

# Project LeaRN: Clinical Nurses Engaging in Scholarly Visits to Transform Practice in Their Own Setting (poster)

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# Project LeaRN: Clinical Nurses Engaging in Scholarly Visits to Transform Practice in Their Own Setting

Lehigh Valley Health Network, Allentown, PA

## Project LeaRN Details

### Inspiration

Recommendation from the Institute of Medicine's 2010 report, "The Future of Nursing: Leading Change, Advancing Health"

*"Ensure that nurses engage in lifelong learning"*

### