

magnetattractions

How We Attract and Retain the Best

Rituals of Care

A marriage of culture and patient-centered care on page 5





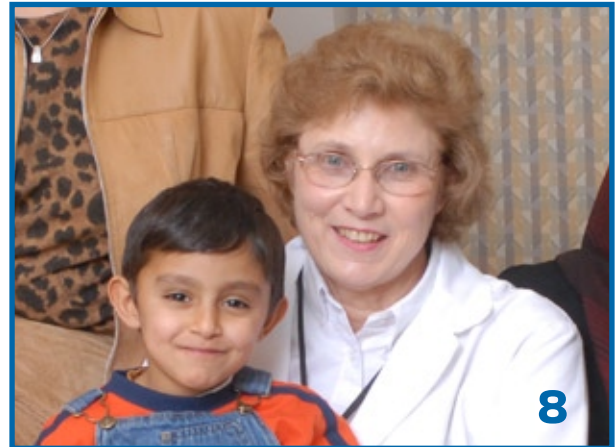
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i n s i d e t h i s i s s u e

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Eagle and Messina Victoria of Whitehall perform a smudging ceremony, a Native American prayer ritual that provides physical and spiritual cleansing. Discover how caregivers welcomed their cultural traditions on page 5.

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2008 **U.S. News & World Report**

o u r m a g n e t s t o r y

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.

History in the Making

The first of October marked a new chapter in the book of health care: the new Centers for Medicare and Medicaid Services rules went into effect. Hospitals are no longer reimbursed for care associated with eight hospital-acquired conditions including pressure ulcers, catheter-associated urinary tract infections and fall-associated injuries. Although we hold ourselves to high standards, we must continue to strive for enhanced safety in the care we provide. (Read more about the rules and research-proven tips for preventing infections on page 6.)

This change is one example of how health care is evolving. In order to continue providing the best care for patients, we must evolve too. You may be participating in initiatives that take in—depth looks at how we provide care – from the details of how inpatients receive physical therapy (through System for Partners in Performance Improvement) to ensuring patients are scheduled for follow-up appointments before being discharged (through the Patient-Centered Experience 2016, a 10-year initiative). And that’s just scratching the surface of our efforts to efficiently provide ideal patient experiences.

Even the American Nurses Credentialing Center, which twice recognized us as a Magnet hospital, has evolved. As you learned in the September issue of *Magnet Attractions*, we have a new Magnet Model. Model components, comprised of the Forces of Magnetism (our foundation as a Magnet hospital), streamline our practices. They will continue to guide us as we move into a new era of health care.

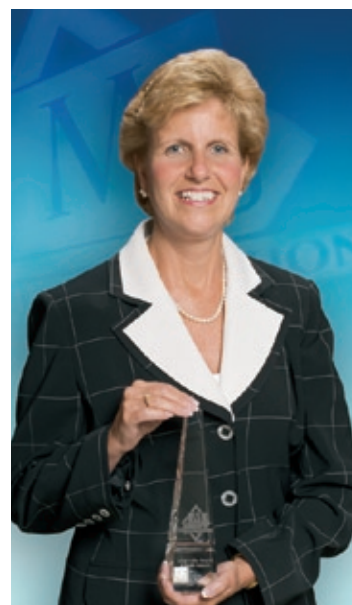
Throughout this issue, you’ll learn about the Magnet Model component of New Knowledge, Innovations and Improvements—how our systems and practices continue to be redesigned and redefined to meet our diverse patient needs. For example, 5T clinicians knew it was important for a Native American patient and his wife to practice their cultural ritual of smudging, so they found a way to accommodate them. (Read about it on page 5.)

Our Nightingale and Pennsylvania State Nurses Association Awards recipients also reflect this model component. They use new knowledge, innovations and improvements to bring patient care to new levels. (Meet them and read about their successes on page 8.)

It’s an exciting time to work in health care, especially in our health network. You are witnessing history in the making, and I encourage you to play a pivotal role. If you discover new knowledge, innovations or improvements, share them. If you are approached to help with a new initiative, dive right in. It’s because of you that we continue to succeed.



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



“If you discover new knowledge, innovations or improvements, share them. If you are approached to help with a new initiative, dive right in.”



A Stitch in Time

Sewing a quilt bonds respiratory therapy colleagues

When Angela Lutz, R.R.T., opened an e-mail announcing the Images of Magnet Care Display, she knew instantly she wanted her team to participate. “I thought it would be a nice team-building exercise,” says Lutz, director of respiratory therapy.



The e-mail came shortly after her grandmother’s passing, and Lutz thought fleetingly of the beautiful quilts her grandmother crafted. Having no clue how to quilt, she recruited her colleague, Carole Dorr, R.R.T., a talented quilter and patient teacher. Dorr agreed to teach the team how to quilt, and the quilting project for Images of Magnet Care began in earnest.

“The interest was incredible,” Dorr says. Thirteen colleagues—many with no sewing experience and most with no quilting experience—met weekly and then biweekly in Dorr’s basement to complete the quilt. “Let’s just say there was some minor bloodshed as people learned how to quilt,” Lutz laughs.

As time went on, their stitches improved—as did the bond among colleagues. “Great conversations happen over quilt frames,” says fellow quilter Diane Horoski, a respiratory care application analyst. “We talked about work, we got to know each other, and we became better friends. It was a lot of fun.”

The group carefully chose a compass quilt design because a compass is made of magnets that lead, direct and attract, symbolizing the Forces of Magnetism. They chose eight block designs to represent the department’s mission to care for all people of the community by providing compassionate respiratory care, supported by clinical research and education. They captured the palette of the network and Magnet logos in the fabric colors. “We had tons of great ideas, and we worked as a team toward the final choices,” Lutz says.

Their choices and hard work paid off. The quilt was an Images of Magnet Care award winner. Their handiwork will be displayed permanently at LVH—Cedar Crest for years to come. “It’s nice to look back and know we accomplished something so beautiful by working as a team,” Dorr says.

Amy Satkofsky



When the Smoke Cleared

Caregivers help a Native American couple incorporate their culture into their care

A group of people hold hands, encircling a man who is about to undergo hernia surgery. Inside the “prayer circle,” the man’s wife performs a “smudging” ceremony by setting fire to sage, cedar and sweetgrass. She blows the smoke over the man and those about to perform the operation, cleansing their bodies physically and spiritually.

The man is Eagle Claw Victoria of Whitehall, a descendant of a great Native American chief. His wife is Messina, a woman whose beliefs in Native American herbal remedies and rituals helped her survive cancer. The ceremony isn’t being performed in their teepee, but in Eagle’s room at LVH—Muhlenberg.



The decision to allow the cleansing ceremony that involved the lighting of matches and smoke in a hospital wasn’t made lightly. With encouragement from Eagle’s caregivers on 5T, director Jennifer Devine, R.N., realized it was the right thing to do. “Smudging is part of their culture and healing process,” she says. So she helped make arrangements to allow Eagle and Messina to practice this prayer ritual without jeopardizing the safety of patients and staff.

Devine contacted risk management colleagues who suggested Eagle and Messina go to the chapel for smudging. Knowing that smudging is done several times daily, Devine felt the walk would inconvenience the couple. Instead, she suggested a compromise: Smudging could be performed safely in their room if done at a safe distance from a smoke detector, and if creating only a small amount of smoke.

“We give so much credit to our caregivers,” Eagle says. “We felt comfortable knowing they were open to our culture. They accepted us, and that made us feel wonderful.”

