

FALL 2009

Magnet Attractions



An Infusion of Inspiration

Stories to energize you

PAGE 6



INSIDE THIS ISSUE

Caring for Our Community 3

Terry Capuano, R.N., shares how “New Knowledge, Innovations and Improvements” help our patients live longer, healthier lives

Embracing Lean Concepts 4

Nurses share why efficiency positively affects patient outcomes

‘That’s Why I’m a Nurse’ 6

Colleagues share stories that will inspire for years to come

A Walk to Remember 8

Colleagues study the effects of regular ambulation in patients

Our Magnet Moments 10

Colleagues reach professional excellence milestones

Friends of Nursing Nominations Back cover

This year you can do it with a click of the mouse

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: Colleagues share heartwarming stories about exceptional care, on page 6.

Finding Better Ways to Care for Our Community

While our health care world continues to evolve, the Magnet model component “New Knowledge, Innovations and Improvements” is the cornerstone of our current and future success in caring for our community. Each time new knowledge and improvements to care are discovered and incorporated into practice, we help our patients live longer, healthier lives.

Look at the dynamic impact new knowledge has made throughout medical history. Think back to smallpox or polio. Through the incorporation of new knowledge we have virtually eradicated diseases that plagued earlier generations. More recently, our discoveries of new cancer and cardiac disease risk factors led to better disease prevention and ultimately better lives.

As nurses, we’ve made great strides incorporating knowledge, innovations and improvements into our daily work. For example, we use electronic medical records and patient lifts. We set protocols for blood glucose monitoring and ambulation (see story on Page 8). And we play a major role in how our groundbreaking advanced intensive care unit provides high-quality care. All of these innovations aid us in communication, patient care and consultation. Most importantly, we’re improving patient outcomes. That’s what the Magnet model component is all about.



As we continue along our health network’s efficiency journey, the System for Partners in Performance Improvement (SPPI), we will find improved ways to care for our community. As we adopt lean concepts, we will add greater value to the care we deliver (see story on Page 4). For example, case managers in the emergency department appropriately assess patient needs. For some patients, resources and placement in the community instead of in the hospital can be arranged.

This allows them to receive the care they need, and gives us space for a patient who truly needs hospital-based care.

It’s undoubtedly a changing world in health care. We are learning new methodologies that will help us provide the best possible care in the most efficient, value-added way. If you fully embrace New Knowledge, Innovation and Improvement, you’ll always be the best caregiver you can be!

*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 cornerstone of our current and future success in health care is New Knowledge, Innovations and Improvements.

Embracing Lean Concepts in Patient Care

Nurses share why SPPI positively affects patient outcomes

More than a year ago, our health network recognized changes were needed to survive and thrive. So we initiated the System for Partners in Performance Improvement (SPPI) initiative to make work more efficient while enhancing our patient care and improving our bottom line. Front-line clinicians have seen its value to patients. So, in the spirit of Magnet, they hit the road to share their knowledge with colleagues across the country. Here are some of the “ah-ha” moments they’re talking about.

Somebody to Lean On

That’s the title of the oral presentation Kimberly Korner, R.N., director of 6CP, and staff nurse Gina Bender, R.N., made at October’s National Magnet Conference in Louisville, Ken. “Lean principles promote exemplary professional practice,” Korner says. “We’ve been thrilled to share what we’ve learned.”

They explained how Rapid Improvement Events (RIEs) eliminate waste. Our RIEs are week-long events that dissect certain processes within the hospital and then overhaul those processes to be more efficient. The 6CP unit was involved in two RIEs, one that addressed lab utilization and another that looked at the discharge process.

During the discharge RIE, the unit started to do collaborative rounds that include the patient care coordinator, nurses, case worker, physicians’ assistant and physician. The “ah-ha” moment came when everyone realized that not only does collaborative rounding save time and improve patient care, but patients like it too. “Seeing their care team in one place instills confidence,” Korner says.

The lab utilization RIE had a similar outcome. By creating consistency and an understanding of the lab order process, this

The a-ha moment —Jill Peoples, R.N., is able to spend more time with patients now that supply closets have a standardized organization system.





