

March 2005

# magnetattractions

How We Attract and Retain the Best

LEHIGH VALLEY  
HOSPITAL  
AND HEALTH NETWORK



What  
Makes a  
Leader?

*Find out in  
this issue*



## 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.



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See if you can guess  
on pages 11-12.





# We Can All Be Leaders

**You don't have to work in a corner office to be a good leader.** A leader is anyone who radiates with creativity, intelligence, professionalism, empathy and self-awareness. A leader is able to communicate, collaborate, take risks and inspire others.

The American Nurses Credentialing Center (ANCC) recognized us as a national leader when it designated us a Magnet hospital. The ANCC considers leadership so important it is one of its 14 Forces of Magnetism, and it is the theme of this issue of *Magnet Attractions*, appropriate because we've taken our publication to a new professional level. Our new look and vibrant color is just one testament to raising the bar and leading in everything we do!

And believe me, we couldn't lead without the support of our top executive team, Elliot Sussman, M.D., Lou Liebhaver and Ron Swinfard, M.D. We can accomplish great things because they support our ideas and value our voice. They look to us in clinical services to define and guide the care we provide to patients and do so in collaboration with physician colleagues and a multidisciplinary team.

**We're not only recognized here, but around the globe, too.** We host consultation days to teach clinicians from other hospitals how to create Magnet-quality processes and programs. We're among the first in the country to use evidence-based practice, and we're among four hospitals nationwide to receive Robert Wood Johnson Foundation funds to research palliative care, a way to relieve suffering and improve quality of life for patients and their families.

Of course, we don't brag about our excellence. True leaders set their egos aside. They are modest and self-effacing at work and on their own time. We see these qualities in people like Molly Sebastian, R.N., who is recognized statewide and inspires excellence, and in nurses like Anne Brown, R.N., and Mary-Jo Kolde, R.N., who used their PTO to care for children and mentor nurses in Thailand.

**True leaders have personal humility and professional will,** and they spread our good word by doing good work and telling good stories. We see these qualities in those who present nationally and internationally—and guess what, the initials after their names say R.N., R.T. and R.Ph. We are quiet, gentle leaders, but we always get noticed—because we shine with Magnetism.

A handwritten signature in black ink that reads "Terry A. Capuano".

Terry A. Capuano, R.N.  
Senior Vice President, Clinical Services

Look around you. There are nursing  
leaders everywhere, improving  
patient care through research,  
mentoring colleagues and reaching  
out to our community and world.

## The Force Is Leadership

As nursing leaders we exemplify  
Quality of Clinical Leadership,  
a Force of Magnetism.  
We are knowledgeable, strong,  
risk-taking clinicians at all levels,  
who follow a well-articulated,  
strategic and visionary philosophy  
in day-to-day operations.  
We advocate for and support  
our colleagues and patients.  
It's just one more reason  
we are Magnet.

# A Model for Magnet

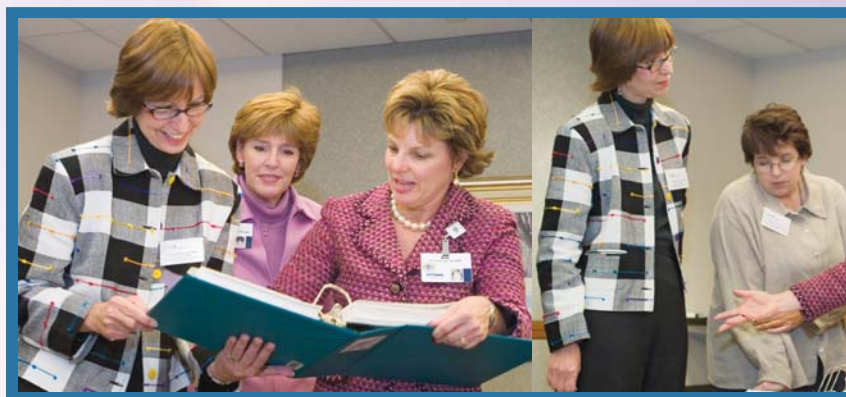
**Hospitals around the country (and Down Under!) are asking for our guidance on how to create a Magnet status environment**

**A**lmost every day, administrators from hospitals nationwide call LVHHN to ask, "How do you do it?" They want to know what makes us a Magnet hospital—one of only 135 in the country. In fact, over the past year, the Center for Professional Excellence staff has advised administrators from more than 50 hospitals across the country through phone conversations and e-mail.

This fall our Professional Nurse Council took our leadership role a step further by hosting the first formal consultation day, "Creating an Environment of Magnetism." Staff members, who know our programs firsthand, showed eight nurses and administrators from St. Mary Medical Center in Langhorne, Pa., and Magee-

Womens Hospital in Pittsburgh just how we do it. Through the 14 Forces of Magnetism, they highlighted the programs that make us Magnet worthy, including conducting research through our own school (the Bedside Scientist Institute) and meeting patient needs through collaborative rounds.