Call it luck or divine intervention but on the three occasions Eagle and Messina needed hospital care—including Eagle’s most recent hernia operation—they were on 5T. The first hospitalization occurred when Eagle suffered a gall bladder attack on their wedding night. “They set up a chair and pillow for me next to his bed because they knew I wanted to be close to him,” Messina says. “We called it our honeymoon suite.” For 5T colleagues, Devine says, “It was just another opportunity to deliver the patient-centered care our community deserves.”

Rick Martuscelli

Reunited—Eagle and Messina Victoria (second from left and right) returned to 5T to hug and smudge their friends (l-r) Charlene Mensinger, Barbara Labriola, R.N., and Cheryl Morgan, R.N.



Force: Quality Improvement

Magnet Expectation: We assess, analyze and evaluate clinical and operational processes and outcomes.

Bundles for Care

Practices help prevent hospital-acquired conditions and ensure reimbursements

A new Centers for Medicare and Medicaid Services (CMS) rule makes the role of bedside nurses even more pivotal. As of Oct. 1, hospitals are no longer reimbursed for care associated with these hospital-acquired conditions:

- Catheter-associated urinary tract infection
- Pressure ulcers
- Fall-associated injuries
- Object left in during surgery
- Air embolism
- Blood incompatibility
- Vascular catheter-associated infections
- Surgical site infection following open heart-surgery

“We’ve been taking steps to prevent these conditions for many years,” says Carolyn Davidson, R.N., director of quality, practice and research. “Although the new rule has serious financial implications, we will continue to prevent these conditions because it’s the right thing to do for our patients.” Already in place are bundles—or practices—to help you prevent these conditions.

What is a bundle?

A bundle is a set of simple practices that when performed collectively and reliably improve patient outcomes, and in these instances, prevent hospital-acquired conditions. Here are bundles to prevent three common hospital-acquired conditions:

Catheter-associated urinary tract infection bundle

- Identify patients who had catheters inserted prior to their hospitalization.
- Insert the catheter using sterile technique.
- Determine daily if the patient needs the catheter.
- Provide daily catheter care.
- Use a Stat Lock to secure the catheter in place.
- Complete the required eLearning course.

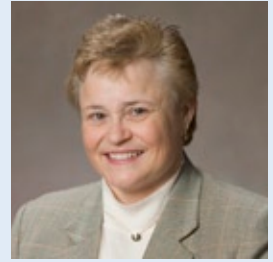


Force: Quality Improvement

Magnet Expectation: Our clinical and operational indicators are benchmarked with external entities to modify care processes.

CAROLYN'S CORNER

Packaging for Better Patient Outcomes



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

Patient safety is our foremost goal, and the Institute for Healthcare Improvement (IHI) has recommended practices to promote this goal. In 2004, reports indicated over 93,000 patients experienced an adverse event while hospitalized. The IHI now believes there are an estimated 15 million incidents of medical harm in American hospitals each year. This number prompted the IHI to establish its most ambitious initiative: "Protecting 5 million lives from harm," running through December 2008.

This initiative identifies 12 interventions including "central line" and "ventilator" bundles. "Bundles" help clinicians reliably deliver the best possible care through a collective set of practices—usually three to five—known to reliably improve patient outcomes and promote patient safety. We recognize the value of the IHI initiatives, and use the central line and ventilator bundles.

Ask your unit director how you can contribute to better outcomes by considering bundles of care as the standard.

Resources:

<http://www.ihl.org/IHI/Topics/CriticalCare/Sepsis/>
<http://www.innovations.ahrq.gov/content.aspx?id=1811>

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

Pressure ulcers bundle

- Determine if a patient has a pressure ulcer before hospital admission and document it.
- Inform a physician if a patient has a pre-hospital pressure ulcer, and remind him to document it. According to CMS rules, a physician must document a pre-hospital pressure ulcer in order for the hospital to be reimbursed for care. Documentation by anyone other than a physician will not allow payment.
- Keep the skin dry.
- Turn patient every two hours.
- Identify the source of pressure.



Fall-risk identification and prevention injury bundle

- Evaluate a patient's risk for falling.
- Identify high-risk patients by placing a magnet indicating a patient is a fall risk, on his or her door.
- Conduct hourly rounds to proactively identify patient needs.
- Look for and fix fall hazards in patient rooms, like exposed cords on the floor.

Rick Martuscelli



How Research Impacts Practice: Research Day 2008

When conducting research, first consult the IRB (Institutional Review Board) office to uphold research ethics. Victoria Sabella, R.N., and Scott Lipkin, D.P.M., shared these messages with the more than 225 clinicians who attended Research Day, along with the importance of research ethics. The annual event, held in October at LVH—Cedar Crest, also included a presentation on qualitative research in the hospital setting by anthropologist and ethnographer Lynn Deitrick, Ph.D., R.N. "I wanted participants to understand the importance of the human component in research," says Deitrick, who also shared some of her published work. Attendees also heard Debbie Salas-Lopez, M.D., speak about creating partnerships to improve community health and the importance of community health, and viewed colleagues' poster presentations.

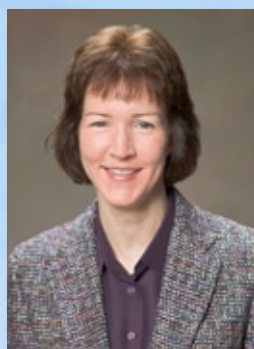
MAGNET MILESTONES

Nurses are recognized among the best in Pennsylvania, setting a network record

It's been a banner year for nursing. Six of our nurses were finalists for Nightingale Awards of Pennsylvania, setting a new network record. In fact, there were only 18 finalists across the state (three in each of six award categories)—one-third of them from our network. They traveled to Hershey, Pa., with family and colleagues for a formal awards celebration where two of our nurses were named recipients. In addition, three nurses received Pennsylvania State Nurses Association (PSNA) Awards.

Nancy Davies-Hathen, M.S.N., M.Ed., R.N., C.C.R.N. (alumna), N.E.A.-B.C.

Nightingale Nursing Administration Award Recipient



Davies-Hathen has a long track record of improving care and is known to ask, "What is in the best interest of the patient?" As the nursing administrator for cardiovascular and surgical patient care services, enterostomal therapy, pastoral care and express admission units, she has provided clinical leadership collaboration in nursing initiatives. These include the Regional Myocardial

Infarction (MI) Alert Program, a partnership with community hospitals to open blocked arteries within 120 minutes, as well as nurse-driven protocol for blood glucose control in postoperative cardi thoracic patients (which received recognition by the Health Alliance of Pennsylvania for patient safety).

Susan Eckhart, B.S.H.A., R.N., C.M.S.R.N.

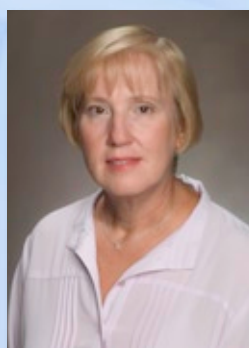
Nightingale Clinical Practice R.N. Award Recipient



Eckhart is one of the transplant program's first nurses. During her tenure, she created a preoperative care checklist for clinicians. It was so well received, she created a post-operative checklist too. Eckhart, a patient care coordinator, worked with her colleagues on 5B medical-surgical unit to develop educational resources for patients and families. She took patient education a step further by developing a patient assessment. Based on each patient's score, clinicians know what education to reinforce before discharge. Eckhart participates in the Annual Organ and Tissue Donor Awareness Walk/Run in Philadelphia, and even used money raised through a bake sale to rent a bus to transport colleagues.

Debra Binder, L.P.N.

