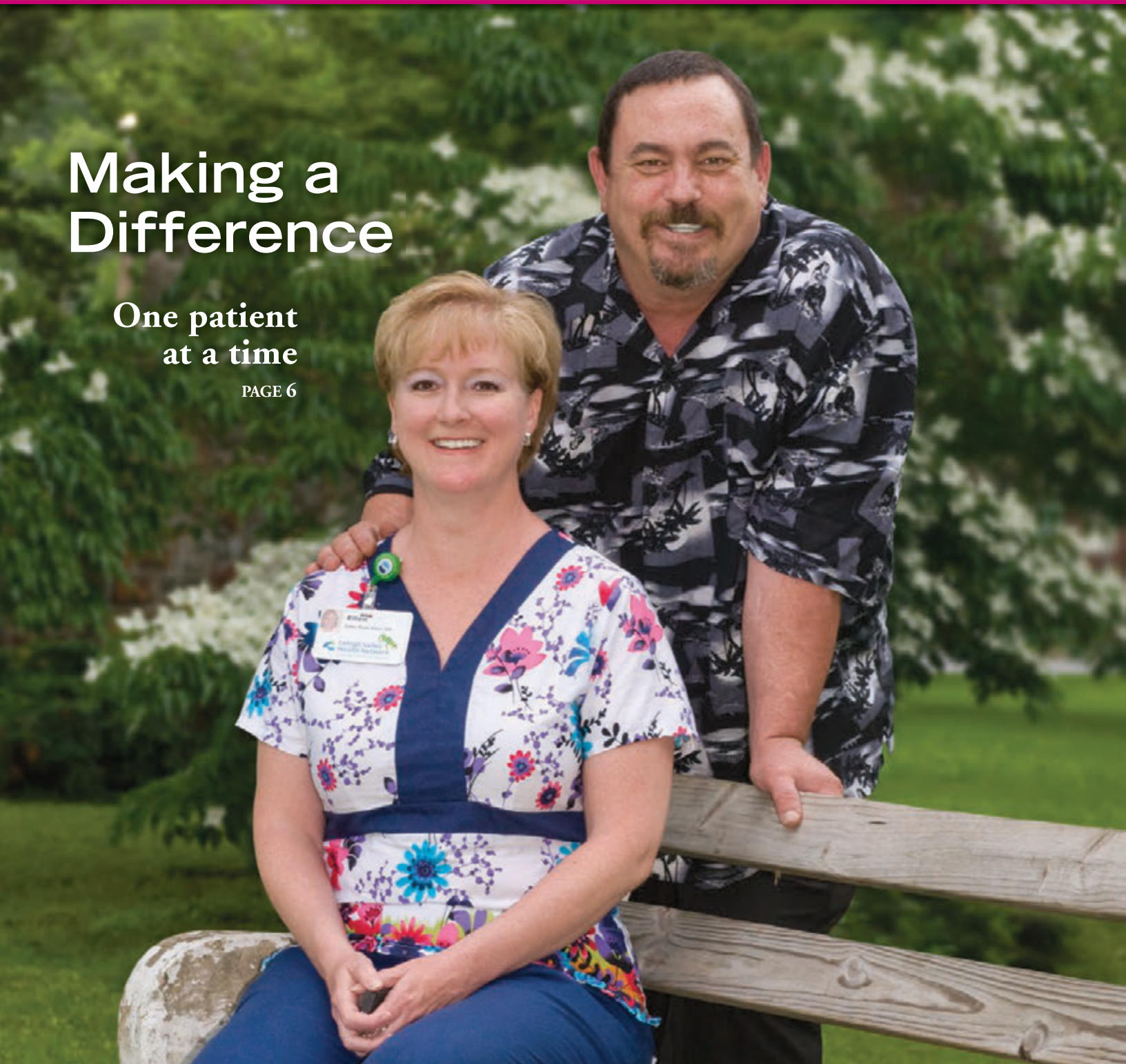
SUMMER 2009

Magnet Attractions

Making a Difference

One patient
at a time

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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 Health Network and shows how our clinical staff truly magnifies excellence.



On the cover: Learn how Ellen Reid Allen, R.N., is keeping her vow to make a difference to every patient, including Arthur Baker, on page 6.