Participants were wide-eyed as Paulette Kennedy, chairperson of the council's reward and recognition committee, described our extensive Friends of Nursing program—which showcases the image of nursing and its integral role in patient care. She talked about the annual awards and passed around the pewter Nightingale lamp given to recipients. "I would like to see a rewards program like this at our hospital," says Lisa Kearns, R.N., of







**Internationally known**—Lehigh Valley Hospital and Health Network is known even Down Under. Sue O'Neill (right), executive director of nursing at Flinders Medical Center in Southern Australia, selected LVHHN in her search to visit a Magnet hospital. "Lehigh Valley Hospital has a great reputation because of its Magnet status and professional practice model," O'Neill says. Her hospital is planning to apply for Magnet status. Achieving the status would make Flinders Medical Center the only Magnet hospital in Australia. O'Neill spent two days with clinical services staff, learning about our programs and processes. At the Burn Center she met with director Jackie Fenicle, R.N. (left), and patient care specialist Patrick Pagella, R.N. (center).

St. Mary Medical Center. Her colleague, Debbie Carey, R.N., says they reward each other with small prizes, but was impressed with our annual awards, which includes a monetary award for recipients and a gala celebration for all staff.

They learned how the 20-year-old program, sustained by philanthropy, also supports professional development through attendance at regional and national conferences, nursing research, advocacy programs for nursing, and scholarships to recruit more nurses and build the profession.

After speaking with participants, Kennedy says, "They were impressed with how much support we have from the community and our colleagues from all levels." The same is true for

nurses she meets while presenting the Friends of Nursing program at national conferences.

St. Mary Medical Center and Magee-Womens Hospital are beginning the timely process of applying for Magnet status. "I heard Kim Hitchings (manager of the Center for Professional Excellence) speak at a conference about Lehigh Valley Hospital's collaboration with the community to provide great resources for nurses to improve patient care," says Patty Gilbert, director of nursing systems and Magnet coordinator for St. Mary Medical Center. "So that's why I came to you for guidance." St. Mary has successful programs, but the consultation day gave her ideas on how to highlight them in their Magnet application.

"I'm most impressed with your culture and commitment to nursing, and the way your nurses lead initiatives," says Connie Feiler, director of education and Magnet coordinator at Magee-Womens Hospital. For instance, the LVHHN R.N. Advisory Council gives nurses a voice in developing new programs to enhance their professional development. "I want to show our administration the value in having staff lead initiatives," she says.

The Professional Nurse Council plans to host more consultation days. It's likely the presentations will expand to include new ideas and programs that make us national and international clinical leaders and support LVHHN's application for Magnet re-designation come 2006.

Sally Gilotti



In the first photo of this series, Kim Hitchings, R.N. (right), manager for the Center for Professional Excellence, talks with Connie Feiler (left) of Magee Women's Hospital in Pittsburgh and administrator Carol Torchen, R.N. (center), about our Magnet practices, detailed in our 3,000-page application from 2002. In the other photos, Hitchings also is talking with Barbara Laurence, R.N., clinical nurse specialist from Magee. This year we will be gathering information for our new application for Magnet re-designation, which we'll submit in January 2006.

# Leader of the Pack

**At LVHHN and on the road, Molly Sebastian, R.N., leads others to reach their potential**

Whether at work or at play, nursing administrator Molly Sebastian, R.N., finds opportunities to motivate and mentor others. In the hospital, she encourages her colleagues like (from left) Vickie Trexler, R.N., and Jeremy Benninger, R.N., to continue learning. On the road, she cheers on fellow runners at events like the Christmas City Run.

Her nursing leadership is among the best in the state. She recently was selected to receive the Pennsylvania State Nurses Association Administration-Management Award and was one of three finalists chosen for the Nightingale of Pennsylvania Nursing Administration Award.



## @work...

Sebastian frequently visits the 11 units she oversees as an administrator and asks colleagues, “What’s the next step?” She encourages colleagues to return to school for an advanced degree or pursue a certification in their specialty. Sebastian feels a responsibility to prepare the next generation of nurses and recognizes education is important to providing the best patient care.

When they say a lack of time or money keeps them from taking the next step, Sebastian quickly refers them to LVHHN’s tuition reimbursement and flexible scheduling programs. And, then, she tells her story. While working

nights as a staff nurse and a shift supervisor on the acute coronary unit, and raising three teenagers, she returned to school to earn a bachelor’s degree in nursing at Cedar Crest College and then became a unit director. “I was at the kitchen table studying science while my son also was studying sophomore biology and chemistry,” Sebastian says. When all of her children were in college, she hit the books too, earning a master’s degree from Villanova University.

In addition to improving herself and others, Sebastian is helping to improve processes. She has led her colleagues

through the implementation of the tele-intensivist program, medication bar coding, a computerized physician ordering system and palliative care (see Cathy Fuhrman’s Nursing Voice column on page 15.) Her colleagues respond positively to her leadership and advice. “I understand the job of being a nurse,” she says. “I think people know I’m hardworking, fair and honest.”





## @play...

Sebastian was 33 when she first laced up her running shoes and easily jogged a quarter-mile around a track. “I was shocked I could do it without falling over,” she says. So, she started running with her husband, Paul, allowing them time to catch up during their hectic schedules.

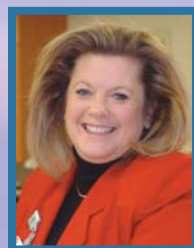
Now, Sebastian, a nursing administrator, is running faster and farther. She has four marathons under her sneakers and is ready to tackle another in Germany this fall. Keeping her moving is her constant desire to improve. In fact, she keeps a daily journal, logging her distance, speed, the weather and

her thoughts. “It helps me evaluate my performance,” she says. “I like to do better each time, even if it’s a second.”

She passes that attitude on to new runners as a mentor for First Strides, a beginning walking and running workshop for women. She also has become an inspiration for her son, Steve, who joined her on two marathons, and her daughter, Clare, who recently started competing. Her 9-year-old grandson, Luke, even runs. “I’m not intimidating,” Sebastian says. “I encourage other women and remind them, I’m not a typical runner.”

Sally Gilotti

## Leading Is Recognizing



During her 25-year career, Burn Center director Jackie Fenicle says she has been

exposed to many good leaders. Standing out among them is nursing administrator Molly Sebastian, R.N. That’s why she nominated Sebastian for both the Pennsylvania State Nurses Association Administration-Management Award and the Nightingale Nursing Administration Award. Recognizing great leadership makes Fenicle a great leader, too. She has learned from Sebastian to make time to listen to colleagues, encourage them to continue learning and remain positive. Fenicle herself is the recipient of the 2004 Friends of Nursing Terry Ann Capuano Leadership Award.

Learn how you can recognize your colleagues, too, in the March issue of *CheckUp*.

# International

**Anne Brown, R.N., and Mary-Jo Kolde, R.N., spent their vacation caring for patients in Thailand. Here, they share their journals of the experience.**



Mary-Jo Kolde, R.N. (left), and Anne Brown, R.N., didn't spend their vacations basking in the beach sun. They endured a 24-hour flight to Thailand, and then a daily one-hour bus ride to a remote hospital to offer free corrective eye, cleft lip, cleft palate and burn surgeries.

Brown and Kolde's passion to care for children whose families otherwise could not afford the surgeries was so strong they paid for most of their \$1,000 plane tickets.

LVHHN helped with Friends of Nursing grants, recognizing their dedication and the importance of being nursing leaders who jump at the chance to help others, learn and teach. Brown, an operating room nurse at LVH-17th and Chew, and Kolde, a post-ambulatory care unit nurse, did just that in a foreign culture, even with limited communication and challenging working conditions. They were northwest of Bangkok, far from where the tsunami struck Thailand's southwestern border in January.

A first trip for Brown and second for Kolde, they joined more than 50 American nurses and doctors (10 from LVHHN) to support Healing the Children, a nonprofit organization that provides free health care for children in poor countries.



*"We are up at 6 a.m., breakfast at 6:30 a.m., and then on the bus for the 1½-hour ride to the hospital ... Last night we didn't get the patient out of the recovery room until 10 p.m., which meant we didn't get back to our rooms until 11:30 p.m. We are exhausted every night." — Brown*



*"I want to cry when I see the children in bed with their parents lying next to them, waiting for the entourage of doctors and nurses to see them, all hoping they will be chosen to have their much needed surgery done... but I try my best to smile and bow in greeting with the traditional Thai 'sawaddee kha' (good morning)." — Brown*

Before arriving, the team signed a disclaimer, agreeing to embrace the standards of care in Thailand. The team performed numerous surgeries a day, treating more than 100 children.



*"We brought most of our own supplies and reused most everything. Oxygen masks were washed every night. Doses of 10 milligrams of morphine were carefully divided into 1-milligram doses to share with as many children as possible." — Brown*

Families made supreme efforts to get to the hospital. Some walked great distances because they had no money for transportation, and others traveled by boats and canoes.





# Leaders



*"A frightened 4-year-old girl clutched her mother even tighter as I approached. At her mother's cue, she promptly pressed her tiny hands together, bowed her head and properly greeted me with 'sawaddee kha.' Her shiny black hair was combed neatly from her face, her complexion smooth and caramel brown, sadly interrupted by the wide cleft in her upper lip leading to an equally wide cleft palate. As this mother placed her now tearful daughter on the operating room table and into our care, she seemed very hesitant to leave. I tried to reassure her we would take very good care of her young child, but she shook her hand in my face as if to say I didn't understand. She took me by my arm, and in her native language, translating with her expressive eyes, body language and hand motions, expressed her deep gratitude for the gift of healing and wholeness we were about to give her young daughter." —Kolde*

Thai nurses and nursing students helped interpret to children and their parents. Brown, Kolde and other American nurses mentored them, answering numerous questions about American medical procedures and equipment.



*"The nurses are so cute here. They wear tailored white uniforms with tan hose, white nylon anklets and white 1½-inch-heeled pump shoes. It's a new profession for women. These young nurses are very willing to learn, and yesterday I spent the afternoon teaching them about medications in the recovery room." —Brown*

*"We celebrated that all the children screened for surgery will have their surgery. We will have given them the greatest gift, a sense of health and wholeness." —Kolde*

The team was invited to meet Thailand's Princess Maha Chakri Sirindhorn at the royal palace, a rare leadership opportunity for anyone. They were accompanied by Thai nurses, selected from a lottery. When the princess arrived, they rose to greet her, as instructed.

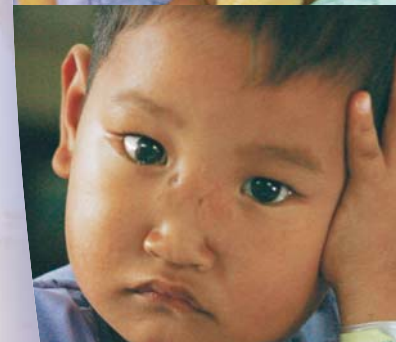


*"I am immediately taken aback by her gracious, genuine, unaffected manner. She is dressed in a simple, but elegant lavender suit, plain low-heeled black shoes, casual hairstyle and very little makeup. There is no overblown ego here, and I comprehend why she is so loved by the Thai people. After the presentations and her speech of thanks to us, she spontaneously moves to allow a group photo of our team with her Royal Highness. Yes, it has been a tremendous honor...a memory I will cherish forever." —Kolde*

*Also on the trip from LVHNN were: leader Raj Chowdary, M.D., Elizabeth Abrams, C.R.N.A., Ruth Chaplis, R.N., resident Johnny Chung, M.D., Chris Landis, R.N., Cindy McEkwain, R.N., Evelyn Ochar, C.R.N.A., and Dana Robinson, R.N.*

You lent a hand overseas, too — In the aftermath of the Asian tsunami disaster, many nursing colleagues came to the Professional Nurse Council (PNC) asking to help. As a result, the PNC ran a January fund drive, collecting \$2,200 to benefit tsunami victims through the American Red Cross and LVHNN.

■ Sally Gilotti





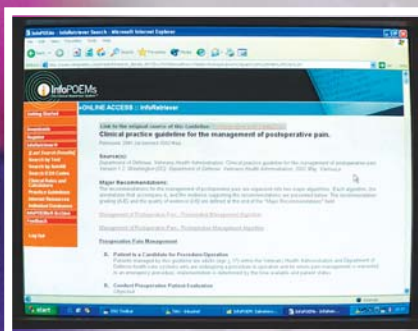
# Evidence at Your Fingertips

**How you can become a leader in uncovering the best evidence**



**E**ileen Sacco, R.N., remembers the waist-high stack of journals sitting to her side as she searched for the best evidence on treating prostectomy patients. “It took many hours,” she says, “and I knew there had to be an easier way.”

She discovered that easier way from colleague Alexander Rae-Grant, M.D., who invited Sacco to attend an evidenced-based practice conference at the University of Virginia. Now, Sacco is leading an effort to make LVHHN one of the nation's only hospitals to bring clinical evidence to all nursing professionals with the click of a mouse. “Our goal is teaching every nurse how to review evidence to ensure we are delivering the very best care,” Sacco says.



*With the push of a button, Eileen Sacco, R.N. (right) helps April Gebler, R.N., find the latest evidence on pain management in post surgery patients.*

## Know where to look

“Nobody can read every journal,” says Sacco, a patient care specialist on LVH—Cedar Crest’s 5B and 5C. But a new hospital Web site can help you find the right information quicker. (Get there by clicking on “CAPOE” through Lastword.) Included are links to databases of current clinical evidence (you can search most for free), professional organizations, patient education information and other valuable tools.



## Know your levels

Once you find the evidence, you need to know how thorough it is. Some sites will document their evidence with a number (1 being the best) that corresponds to the quality of the research. Below are numbers adapted from the Centre for Evidence-Based Medicine at Oxford University. (For the most up-to-date levels, visit [www.cebm.net/levels\\_of\\_evidence.asp](http://www.cebm.net/levels_of_evidence.asp).)

### 1a — Systematic reviews of randomized controlled trials

- Reviews of multiple studies in which participants don't know which patients used which treatment until the study's conclusion

### 1b — Individual randomized controlled trials

### 2a — Systematic reviews of cohort studies

- Reviews of multiple studies that compare outcomes in different groups of people; for example, people who smoke vs. people who don't

### 2b — Individual cohort studies

### 3a — Systematic review of case-control studies

- Reviews of multiple studies that compare people with a specific condition (prostate cancer) to those without the condition

### 3b — Individual case-control studies

### 4 — Case series — A series of reports comparing different patient cases over time

### 5 — Expert opinion — Consultations with people knowledgeable of a particular condition or diagnosis

"Ideally, the highest level is the best for your patients," says nurse research specialist Pat Matula, R.N. "But don't be fooled by the levels. Some studies might only rate a 3, but can be very solid and helpful."