Nightingale Clinical Practice L.P.N. Award Finalist



Binder is a "jack of all trades" on the labor and delivery unit. Earning her the title are her many roles (operating room scrub nurse, postpartum patient caregiver, vaginal delivery assistant, triage assistant, etc.) and her willingness to jump in. To her patients having C-sections, she is known as the "kind nurse behind the mask," offering support and comfort. Binder recently reunited with the mother and child who she helped deliver in an elevator, 21 years ago. The mother remembered Binder, especially her kindness and care, and said she thinks of her every year on her daughter's birthday.

Charlotte Buckenmyer, M.S., R.N., C.E.N.

Nightingale Nursing Administration Award Finalist



As LVH—Muhlenberg's director of emergency services, Buckenmyer has focused on shortening patients' length of stay. She added a second triage room to accommodate more patients and participates in daily rounding. Working together, Buckenmyer and staff members reduced the time a patient waits to be seen by a triage nurse. You won't find Buckenmyer strapped to her desk; she's often seen inserting IVs and urinary catheters and transporting patients. Her leadership keeps LVH—Muhlenberg nurses at the bedside. In fact, the vacancy rate is zero, and there is a waiting list of nurses who want to work there.

Bonnie Wasilowsky, B.S.P.A.-H.C.A., R.N., C.N.R.N.

Nightingale Clinical Practice R.N. Award Finalist



Having worked here for more than 30 years (mostly nights on a critical care unit), Wasilowsky shares her knowledge with her colleagues on the neuroscience intensive care unit. She helped create a critical incident/stress management team to assist colleagues dealing with the stress of caring for patients with devastating illnesses.

Wasilowsky, a patient care coordinator, led the unit on its transition to 24-hour family presence. She recognized the benefits of having families involved in patients' care and encouraged colleagues to do the same.

Donna Petruccelli, M.S.N., C.R.N.P., C.N.S., C.C.R.N.

Nightingale Advanced Practice R.N. Award Finalist

PSNA Nurse Practice Award Recipient



Petruccelli, the Center for Advanced Heart Failure's clinical coordinator, has dedicated her career to caring for patients with heart failure. She develops comprehensive treatment plans, implements care programs and conducts research. When patients need to be hospitalized, she stays late to check on their progress and is available to family members around the clock. Petruccelli created the Heart Failure Patient

and Family Support Group, chairs the multidisciplinary Heart Failure Task Force which evaluates and recommends changes to care, and developed a Heart Failure/Emergency Department Task Force to promote earlier detection of heart failure in patients.

Carol Balcavage, R.N.

PSNA Nurse as a Global Citizen Award Recipient



It was a plea from her sons that united Balcavage and Mohammed, a 5-year-old Iraqi boy. Her sons, one an officer in the United States Army, told Balcavage about a boy born without an opening to eliminate solid waste. He needed surgery to restore normal bowel function. Balcavage, coordinator of the enterostomal therapy program, knew

this was a routine surgery in the United States, but impossible to find in war-torn Iraq. Balcavage worked to get our health network to sponsor Mohammed's surgery, contacting physicians and clinicians who offered their services at no costs. She arranged for interpreters and an American host family. Mohammed's surgery was a success, and he recently returned to Iraq.

Hope Johnson, M.S.N., R.N., C.N.O.R.

PSNA Nurse Educator Award Recipient



Johnson, an operating room patient care specialist, creatively inspires her colleagues to learn. She developed the "Periop Pals Program" to foster relationships between new and veteran operating room nurses. It was so successful, turnover rates within the operating room dropped from 16 to 4 percent, while morale and job satisfaction also improved. She collaborated with colleagues in other departments including infection

control to improve processes in the operating room. As the co-chair of the Professional Excellence Council's Community Outreach Committee, Johnson organized "Stack the Pack," collecting school supplies for children in Allentown and Bethlehem.

■ Sally Gilotti

Our Magnet Moments

sharing our knowledge

PRESENTATIONS

Center for American Nurses LEAD Summit
Washington, D.C., June 2008

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

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

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

Bonnie Kosman, M.S.N., R.N., N.E.-B.C.