Take Your Passion and Make It Happen

If you attended the Friends of Nursing Celebration this spring, I hope you were as energized and inspired as I was. The songs—especially “What a Feeling” with the phrase, “Take your passion and make it happen”—really uplifted me. It also made me think about the many ways you exemplify the Magnet spirit through your passion for better medicine.

This year we grouped our Friends of Nursing Award recipients into the five Magnet model components: Transformational Leaders; Structural Empowerment; Exemplary Professional Practice; New Knowledge, Innovations and Improvements; and Empirical Outcomes. Each of them consists of our Forces of Magnetism—our foundation and guiding light. The Magnet model is based on research, evidence and experience of Magnet hospitals and is constantly evolving.

During the celebration you heard stories of how you and your colleagues apply these components day in and day out as you strive to provide the highest-quality care for your patients.

You heard the story of Maureen Smith, R.N., who developed and twice offered a five-month-program to prepare her staff for neuroscience certification—ensuring that all 15 staff members passed their certification. You also heard about Mary Lenahan-Durnin, R.N., and Jennifer Brennan, R.D., who researched and developed a comprehensive multidisciplinary nutrition management protocol that has been described by physicians as a profound intervention. You were likely moved to tears by the story of how Jill Rothermel, R.N., made a wife's unorthodox request a reality when she wanted to be by her husband's side even as his organs were harvested. Jill made it happen, and the wife was seated at her husband's side, holding his hand, as the organ donation progressed. (Read more stories of passion and see highlights from this year's celebration on page 4.)

Just as Magnet uses a multifaceted system of evaluation to assess excellence, we too use a comprehensive system to evaluate and recognize excellence. That recognition comes through the eyes of patients and families, our community, our professional peers and our leadership. Our Friends of Nursing Award recipients personify excellence on many levels. They go about their daily work, not truly realizing the significant impact they have on others. They are true leaders and typify what Magnet excellence is all about!



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Terry A. 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*

A Passion for Better Medicine

Colleagues celebrate passion during Nurses Week

What a feeling! Clinicians honored each other's passions at the Friends of Nursing Celebration and other Nurses Week events. Here's a glance at a few of this year's events and stories of passion shared at this year's celebration.

Fight of a champion—World-renowned figure skater, author and television personality Peggy Fleming was our Medallion Lecture speaker during Nurses Week. She openly shared the challenges of becoming an Olympic gold medalist and how that experience prepared her to meet her greatest life challenge: a battle with breast cancer. She spent considerable time talking with our Breast Health Services colleagues after the event.



Honorable mention—Terry Capuano, R.N., senior vice president of clinical services, surprised long-time Friends of Nursing coordinator Kim Hitchings, R.N., manager of the Center for Professional Excellence, with a special award during the celebration. Hitchings is a key player in the health network's Magnet designation and was credited for her passion to make our environment one of professional excellence and recognition year after year.



Groundbreaking meeting—For the first time ever, the Pennsylvania State Board of Nursing meeting was held at a hospital this year. Lehigh Valley Health Network was proud to host this meeting during Nurses Week in the state-of-the-art Kasych Family Pavilion educational conference center. Nurses and health care administrators from across the Commonwealth flocked to Lehigh Valley Hospital–Cedar Crest to learn about topics such as license requirements, regulatory changes, continuing education and trends in nursing.

Caring is her calling—Remembering what it was like to recover from serious burns that covered 40 percent of her body, Elizabeth Dideon Hess (center) comforts patients as a case manager in our Regional Burn Center. Her passion led to her receiving The Robert Lurig Memorial Award for Excellence in Burn Care presented by Terry Capuano, R.N., senior vice president of clinical services, and Stuart Paxton, chief operating officer. “I am passionate about my job because I’m able to see the perseverance of the human spirit every day,” Dideon Hess says. “Helping the burn community is more than a job—for me it’s a calling.”



Pharmacy excellence—As manager of Health Spectrum’s infusion department, Dave Freeman performs every job in his department to give staff an hour to “drain their brains,” finds innovative ways to solve problems, and even performed a house call on Christmas Eve. That’s why he received the Friends of Nursing Award for Excellence as a Pharmacist. Celebrating with his wife, Michele, Freeman humbly says, “I honestly don’t feel like I do anything special. I just care for patients like they’re a member of my family.”