## Know who to ask

Your unit's patient care specialist (PCS) is your perfect mentor to help you lead the quest for evidence. Soon all PCSs will be schooled in a four-part evidence-based practice course covering topics like how to conduct evidence searches and how to review evidence. "The nurses at the bedside are the experts in clinical practice, because they see their patients every day," Sacco says, "and we're here to help them become the best evidence-based practitioners."

## Know what's next

Nurses and physicians in neurosciences and family practice are piloting a simple-to-use computer software program that promises to make searching for best practice even faster. Called InfoPOEMs, it searches databases nationwide, finds the highest level of evidence at the push of a button and identifies when more research into a topic is needed. "It also can be used as a patient teaching tool," Sacco says. "I can show a heart patient, for example, that dieting, exercising and quitting smoking can lower his risk for repeat cardiovascular problems by 15 percent." If it's implemented, we'll be the first hospital in the nation to put the system (or one like it) on a computer in every nursing unit.

**Want to go to research school?** To enroll in a Bedside Scientist Institute class or to enroll in an evidence-based practice class, call Pat Matula, R.N., at 610-402-1826.

*Kyle Hardner*

# Match the Leader

## How much do you know about our leaders right here?

When it comes to the Forces of Magnetism, the ANCC defines leaders as knowledgeable and strong risk-takers who support and advocate for staff and patients. Colleagues here in a wide variety of roles demonstrate leadership by continually seeking innovative ways of improving nursing practice and presenting what they've learned nationwide to improve the standard of care. See how much you know about your colleagues by matching the leader with examples of how they've shared their knowledge and experience.



Bernie Hochleitner

Eileen Palmer, R.N.

**A** Participated in a comparative discussion of two hospitals using computer-assisted physician order entry (CAPOE) at the Pennsylvania Society of Health Systems Pharmacists in Harrisburg...**shapes how systems and software (particularly bar coding and CAPOE) are designed** for future standards of care... collaborates with physicians, nursing and information systems specialists to develop programs using advanced technology that have prevented medication errors... **uses leading-edge practices** endorsed by the Leapfrog Group for Patient Safety (a consortium of prestigious business and health care leaders), as a goal for high-performing hospitals.

**B** Believes in using evidence-based research to build knowledge, then sharing that knowledge with colleagues to help them be the best they can be...**involved technical partners** in developing new tools for assessing patients at risk for falls; technical partners now coordinate fall prevention efforts and fall rate has decreased...**presented a poster on "Using Evidence to Create a Fall Prevention Program"** at the National Gerontological Nursing Association Conference in Las Vegas...**received the Innovations in Practice Award** along with colleagues Susan Hecker, R.N., and Jeanine DeLucca, R.N., for poster presentation...**passionate about improving life for the elderly**, using essential oils and other means to ease dementia.

**C** Co-chaired his/her unit research committee...research team member **investigating the effects of daily communication** on family satisfaction, through Bedside Scientist Institute (BSI)...**gave oral presentation about BSI** with other members of the research team at Sigma Theta Tau International Research Conference in Dublin, Ireland, and with Molly Sebastian, R.N., at the annual Magnet Conference in Sacramento, Calif.; received overwhelming response from people wanting to know more... **appreciates support** available to do bedside research; believes research begins by asking questions...**advises others presenting** to be passionate about your subject, know your material and practice, practice, practice.

## Win a Cafeteria Gift Certificate!

E-mail your guesses to Steph Pacelli, analyst at the Center for Professional Excellence ([stephanie.pacelli@lvh.com](mailto:stephanie.pacelli@lvh.com)), by April 1. The first 20 to respond with correct matches will receive a \$5 cafeteria gift certificate.



# Can you match us with our credentials?



Matthew Fair



Terry Capuano, R.N.



Courtney Vose, R.N.



Luanne Ingram, R.N.

**D** Leading effort to develop new protocols for nursing involvement and patient and staff education in respiratory therapy; model is unique to LVHHN...**collaborates with nursing staff to train and support** nurses performing respiratory therapy...**oversees program** that has led to more thorough patient assessment, improved patient education and more appropriate use of aerosol therapy; initial tracking shows improvements in patient education and decrease in aerosol therapies performed...**developed poster** for LVHHN Research Day in October...**received third place distinction** at the FOCUS on Respiratory Care and Sleep Medicine Conference in Baltimore for a poster presentation about the impact of respiratory clinical specialists on patient care.

**E** Presented a poster on patient satisfaction at the Nursing Management Congress in Chicago; five LVHHN staff members presented, more than any other organization...**was singled out**, along with colleagues Lois Guerra, R.N., Tami Lee, R.N., Tammy Straub, R.N., and Bill Leiner, R.N., by a renowned speaker in an auditorium packed with nurses; this speaker said “these people from LVHHN get it when it comes to patient satisfaction and being Magnet.”...**sees self as a coach**, who believes wholeheartedly in the Professional Practice Model, which employs decentralized structure of decision-making...**believes best way to develop leadership skills is through listening** to and learning from strong mentors inside and outside of health care...**motto**: hope is not a strategy.

**F** Presented “Strategic Uses of Emotional Intelligence” for chief nursing executives with MaryKay Grim, senior vice president, human resources, at the Advanced Management Education Conference sponsored by the Wharton School of the University of Pennsylvania...**holds the Peggy Fleming Endowed Chair in Nursing**, a \$1.5 million endowment for research and professional development...**associate professor** at Cedar Crest College and DeSales University...**presented posters** at the Pa. State Nurses Association Annual Summit and at the American Organization of Nurse Executives conference on developing leadership...**listed in Who’s Who in American Nursing** since 1984...**featured in the Health Care Advisory Board’s** “Enhancing Nursing Business Performance” book as a nursing leader of best practices...**began career** at LVH as a unit instructor in 1982.

# Our Magnet Moments

## Look Inside the Present

Imagine being able to focus on your patient without mentally listing everything you have to do afterward—or read “Goodnight Moon” to your child without listening for the dryer buzzer. The mindfulness-based stress reduction program can help you live in the present and do just that. This eight-week seminar—available in April, June and September—teaches you how to do yoga and meditate, be aware of your own feelings and needs, and practice mindfulness while eating, communicating and living every day. It’s reimbursed by your Culture of Wellness benefit.

Call 610-402-CARE to learn more!



### continuing education

MARCH	APRIL
1 Critical Care Course – C/V Day 2 8 a.m.-4:30 p.m., Aud-17th & Chew	4 Critical Care Course – Gastrointestinal 8 a.m.-4:30 p.m., Aud-17th & Chew
2 Code Orange Certification, 8 a.m.-noon, Banko 1 & 2	Progressive Critical Care Course – Neuro 8 a.m.-4:30 p.m., Aud-CC
3 Trauma Conference, 8 a.m. -4:30 p.m. Holiday Inn, Fogelsville Code Orange Certification, 8 a.m.-4:30 p.m. Banko 1&2	5 Critical Care Course – Renal 8 a.m.-4:30 p.m., Aud-17th & Chew
4 Trauma Conference, 8 a.m.-4:30 p.m. Holiday Inn, Fogelsville	Oncology Core Course 8 a.m.-4 p.m., JDMCC 1A/1B
7 Critical Care Course – Pulmonary 1 8 a.m.-4:30 p.m., Aud-17th & Chew	6 Oncology Core Course 8 a.m.-4 p.m., JDMCC 1A/1B
8 Critical Care Course – Pulmonary 2 8 a.m.-4:30 p.m., Aud-17th & Chew	7 Oncology Core Course 8 a.m.-4:00 p.m., JDMCC 1A/1B
10 Learning Partners, 8 a.m.-noon 2024 Lehigh St.	11 Critical Care Course – Multi-System 8 a.m.-4:30 p.m., Aud-17th & Chew
15 Critical Care Course – Hemodynamics, 8 a.m.-4:30 p.m., EMI-2166 S. 12th St.	Basic Dysrhythmias 8 a.m.-4:30 p.m., Classrooms 2 & 3-CC
16 TP Education Series, various times Aud-17th & Chew	12 Post-Course BKAT 8 a.m.-noon, Aud-17th & Chew
21 Critical Care Course – Neuro Day 1 8 a.m.-4:30 p.m., Aud-17th & Chew	13 Adv Pharm for NP/PA, 8 a.m.-noon, Aud-CC
22 Critical Care Course – Neuro Day 2 8 a.m.-4:30 p.m., EMI-2166 S. 12th St.	14 Basic Dysrhythmias 8 a.m. -4:30 p.m., 2024 Lehigh St.
23 TP Education Series, various times Conf Rm- LVH-M	Maternal/Child Ed, 8:30 a.m.-1:30 p.m., Aud-CC
29 Progressive Critical Care Course – Pulmonar 8 a.m.-4:30 p.m., EMI-2166 S. 12th St.	18 AACN Final Exam 8 a.m.-4:30 p.m., Aud-17th & Chew
31 TP Education Series, various times Classroom 3-CC	19 Pediatric Critical Care, 9 a.m.-5:30 p.m., ECC #1
	20 Pediatric Critical Care, 8 a.m.-4:30 p.m., Aud-CC
	21 Code Orange Recertification 8 a.m.-4:30 p.m., Banko 1&2
	25 Trauma Nurse Course 8 a.m.-4:30 p.m., EMI-2166 S. 12th St.
	26 Trauma Nurse Course, 8–10 a.m., Aud-CC; 10 a.m.-4:30 p.m., ECC #1
	27 Trauma Nurse Course, 8 a.m.-4:30 p.m., Aud-CC
	28 Trauma Nurse: Burn, 8 a.m.-4:30 p.m., Aud-CC TP Education Series, Aud-17th & Chew
	29 TNC: Burn Workshop, 8 a.m.-4:30 p.m., Aud-CC TP Education Series, Classroom 2-CC

Contact Donna Stout at 610-402-2482 to register for a course.

### what’s happening with PNC?

#### Helping families

Thanks to all who helped make the Professional Nurse Council’s (PNC) outreach committee’s Adopt-A-Family a success. More than 50 families (close to 200 people) received help from LVHVN employees. The committee also has been successful teaching others to reach out to the community. A highlight was the second-grade class from Good Shepherd School in Camp Hill, Pa., who collected bags of mittens and gloves for our pediatric patients in the emergency department.

#### A Great Gift

Administrative Professionals Day (formally known as Secretary’s Day) is Wed., April 27, a week prior to PNC’s annual Mother’s Day plant sale. Plant sale gift certificates make lovely gifts for our administrative professionals and provide financial support to Friends of Nursing. Order them by calling the Center for Professional Excellence at 610-402-1704.



#### Preparing for Nite Lites

The art committee will be assisting the development department in raising funds for this year’s Nite Lites, which will benefit nursing. The PNC’s Annual Art Auction will not be held this year.



## sharing our knowledge

### Advances in Skin and Wound Care 19th Annual Clinical Symposium

Phoenix, Ariz., September 2004

**Carol Balcavage, R.N.:** Nurse I See Red... Pressure Ulcer Prevention, It Can Be Done! (poster presentation)

### Emergency Nurses Association Annual Meeting

San Diego, Calif., September 2004

**Barbara Davis, R.N., Charlotte Buckenmyer, R.N., Gina Sierzega and Michele Ortiz, R.N.:** Implementation of a Male Domestic Violence Screening Program (poster presentation)

**Diana Haines, R.N., and Edith Gray, R.N.:** An Emergency Department Track Within the Critical Care Internship (poster presentation)

### Pediatric Nursing 20th Annual Conference

Orlando, Fla., September 2004

**Maryann Godshall, R.N.:** Burkholderia Cepacia and Cystic Fibrosis: What You Need to Know (poster presentation)

**Deborah Rabuck, R.N., and Maryann Godshall, R.N.:** The Implementation of a Pet Visitation/Therapy Program in a Pediatric Unit (poster presentation)

### Academy of Medical Surgical Nurses Annual Convention

Chicago, Ill., September 2004

**Donna Kalp, R.N., Pat Matula, R.N., and Debra Peter, R.N.:** Maintaining the Momentum of a Fall Prevention Program (poster presentation)

**Lynne Smith, R.N., and Dawn Demchak, R.N.:** Bar Codes at the Bedside (oral presentation)

**Susan Groller, R.N.:** Focus on Throughput: Initiating a Pull System (poster presentation)

**Pat Matula, R.N.:** Using the Evidence to Care for the Patient With Pancreatitis (oral presentation)

### Nursing Management Congress 2004

Chicago, Ill., October 2004

**Tami Lee, R.N.:** Focus on Throughput: Initiating a Pull System (poster presentation)

**William Leiner, R.N.:** Communication Innovations in an Inpatient Behavioral Health Department (poster presentation)

**Courtney Vose, R.N.:** Emergency Department Patient Satisfaction: No Silver Bullet – A Combination of Many Strategically Placed Pellets (poster presentation)

**Lois Guerra, R.N.:** Introducing Orthopedic Nurses to the Bare Bones of Research (poster presentation)

**Tammy Straub, R.N.:** Nurses of the Roundtable: A Modern Tale of Retention (poster presentation)

### National Gerontological Nursing Association 2004 Convention

Las Vegas, Nev., October 2004

**Jeanine DeLucca, R.N., Susan Hecker, R.N., and Luanne Ingram, R.N.:** Using Evidence to Create a Fall Prevention Program (poster presentation)

### American Psychiatric Nurses Association Annual Conference

Phoenix, Ariz., October 2004

**Shirley Giansante, R.N.:** An Evidence-Based Fall Prevention Program for Inpatient Behavioral Health (poster presentation)

**Karen Peterson, R.N., and Carol Sorrentino, R.N.:** Speaking of Stress – Reducing Compassion Fatigue! (oral presentation)

### Annual Magnet Conference

Sacramento, Calif., October 2004

**Terry Capuano, R.N., and Kim Hitchings, R.N.:** Friends of Nursing: An Extraordinary Innovation That Has Transformed the Work Environment (poster presentation)