RIE team was able to reduce unnecessary “stat” orders, patient volume during peak hours and errors by 50 percent. The process improved patient satisfaction by providing timelier test results with less need for duplicate specimen draws. “Now, our patients have the option to have specimens drawn when they wake up during the night, versus being woken first thing in the morning,” Korner says. “This spreads out lab workload and allows our patients to get the rest they need.”

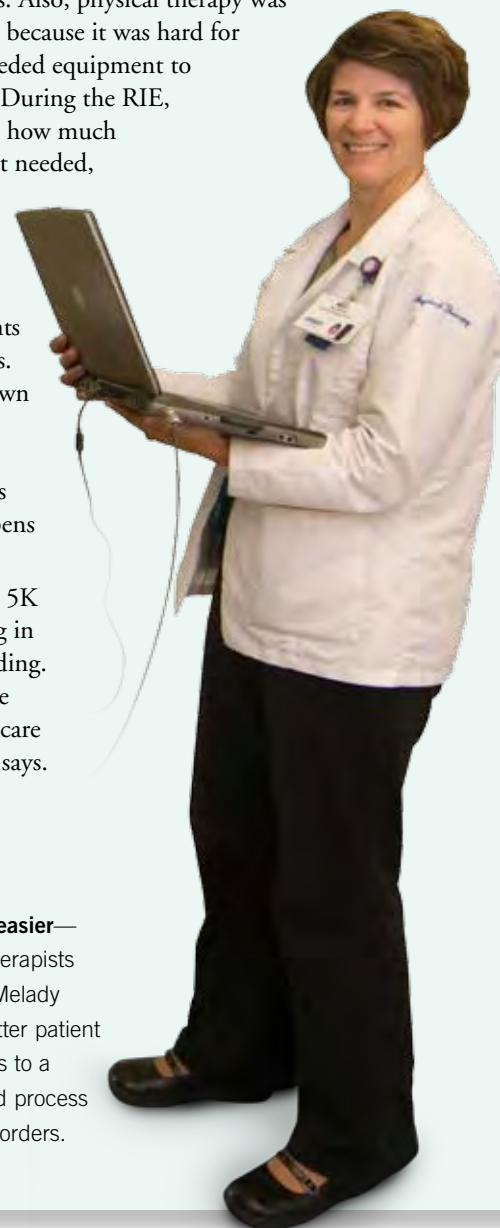
‘Now That We’re Leaner, We Have More Time at the Bedside’

That’s the message Jill Peoples, R.N., delivered at the Academy of Medical-Surgical Nurses’ (AMSN) 18th Annual Convention in Washington, D.C. Her unit, 5K, participated in three network RIEs. “During tough economic times, it’s important we help the health network in any way we can,” she says. “By operating more leanly, we’re spending more time with patients.”

Case in point: The unit conducted a 6S (an internationally recognized method for organizing workspace) for their supply closets. In fact, the same organization system is now implemented throughout the health network. That means even if nurses rotate from floor to floor, they can easily locate the supplies they need, which gets them back to the bedside much more quickly and aids patient care in emergencies.

Another example: Many patients admitted to the unit did not have activity orders. Also, physical therapy was sometimes delayed because it was hard for staff to find the needed equipment to facilitate mobility. During the RIE, the team evaluated how much equipment the unit needed, then cleaned, stocked and labeled the unit’s closet accordingly. And now, all patients have activity orders. “We’ve always known physical activity improves patient outcomes,” Peoples says. “Now it happens consistently.”

Like Korner’s 6CP, 5K is also participating in collaborative rounding. “All of our RIEs are improving patient care and flow,” Peoples says. “It’s a win-win.”



Making it easier—

Physical therapists like Sheri Melady provide better patient care thanks to a streamlined process for activity orders.

NEW KNOWLEDGE,
INNOVATIONS AND
IMPROVEMENTS

MAGNET EXPECTATION:

Improvements in practice are the result of nurses’ participation in architecture and space design.

'This is Why I Do What I Do'



Inspirational moments go a long way when you're having a tough day

Being a caregiver can be mentally, physically and emotionally grueling. That's why you cherish the extraordinary moments that make you remember why you became a caregiver—and you likely tell your colleagues about those experiences too.

Inspirational stories keep us energized. That's why we're placing them (told by you, of course!) on our Center for Professional Excellence intranet page (lvh.com). The collection starts with entries from the "Reflections of Magnet Care" contest (see sidebar). Prepare for an infusion of inspiration! Added to this collection will be the following story from the emergency department's (ED's) InspirED contest, as told by Linda Ingaglio, R.N.

A Witness to Sincere Human Emotions

Working as a nurse can be draining, especially in the ED. Patient turnover is rapid, leaving little time for those warm, fuzzy moments. However, on one particular day, an experience reminded me of why I do what I do.

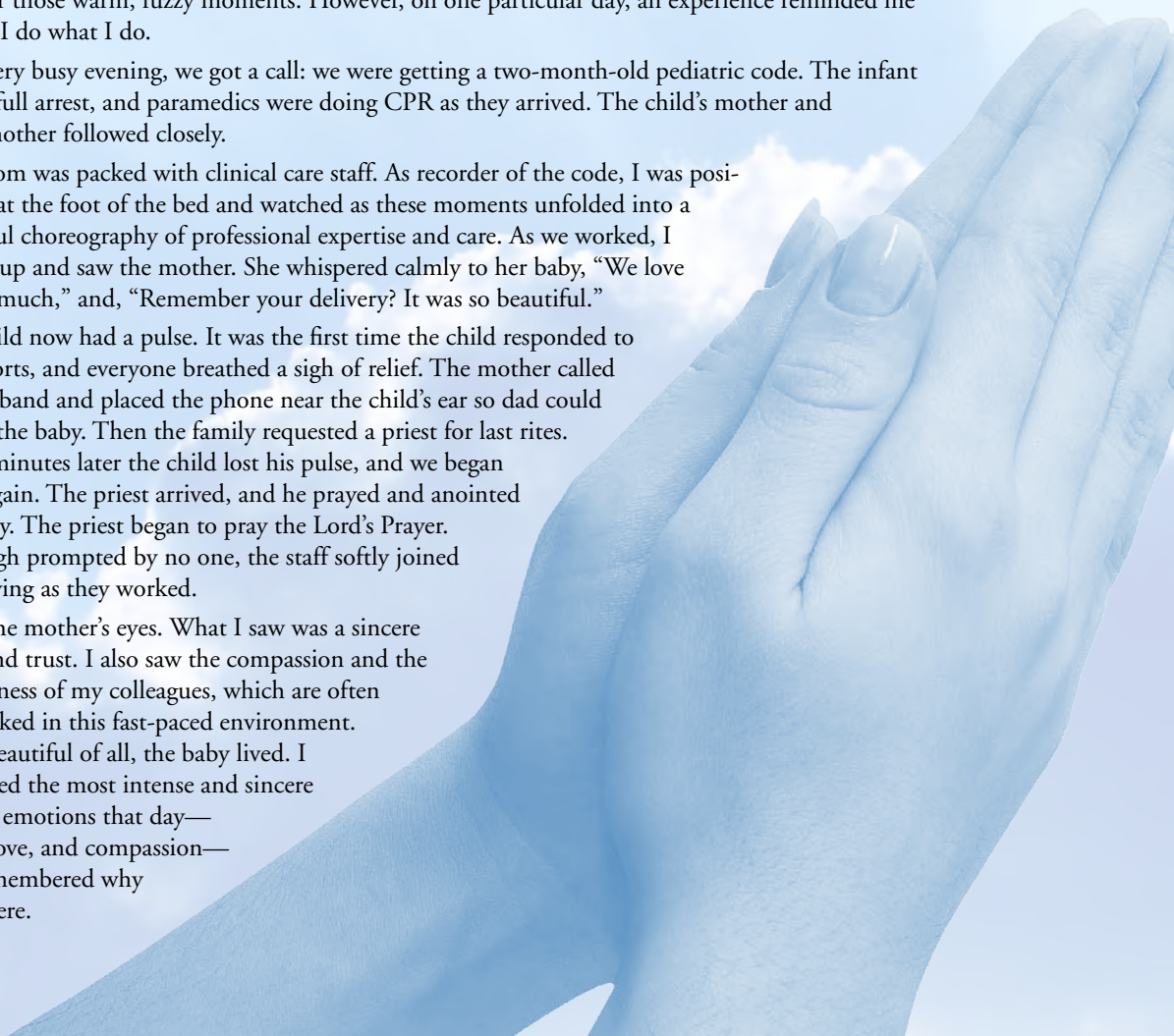
On a very busy evening, we got a call: we were getting a two-month-old pediatric code. The infant was in full arrest, and paramedics were doing CPR as they arrived. The child's mother and grandmother followed closely.