Lifesaving sister—Jacqueline Sellers (right) says if it weren’t for her sister’s care, she never would have survived breast cancer. She flew from North Carolina to celebrate her sister, Deb Sellers, R.N. (left), receiving the Friends of Nursing Fleming Nursing Caring Award. Celebrating with Sellers, the director of Lehigh Valley Hospital–Muhlenberg’s 4T medical-surgical unit, were (l-r) Molly Sebastian, R.N., vice president of patient care services, Claudia Hille, Deb’s dear friend, and Deb’s son Jeremiah Fennell.



Take Your Passion and make it Happen

Our Friends of Nursing Awards personal exemplars are always touching. This year's entries certainly showcased your Passion for Better Medicine. Here are a few of them:

Remembering Arthur

“When I graduated, I made it a personal promise to never forget I can make a difference for my patients and their families. I especially remember one patient, Arthur Baker. He was a young man newly diagnosed with diabetes. He was shocked, lonely and confused. I explained what was happening to him and spent much of my weekend shift teaching him how to do self-injections, the importance of good foot care and a proper diet, and the signs and symptoms of hypo- and hyperglycemia. I also educated Arthur's family members about diabetes and emphasized he was going to need their help, understanding and patience. Being diagnosed with diabetes was clearly a life-changing event for him. We had many conversations that weekend. He was soul-searching and I listened. By the third day Arthur left with the knowledge he needed and reassurance everything would be OK. I like to think I was a trusted face in his uncertain world. My patients keep me going. I love being a nurse!”



—Ellen Reid Allen, R.N.

Recipient of Josephine Ritz Nursing Award for Excellence in Patient/Family Teaching

‘Yes, I’m You’

“I entered the room to find my patient's wife exhausted and on edge. It was easy to sense her helplessness and despair. I could see in her eyes she was analyzing everything from the dual perspective of a wife and a nurse. She needed answers and positive news. I introduced myself and explained my goals and priorities for the day. I explained why I did everything and tried to answer her questions. I felt the most important thing I could do for her was allow her to be a wife. I told her, ‘Let me worry about the lab results, tests, heart rhythms and fevers.’ When I had to take her husband to interventional radiology for an extended period of time, I realized the trust she placed in me. She kissed my forehead and said, ‘You’re me, right?’ For a brief moment I paused and thought of the enormous responsibility in that statement. I looked directly in her tear-swollen eyes and replied simply, ‘Yes, I’m you.’”



—Michelle Trzesniowski, B.S.N., R.N.

Recipient of the Pulmonary Associates Award for Excellence in Critical Care Nursing

Patient Persistence

“One of the most challenging aspects of visiting patients in their homes is realizing some have limited resources, and many times, no assistance with their daily needs. One patient in particular had a long history of uncontrolled diabetes and a non-healing foot wound. He was blind, lived a reclusive life in a small apartment and had no family or caregivers. On my first visit he said he didn’t trust health care workers, didn’t need help from anyone and wouldn’t take any of his medications; God would provide, he said. So we did it his way. We spent a lot of time praying together, and we discussed the need to help ourselves in life, as well as relying on prayer. Gradually, over time, he began to trust me. He started taking his pills on a regular basis and accepted help from other social services. His wound finally healed. One month after I discharged him, I saw him standing on a street corner; he was smiling, talking, laughing. He looked wonderful. I’m sure he’s still doing well and taking his medications. What a great reward!”



—Teresa Bangham, R.N.

Recipient of the Alma W. Holland Award for Excellence in Home Care Nursing

In Their Shoes

“My years as a case manager have given me the experience of interacting with many individuals and families affected by Alzheimer’s. Their issues are dear to my heart, as my father died last year of the disease.



Dad was hospitalized for seizures, and at the time, was aphasic (speech impairment) and struggled to follow commands. I always will remember when a colleague said, ‘You can’t handle your Dad at home.’ We took him home anyway and were able to care for him until he died. It inspired me to remind myself and my colleagues that these decisions are up to our patients’ loved ones. We cannot judge their strength, courage and determination. It is our role to support their determined efforts. You truly cannot appreciate the role of caregiver until you have been one yourself. You cannot understand the issues of family members until you’ve been in their shoes. You cannot understand their determination to have their loved one die in a loving environment until you have provided this great act of love.”