**Terry Capuano, R.N., and Kim Hitchings, R.N.:** Reward and Recognition: Building a Comprehensive Program and Culture (oral presentation)

**Molly Sebastian, R.N., and Eileen Palmer, R.N.:** Creating the Ideal Bedside Science Environment: A Magnet Hospital's Experience! (oral presentation)

### PA State Nurses Association 2004 Annual Summit

Hershey, Pa., October 2004

**Terry Capuano, R.N., and Kim Hitchings, R.N.:**

- Succession Planning: Developing Leadership Potential
- The Relation Between Patient Care Unit Leadership Practices, Staff Member Teamwork and a Shared Governance Model
- Forces of Magnetism: May These Forces Be With You! (poster presentations)

**John Collins, R.N.:** "Beam Me Up, Scotty"... A Tele-Intensivist Project to Rival Star Trek (poster presentation)

**Jeanine DeLucca, R.N., Terry Capuano, R.N., and Joni Bokovoy, R.N.:** Creating the Ideal Bedside Science Environment: A Magnet Hospital's Experience! (poster presentation)

### Crozier Chester Medical Center "Heads, Hearts, Body Parts" Conference

Upland, Pa., September 2004

**Gyl Corona, R.N.:** Assessing the Right Fuel Mix: Is Your Patient Perfusing? (oral presentation)

### Society of Urologic Nurses and Associates 2004 Conference

Orlando, Fla., October 2004

**Eileen Sacco, R.N., and Lois Guerra, R.N.:** Using Evidence to Assure Safe and Effective Decreased Hospital Length of Stay (oral presentation)



**Their Pet Project**—Pediatric nurses Deborah Rabuck, R.N. (left), and Maryann Godshall, R.N., (shown here with pooch Charlotte), remember the day a therapy dog helped brighten a young boy recovering from burn wounds. The boy was withdrawn after coming out of a coma. But when he met one of Rabuck's four therapy dogs, he laughed and began talking again. "It's just one of our remarkable stories," says Godshall, who presented their poster on "The Implementation of Pet Visitation/Therapy Program in a Pediatric Unit" in September at the Pediatric Nursing 20th Annual Conference in Orlando, Fla. LVHNN's pet therapy program is helping children forget about their illnesses and be kids again.

# Making Every Day Count

**Nurses can be leaders in enhancing lives as well as saving them**

by *Cathy Fuhrman*

**D**ad was a Pennsylvania Dutch man with a strong resolve—he loved family, snowmobiling, camping and building custom kitchens. And multiple myeloma didn't stop him from living life. So, our family was caught off-guard and devastated when he suddenly deteriorated. He became a paraplegic, which required emergency surgery to relieve the pressure on his spinal cord. He spent 30 days in the hospital with several days in the ICU.

Although I've been a critical care nurse for 18 years, I was like any other family member—I hung onto every hope and denied what I didn't want to hear. While our family explored options to save Dad's life, he was growing tired and weak. He wanted to be in his cozy home with family instead of in a hospital bed. He wanted to look out his big bay window at the outdoors he loved so much. Finally realizing that, we brought him home with the help of hospice care. He died shortly after with us all by his side.

Looking back, I think we could have been more prepared for the journey and done more to make him comfortable. My experience has driven me to find better ways to help patients and families live as fully and comfortably as possible, and guide them to set goals in their care, regardless of diagnosis or prognosis. Now, I'm helping to lead change by bringing a new program to the ICU. We're one of the few hospitals in the nation to bring high-touch care to the next level through palliative care. Recognizing our quality, commitment and leadership, the prestigious Robert Wood Johnson Foundation has awarded us a three-year grant to do research, implement the palliative care program and share our findings with other hospitals. In fact, we are just one of four hospitals nationwide that received funding.

So just what is palliative care? It's formalizing the process of relieving suffering and improving the quality of life for patients with any life-altering illness. We're establishing



guidelines and strategies to help families make informed decisions, deal with physical, spiritual and emotional effects, and control pain and symptoms. For example, in the ICU program, we encourage families to write in a journal placed in each patient's room. It helps them record hopes, concerns, events and questions for the care team, and helps us get to know our families better. We have family conferences to discuss expectations and goals.

We're continuously researching and analyzing outcomes, and surveying our families and patients. Ethnographer Lynn Deitrick, R.N., Ph.D., studied our waiting room and learned from 160 families that they need a receptionist who does more than "buzz them into the unit." So we've trained waiting room "ambassadors" to serve as liaisons between the families and care team, and have received glowing feedback from those they serve. In fact, we've developed a palliative care core curriculum and symposium to train all staff in the ICU and are leading practice changes throughout the hospital.

Palliative care has a place on every unit because every patient and family deserves our communication and comfort. And who better to lead this movement than our nurses? We can all learn from the ICU research and lead the way in being more empathic and honest, and helping patients and families live fully in whatever time they have...be it days, months or years.

*Cathy Fuhrman, R.N., is the palliative care coordinator in the Center for Critical Care.*