The room was packed with clinical care staff. As recorder of the code, I was positioned at the foot of the bed and watched as these moments unfolded into a beautiful choreography of professional expertise and care. As we worked, I looked up and saw the mother. She whispered calmly to her baby, "We love you so much," and, "Remember your delivery? It was so beautiful."

The child now had a pulse. It was the first time the child responded to our efforts, and everyone breathed a sigh of relief. The mother called her husband and placed the phone near the child's ear so dad could talk to the baby. Then the family requested a priest for last rites.

A few minutes later the child lost his pulse, and we began CPR again. The priest arrived, and he prayed and anointed the baby. The priest began to pray the Lord's Prayer. Although prompted by no one, the staff softly joined in, praying as they worked.

I met the mother's eyes. What I saw was a sincere hope and trust. I also saw the compassion and the humanness of my colleagues, which are often overlooked in this fast-paced environment. Most beautiful of all, the baby lived. I witnessed the most intense and sincere human emotions that day—hope, love, and compassion—and remembered why I was here.



Reflections of Magnet Care

This year you submitted entries for the “Reflections of Magnet Care” contest. The top entries (see the snippets below) showcase the kind of care we’re proud to say we deliver. Read the full entries on the Center for Professional Excellence intranet page.

The Little Boy Who Changed My Life

Paulette Kennedy, R.N., Director, IPCU and 4CP

Journey back to a day in 1992 when Kennedy met and cared for a 6-year-old-boy who was the sole family survivor of a horrific car crash. Fast-forward to today and find out how that “boy” (now a college graduate!) is doing. Learn how and why the pair has kept in touch.

A Wedding to Remember

Susan Eckhart, R.N., Patient Care Coordinator, 5B

Sometimes what seems impossible is possible. That includes making sure a patient sees her daughter get married, even though she couldn’t leave the hospital. Pulling off this “wedding of a lifetime” took determination and passion. See how the clinical care staff made this special day possible, and learn why they’ll remember it forever.

The Sweetest of Wine

Beth Kessler, R.N., Director, 6T

When Kessler’s colleague brought her terminally ill child home to die, these prolific words were shared: “You saw this beautiful soul arrive in this world and now it is time to shepherd him home. Life sometimes hands you sour grapes, please go and make the sweetest of wine out of all of this.” Learn how Kessler watches this colleague make the sweetest of wine every day by caring for patients and bringing peace to unresolved problems.



Above: **Bear hug**—Years ago, a young patient gave Paulette Kennedy, R.N., this teddy bear. She still has a special bond with that patient today.

Below: **Special day**—Susan Eckhart, R.N., (head of bed) knew her patient had to see her daughter get married, so she found a way to make it happen—even though she couldn’t leave the hospital.

'Let's Go for a Walk'

Colleagues study the effects of medical patients who receive regular walks

"You don't see as many patients walking the halls these days." The statement, made at a length-of-stay meeting, got Tami Meltsch, R.N., thinking. Why was it happening?

Unlike surgical patients, protocols don't require the ambulation of medical patients. Consequently, fewer patients were walking the hallways. "Today's nurses and technical partners have more responsibilities," says Meltsch, director of Lehigh Valley Hospital—Muhlenberg's 7T. "While we recognize the benefits of ambulation, it has become a secondary concern based on priorities."

Wanting to ensure medical patients receive the best possible care, Meltsch joined patient care coordinator Miriam Ramos-Martinez, R.N., to review literature about ambulating medical patients. Surprisingly, there weren't many out there.

That's when they decided to conduct their own research project. "We want to determine if an increase in ambulation for medical patients decreases length of stay and prevents them from having to be transferred to a different level of care, like a rehabilitation facility, after they are discharged," Meltsch says.

Funded by a grant from the Carl and Anne Anderson Trust, two technical partners ambulate all patients on 5T, 6T and 7T during the day shift, who are not bed-bound. Both technical partners received education in mobility. "It helps them follow the plan of care so they know how far to walk and recognize when someone has walked enough," Ramos-Martinez says.