—Michaelene “Miki” Butler, L.S.W.

Recipient of the Award for Excellence as a Case Manager

Ensuring Her Patient Didn’t Die Alone

“Through my past three-plus years here, I have experienced more growth and learned more strength than I ever have in my life. Every day that I come to work, I am reminded why I am so dedicated and driven to reach my goal of becoming a physician’s assistant. On one particular day, there was a patient on my unit who was actively dying. Throughout my shift I continually asked about the patient. When I had time that day, I sat with the patient and held her hand. Her brother reluctantly went home that night and expressed concern that she may not live through the night. When my shift was over at 11:30 p.m., I decided to stay with the patient throughout the night until she passed away. I stayed with her until 4 a.m., holding her hand, talking with her, praying with her, and most importantly, I was present in the last moments of her life.”



—Kari Kolwicz

Recipient of the Administrative Partner Award

MAGNET EXPECTATION:

The professional community and community at large recognize the value of nursing and associated disciplines in the organization.

STRUCTURAL
EMPOWERMENT

The Strength of Our Care Team

Our employee survey results help us become an even better place to provide care

As a Magnet hospital, we're constantly driven to raise the bar. One way to become an even better place to provide care is to ask: Where are we strong? Where can we improve? We hired an independent company, HealthStream (formerly The Jackson Organization), to conduct an employee satisfaction survey. All colleagues, including those who make up our patient care services team (registered nurses, licensed practical nurses, and technical, support and administrative partners), were asked questions about experiences at our health network.

We conducted the survey during a difficult economic period in which more demands are being placed on caregivers. "It serves us well to ask your opinion during prosperous and difficult times," says Molly Sebastian, R.N., vice president of patient care services. "Results show that we continue to be strong, compared to the survey conducted during a more prosperous

time. It's a testament to the passion of our care team."

When taking the survey, you were asked to agree or disagree with many statements. If you completely agreed, you gave a score of 5. If you completely disagreed, you gave a score of 1. HealthStream tabulated scores for the key indicators—the four things that best determine how you feel about our workplace.

Key Indicator	New Survey Score (2009)	Previous Survey Score (2006)
Overall Satisfaction	3.65	3.75
Retention	4.17	4.30
Morale	3.75	3.82
Engagement	3.80	3.80

Nursing results

Out of 1,201 patient care team respondents, 44 percent of you said you're "very satisfied" with your work experience. Many of you also said you're proud to work here and would recommend our health network to people who need care. To raise the bar, however, we also must focus on areas we can improve. For example, you feel your supervisor needs to become a better listener.

We're working together to become an even better place to provide and receive care. Our R.N. Advisory Council, which has a representative from each unit, identified three issues from the survey's R.N. roll-up report to work on over the next year. After Sebastian shared the survey results with the group members, they began working on action plans at their July meeting. Your supervisor will utilize your feedback to develop and implement action plans to strengthen your department.

Plus, we're analyzing survey data to determine what is most important to caregivers based on tenure. "After the last survey, we learned younger caregivers are concerned about work-life balance while more tenured colleagues wish to be more involved in decision making," Sebastian says.

In the end, by listening we'll create a better work environment. "When our caregivers are satisfied, our patients are satisfied," Sebastian says. "That's our ultimate goal."

TRANSFORMATIONAL LEADERSHIP

MAGNET EXPECTATION:

Input from direct-care clinicians is used to improve the work environment and patient care.

Research: PT/INR Testing

The Importance of Timing in Warfarin Dosing and PT/INR Testing

Roxanne Leroy, R.N., has seen her fair share of patients on the blood thinner warfarin. It's one of the most commonly prescribed drugs, especially in an older patient population prone to atrial fibrillation, whom she cares for often as a staff nurse on the interventional progressive coronary unit.

Through the years, she has often educated distressed patients about the drug and how it works; yet she had lingering questions of her own about how to administer the PT/INR test, which measures how quickly blood begins to form clots and monitors blood-thinning drugs such as warfarin. Then her mother had surgery, developed a blood clot in her lung and subsequently was placed on warfarin. After that, Leroy's quest for knowledge about the drug became more intense.