Advancing a Culture of Safety: Staff-Driven, Evidence-Based Practice Approach to Safe Patient Movement (poster)

Nancy Davies-Hathen, R.N., M.S.N., M.Ed., N.E.A.-B.C.

Paulette Kennedy, B.S.N., R.N., N.E.-B.C.

A Strategic Plan for Nursing Advocacy (Or, How a Vacationing Nurse in Las Vegas Tackled the "Nurse Follies" Slot Machine) (poster)

American Association of Heart Failure Nurses

Boston, Mass., June 2008

Donna Petruccelli, B.S.N., M.S.N., C.N.S., C.R.N.P.

An Analysis of Ace-Inhibitor and Angiotensin II Receptor Blocker Use in Hospitalized Heart Failure Patients by Cardiac Specialists Compared with Generalists (poster)

Association of Women's Health, Obstetric and Neonatal Nurses

Los Angeles, Calif., June 2008

Janice Cudlic, R.N.C.

Sandra Berk, R.N.C.

Bar Coding Innovations for Safety (poster)

Joanne Stewart, R.N.C.

Michelle Adams, R.N., C.C.E.

Implementing Crew Resource Management within Perinatal Services: Integrating Many Voices to Accomplish One Mission (poster)

Live from the OR ... It's Operation C-Section (poster)

Pediatric Nursing Annual Conference

Las Vegas, Nev., June 2008

Maryann Godshall, M.S.N., R.N., C.P.N., C.C.R.N.

The Implementation of Family-Centered Care in a Pediatric Department (poster)

The Ramifications of the Childhood Vaccine Hysteria (poster)

American Physical Therapy Association

San Antonio, Texas, June 2008

Sandy Tremblay

Evaluating the "Home Track": Acute Care Rehabilitation of the Total Joint Replacement Patient Returning to Home (poster)

PUBLICATIONS

Annals of Vascular Surgery

June 2008

Paul Cesanek, Nanette Schwann, Eric Wilson, Sallie Urffer, Crystal Maksimik, Susan Nabhan, Joe Ottinger, Jeff Astbury, Yufei Xiang and Martin E. Matsumura

The Effect of beta-Blocker Dosing Strategy on Regulation of Perioperative Heart Rate and Clinical Outcomes in Patients Undergoing Vascular Surgery: A Randomized Comparison

AWARDS

Friends of Nursing Program Receives National Recognition

The abstract, "A Philanthropic Program to Promote Excellence in Nursing," was selected for posting as a 'Magnet Practice Innovation' at the Virginia Henderson International Nursing Library. In addition, an American Nurses Credentialing Center (ANCC) Review Committee selected the submission to receive one of two awards in the category of organizational innovation. The award was presented at the annual Magnet Conference in October 2008 in Salt Lake City, Utah. The submission described our Friends of Nursing program, a philanthropic foundation to recognize and promote excellence in nursing practice, nursing education and nursing research, and to enhance the image of nursing.

CERTIFICATIONS

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

Stephanie Digiovanni

Post-Anesthesia Nursing (C.P.A.N.)

Cheryl Barr

Traci Eichelberger

Emergency Nursing (C.E.N.)

Angela Grether

Timothy Kelly

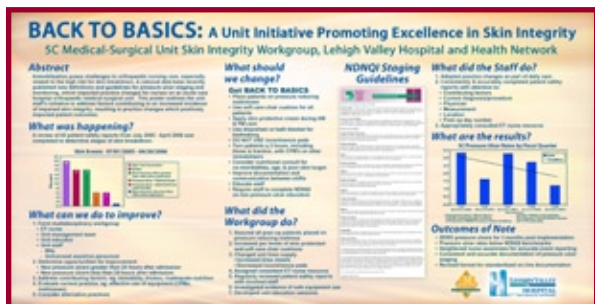
Medical-Surgical Nursing (C.M.S.R.N.)