The technical partners ambulate between 40 and 50 patients twice a day. They document the length of the walk, patient comments and if an assistive device (such as a walker) was used. They also share the information with nurses and physical therapists who use it to determine the best treatment.

Although data is still being collected, early results show patients are walking farther than expected. "Best of all, patients are looking forward to their walk," Ramos-Martinez says.

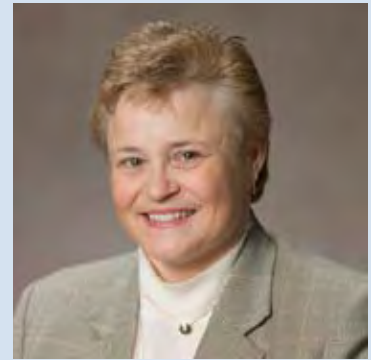
After data is analyzed, Meltsch and Ramos-Martinez hope to publish and present the results. More importantly, if ambulation is found to improve patient care, they hope to develop network-wide awareness to make ambulation a greater priority. "Our goal is to maintain our medical patients' functional status," Ramos-Martinez says. "We want them to leave the hospital in the same or better shape than when they arrived."



Taking a stroll—As part of a research study, technical partners Niki Rajch and Amanda Confer ambulate between 40 and 50 medical patients twice a day to determine if it decreases length of stay and improves outcomes.



As Nurses We Are Accountable to the Profession



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

Nursing research, evidence-based practice, and quality improvement are key aspects of the Magnet model component: “New Knowledge, Innovations, and Improvements.” At Lehigh Valley Health Network, our nurses embrace this part of their work. They are passionate about finding ways to improve patient care.

As I mentioned in my last column, the structure of our nursing research department recently changed. This change, which integrates a sector of the nursing research department into the organizational research department, will assist in the expansion of our capabilities and ensure alignment with the health network’s strategic priorities. Our nurses, through their research, will continue to play a key role in the future of patient care.

Patient care services is committed to transforming and translating the best evidence and knowledge to our everyday practices. Nurses can lead the charge by generating and translating knowledge

associated with safer health care practices.¹ That’s exactly what Tami Meltsch, R.N., is doing with her research on ambulating medical patients. Across the health network, the promotion of a safe, effective, efficient, and patient-centered care environment will establish a strong foundation for quality outcomes now and into the future.

As nurses, we are accountable to our patients and the profession of nursing, so stay involved in the research process, even if you’re not the one doing the research. For example, never avoid asking a question—it’s likely your colleagues have similar questions. Stay tuned for an upcoming evidence-based practice workshop. You can travel the path to new knowledge, innovations and improvements by contacting me or your clinical leadership team.

1. Endo, E., Miyahara, T. Suzuki, S. Ohmasa, T. (2005). Partnering of researcher and practicing nurses for transformative nursing. *Nursing Science Quarterly*, 18, 138-145.

NEW KNOWLEDGE,
INNOVATIONS AND
IMPROVEMENTS

MAGNET EXPECTATION:

Translation of new knowledge into nursing practice has affected patient outcomes.

sharing our knowledge

PRESENTATIONS

Poster

National Nursing Staff Development Organization Annual Convention

Philadelphia, Pa., July 2009

Gwenis Browning, B.S.N., R.N., C.N.O.R.

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

You've Got A Friend In Me: A Mentorship Program for New and Experienced Staff Members

Oral

National Nursing Staff Development Organization Annual Convention

Philadelphia, Pa., July 2009

Kristina Holleran, B.S.N., R.N., C.M.S.R.N.

Donna Kalp, B.S.N., R.N., C.M.S.R.N.

New Graduate...Night Shift...Who Ya Gonna Call? The Clinical Resource Specialist!

Tracie Heckman, M.S.N., R.N., C.M.S.R.N.

Mary Jean Potylycki, M.S.N., R.N.-B.C.

Here's to Your Future: A Mentorship Program for Staff Development Specialists

Certifications

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

Marilyn F. Barrell

Kai Lindsey Bortz

Donna R. Farley

Certifications cont'd

Tracy Lynn Gemberling

Marla Bertha McNally

Dianne J. Niebell

Michele L. Norton

Jennifer Louise Paul

Chantaporn Ratana

Rebecca M. Silliman

Emily T. Sorrentino

Pamela S. Verosky

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

Karen M. Christman

Matthew N. Cole

Emergency Nursing (C.E.N.)