"I realized everyone took the drug at a different time, yet PT/INR tests to determine therapeutic value were always administered in the morning," she explains. "I wondered whether we were getting accurate readings of how much of the drug was in a patient's system, which in turn influences subsequent dosages. Results also may determine whether a patient could be discharged earlier from the hospital."

To find answers, she researched how warfarin is metabolized and learned about the drug's half-life. Her efforts led to a research project. Fifty patients taking warfarin will be enrolled in the study. During their hospital stays, these patients will be given warfarin at noon each day; the dosage will be based on that morning's PT/INR results. They will then have blood drawn in the early morning hours (4-6 a.m.) and again at noon. The most important goal of the research is to determine whether/how much the drug's therapeutic value increases between the two tests.

"I'm excited to see what our results are," Leroy says. "If we learn the best time to administer warfarin, our patients may be able to get home more quickly—and that's where they want to be."

CAROLYN'S CORNER

Tackling the Future of Nursing Research

We value our "bedside scientists" here at Lehigh Valley Health Network, and we recognize the importance of nursing-led research to improve patient care. In fact, our evidence-based approach to nursing is one of the reasons we're designated a Magnet hospital.

Because of the network's commitment to nursing research, our health care research leaders identified an opportunity to evolve and mature the previous Collaborative for Evidence-Based Practice group. So under the direction of nursing research specialist Kathy Baker, R.N., an oversight group consisting of clinical services and academic colleagues developed a charter and strategy for the future.

That oversight group, the Nursing Research Council (NRC), has a defined purpose to improve the quality of patient outcomes through the generation, utilization and advancement of a scientific knowledge base for clinical practice. They will collaborate and corroborate with three work-groups (Evidence-Based Practice; Education; and Data) that are composed of multidisciplinary clinical staff and academic colleagues at all levels.



Carolyn Davidson, Ph.D., R.N., C.C.R.N., A.P.R.N., Director, Quality and Evidence-Based Practice

The goals of the NRC, which is inclusive of the work-groups, include:

- **Promote** rigorous scientific methods and ethical standards to conduct nursing research
- **Assure** utilization of nursing research findings
- **Develop** resources and facilitate various educational experiences to disseminate across the network
- **Facilitate** mechanisms for dissemination of research methods and findings
- **Contribute** to the scientific body of nursing research through professional presentations and publications
- **Promote** the image of nursing as a scientific discipline

We look forward to the evolution of the Nursing Research Council and the work-groups to support the mission and values of our health network.

sharing our knowledge

PRESENTATIONS

Posters

American Association of Neuroscience Nurses

Las Vegas, Nev., March 2009

Holly D. Tavianini, R.N., M.S.H.S.A., C.N.R.N.

Jill S. Hinnerhitz, B.S.N., R.N.

Michele Norton, B.S.N., R.N.

Grow Your Own: Recruiting and Retaining Graduate Nurses

Joe Pearce, B.S.N., R.N.

Changing a Culture: Expanding the Concept of Family Presence

Kristen Gaumer, R.N., C.N.R.N.

Is Your Neuroscience Patient Starving in ICU?

Marjorie Lavin, M.S.N., R.N.

Leading the Way...Integrating Technology in a Neuroscience Unit

Maureen Smith, M.S.N., R.N., C.N.R.N.

Certification: A Team Approach Produces 100% Certification Rate We Did It and So Can You!

Robert Pencil, B.S.N., R.N.

Extreme Strokes: Thinking Outside the Box

Eastern Nursing Research Society

Boston, Mass., March 2009

Michele Ortiz, B.S.N., R.N.

Maria T. Cruz, R.N.

Examining the Relationship of Acute ESI Triage Scores to Emergency Department Nursing Attitudes and Experience

American Organization of Nurse Executives

San Antonio, Texas, April 2009

Marilyn Guidi, M.S.N., R.N.

Anne Panik, M.S.N., R.N., N.E.A-B.C.

FORTUNE Magazine's "100 Best Companies to Work For"—The End Result of a Strategic Workforce Development Initiative

American Society of PeriAnesthesia Nurses

Washington, D.C., April 2009

Beth Hall, B.S.N., R.N., C.P.A.N.