Brandi Haja

Maryann Rosethal

Margaret Stoudt

Presentation Is National News



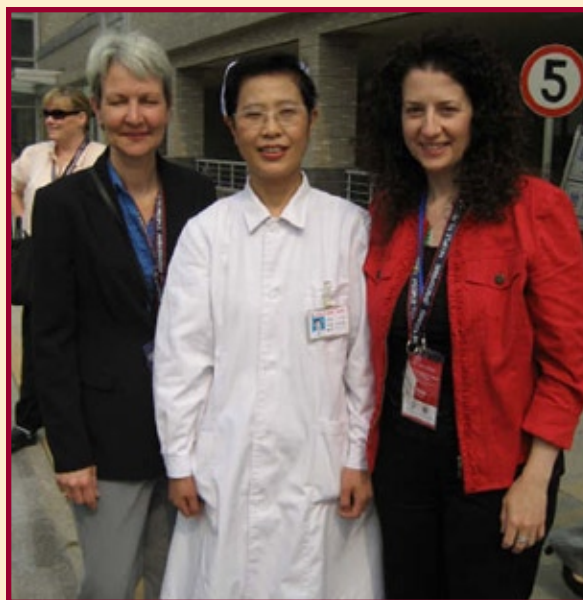
Donna Pilon, R.N., has been a nurse for 25 years. She desired to do something new when Eileen Sacco, R.N., then 5C medical-surgical unit's patient care specialist, encouraged her to write an abstract about the unit's initiative to promote excellence in skin integrity. The abstract was accepted for a poster presentation, which she presented at the National Association of Orthopaedic Nurses conference in San Jose, Calif., in May.

"Eileen saw potential in me that I didn't see in myself," Pilon says. "She helped me take baby steps." Her hard work paid off. A representative from Krames Patient Education saw the poster presentation titled: "Back to Basics: A Unit Initiative Promoting Excellence in Skin Integrity" and was so impressed she asked Pilon to review patient education materials that will be used at health care facilities nationwide. Pilon will be credited as a consultant. "I feel completely re-energized and excited," she says. "Try new things and re-energize the inspiration that's sleeping inside you."

Clinical Services Forums to Begin in January

What have we accomplished during the past year and what challenges lie ahead as we continue to raise the bar on our patient care?

Find out from our senior vice president of clinical services, Terry Capuano, R.N., during her annual Clinical Services Forums. Look for future announcements on specific dates, times and locations.



Uniting Two Worlds

There is no mistaking the differences between the United States and China. However, as China's "traditional" culture becomes more industrialized, the country is facing similar modern American problems. It's why OACIS (Optimizing Advanced Complex Illness Support) nurse Sharyn Lang, R.N. (left), and emergency nurse Cheryl Celia, C.R.N.P. (right, pictured with a Chinese nurse in front of a Beijing hospital), participated in the People to People Citizen Ambassador Program: "Healthy People, Healthy Communities, Through Nursing Contributions."

American and Chinese nurses shared aspects of each other's cultures. One key learning for Lang: the Chinese are struggling with how to care for their aging population. "Typically, a Chinese family also cares for its elderly parents and grandparents," she says. "But as the younger generation moves to the cities, there is less family to care for the elderly. Until recently, the Chinese didn't have much of a grasp on nursing homes." Learn more about the People to People Citizen Ambassador Programs at ambassadorprograms.org.



Nominate a Colleague for a Friends of Nursing Award

**Are you inspired by your colleagues?
Consider nominating them—or an entire
unit—for a Friends of Nursing Award.**

Nomination booklets detailing the award criteria will be available by mid-November from your director or Marla Wehrheim in the Center for Professional Excellence and on the intranet. Nominations are due by 5 p.m. on Jan. 9, 2009.

For more information, contact Kim Hitchings, R.N., Niki Hartman, R.N., or Marla Wehrheim, Center for Professional Excellence, at 610-402-1704.



lvhnurses.org

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