Sandra J. Sabatini

Progressive Care Nursing (P.C.C.N.)

Joan M. Shook

Lori L. Tyson

Ambulatory Care Nursing (R.N., B.C.)

Kelli A. Brown

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

Sarah Kate Rinker

Wound Specialist (C.W.S.)

Holly C. Herbst



Three's a charm

Donna Petrucci, C.R.N.P., recently received the Clinical Excellence in Nursing Award from the Heart Failure Society of America. She's the third person to ever receive the award, recognizing her passion and expertise in caring for patients and their families. Among Petrucci's many roles are: clinical coordinator of the Center for Advanced Heart Failure, chair of the health network's Heart Failure Task Force and founder of the heart failure patient and family support group.



School Supplies Spread Smiles

Hope Johnson, R.N., who spearheaded this year's Stack the Pack effort, said the experience of dropping off school supplies to Colonial Academy, which provides programs for students who need specialized education and behavioral health services, was absolutely phenomenal. "The smiles on their faces were priceless," Johnson says. The Stack the Pack donation is coordinated annually by the Professional Excellence Council's Community Outreach Committee. This year, more than 40 departments across the network contributed supplies such as calculators, compasses, colored pencils and crayons. Of special note, the Invasive Cardiology Group at Lehigh Valley Hospital-Muhlenberg donated the \$500 they were awarded for the 2009 Friends of Nursing Patient Satisfaction Award for Ambulatory Services to the cause. Much of the money went toward a "Califone CardMaster," a portable audio card reader that gives students with autism much-needed speaking and reading skills practice.

A Breath of Fresh Air

Our colleagues in respiratory care services held a widely attended, multidisciplinary conference in September. Called Clinical Insights in Respiratory Care, nearly 150 participants from across the state learned about the latest advances in respiratory care, including high frequency jet ventilation, waveform interpretation, ventilator imaging, pharmacological management and the role of respiratory therapists in post-operative care of open-heart surgery patients. Registered respiratory therapists, nurses, physicians, pharmacists and other clinical care colleagues participated in the educational conference.



Nursing Excellence

Three of our nurses were finalists for the Nightingale Awards of Pa. this year. Erin Brazil, an L.P.N. in the Regional Burn Center, June Kelly, an R.N. on the interventional progressive coronary unit at Lehigh Valley Hospital-Cedar Crest, and Megan Snyder, R.N., a patient care coordinator on Lehigh Valley Hospital-Muhlenberg's 6T were all honored during the annual statewide awards presentation. For almost 20 years, the Nightingale Awards of Pennsylvania have been recognizing and honoring exceptional nurses who practice in the Commonwealth.



Erin Brazil, L.P.N.



June Kelly, R.N.



Megan Snyder, R.N.

Magnet Attractions is a magazine
for clinical services staff of

**LEHIGH VALLEY
HEALTH NETWORK**

Marketing and Public Affairs
P.O. Box 689 • Allentown, PA

EDITORIAL ADVISORS

Terry Capuano, R.N.
Kim Hitchings, R.N.

EDITOR-IN-CHIEF

Pamela Maurer

EDITOR/WRITER

Amy Koch

DESIGN

Paula Horvath Yoo

PHOTOGRAPHY

Scott Dornblaser
Amico Studios

PRODUCTION ASSISTANT

Cory Prohaska

 After reading, please recycle this magazine.

Intranet: lvh.com • Internet: lvhn.org

Non-Profit Org.

Postage

PAID

Allentown, PA

Permit #1922

Friends of Nursing Award Nominations Now Online

We asked for your feedback, and we heard you loud and clear. Thanks to your input, the submission process for Friends of Nursing award nominations is now a whole lot easier!

With the click of a button you can make your nominations on the health network's intranet at lvh.com. You'll find the nomination information under the "What's New" box, beginning Oct. 5. Nominations are due by Dec. 11. Don't forget to save the date: Next year's Friends of Nursing Awards will be held 5 p.m., Thur., April 29.