Kathleen Duckworth, R.N.

Creating Lasting Legacies: PACU Student Nurse Externship

Society of Trauma Nursing

Phoenix, Ariz., April 2009

Donna Grather, B.S.N., R.N.

Judith Schultz, C.S.T.R.

Making the Grade: Development of a Registry-Driven Documentation PI Initiative

American Association of Critical Care Nurses

New Orleans, La., May 2009

Susan O'Neil, R.N., C.C.R.N.

Creating a Culture Change: Tight Insulin Control in a Trauma/Neuro Intensive Care Unit

Beth Pam Carrion, R.N., C.P.A.N.

Paving the Way to Staffing Success: Developing a PACU Internship Program

New Jersey End of Life Nursing Education Consortium

Atlantic City, N.J., May 2009

Yvonne Stauffer, R.N., C.H.P.N.

Dianne Macdonald, L.P.N., C.H.P.L.N.

Deborah Pietruszka, O.T.R/L, C.H.T.P., C.Ht
What Was Old Is New Again

Oral

Emergency Nurses Association Leadership Challenge

Reno, Nev., March 2009

Georgine Fontaine, B.S.N., R.N., C.E.N.

Emergency Behavioral Health Area: The First Five Years

Oncology Nursing Society Annual Congress

San Antonio, Texas, April 2009

Nicole Reimer, B.S.N., R.N.

Round and Round and Round We Go to Assure Exemplary Professional Practice

American Organization of Nurse Executives

San Antonio Texas, April 2009

Terry Capuano, M.B.A., M.S.N., R.N., N.E-B.C., F.A.C.H.E.

Kim Jordan, M.H.A, R.N, N.E-B.C.

There Are No Limits! A Future Search to the Ideal Patient-Centered Experience

PUBLICATIONS

Pennsylvania Nurse

March 2009

LaDene Gross, R.N., MSed.

Implementing Bar-coding Technology to Promote Newborn Identification Safety

CERTIFICATIONS

Medical-Surgical Nursing (R.N., B.C.)

Beth Kessler

MaryAnn Lubinensky

Medical-Surgical Nursing (C.M.S.R.N.)

Melissa Kisegy-Kemmerer

Kimberly Dakan

Schelly Snyder

James Foose

Christine Haussmann

Perioperative Nursing (C.N.O.R.)

Cynthia Rosevelt

Critical Care Nursing (C.C.N.R.)

Lindsey Hayde

Neuroscience Nursing (C.N.R.N.)

Jeana Santostefano

Tracey Baumhower

Donald Butz

Erin Conahan

Susana Garcia

Lisa Holzwarth

Kimberly Martin

Christina Merrell

Emergency Nursing (C.E.N.)

Neil Kocher

Becoming an R.N. All Over Again

In Germany, Silvia Sherer was a registered nurse. When she moved to the United States, she discovered she had to navigate a complex system of red tape to receive licensure. Sherer, then a technical partner in Lehigh Valley Hospital–Muhlenberg’s emergency department (ED), asked her director, Charlotte Buckenmyer, R.N., for help.

They contacted the Commission on Graduates of Foreign Nursing Schools (CGFNS). “They’re the homeland security for American nurses and ensure foreign nurses have earned certification,” Buckenmyer says. Through repeated phone calls, Sherer learned what she had to do.

Because the nursing school Sherer attended had closed, she traveled to Germany to locate her transcripts, and had them translated. She passed a difficult English test, and took nursing review classes and the National Council Licensure Examination review course. All the while, Buckenmyer and her ED colleagues provided guidance and motivation.

After four years of hard work, Sherer passed her state boards. Today, she’s a registered nurse in the ED. Her message to foreign nurses: “Don’t give up. Help is nearby. My mom always said, ‘Without effort there is no prize.’”



After a long journey and with much help from Charlotte Buckenmyer, R.N. (left), Silvia Sherer, R.N., (right) is happy to be a registered nurse again.



Furthering the Quest to Improve Care for Amputees

Kim Bartman, B.S.N., R.N., C.V.N., 4K patient care coordinator, was recently asked to serve on the board for the Amputee Coalition of America, a nonprofit national consumer educational organization that provides support and resources to people who have experienced amputation. Passionate about the cause, Bartman and a colleague started Lehigh Valley Health Network’s amputee support group more than six years ago. The national organization took notice of how active and vibrant our group is; they’ll tap Bartman’s experience and expertise to stimulate membership in the national group during her two-year board appointment. “I am excited about the opportunity because it ultimately will benefit amputee patients,” Bartman says. “It’s so important for people to know the resources and support available to them through the Amputee Coalition, and I’ll help spread the word.”

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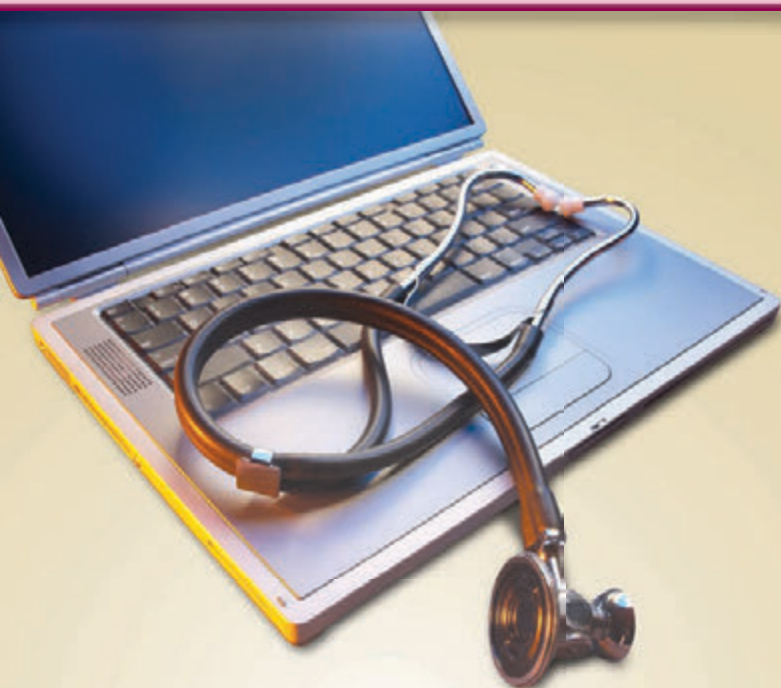
Cory Prohaska

 After reading, please recycle this magazine.

Intranet: lvh.com • Internet: lvh.org

Research Day 2009: The Collaborative Faces of Research

Monday, Oct. 5, Lehigh Valley Hospital–Cedar Crest



Tuesday, Oct. 6

Interactive, hands-on workshops
9:30 a.m. - 12:30 p.m.

Keynote address – “The Collaborative Faces of Research at Lehigh Valley Health Network” by Terry Capuano, M.S.N., M.B.A., R.N., N.E.-B.C., F.A.C.H.E.

Breakout session

“Successful Collaborative Research Team-Building: Ready for Data Collection” by Andrew Martin, R.N., P.H.R.N., C.E.N., and Anne Panik, M.S., R.N., N.E.A. - B.C.

“The Good, the Bad and the Unexpected: How AIDS/HIV Clinical Research Has Impacted an Evolving Epidemic” by Timothy Friel, M.D.

“Determining the Difference Between Quality Improvement and Research Projects” by Scott Lipkin, D.P.M., and Victoria Sabella, B.S.N, R.N., C.C.R.C.

Plenary session – “Optimizing Cardiovascular Health in Women—Getting the Most Out of Research Results” —panel discussion, physicians from respected institutions across the country

Moderated poster presentations

Plenary session – “Transparency: Friend or Foe?” by Christina Lewis, R.N., M.P.H., F.A.C.H.E.

Breakout session

“How to Develop a Research Question” by Elissa Foster, Ph.D.

“Unleashing your Research Psyche” by Carolyn Davidson, Ph.D., R.N., C.C.R.N., A.R.N.P.

“Enhancing the Delivery of High-Quality Patient- and Family-Centered Care by Embedding Interdisciplinary Narrative Exchange and Reflective Practice Seminars and Workshops” by Lorraine Dickey, M.D., M.B.A..

Plenary session – Panel presentation of “The Top 4” submitted abstracts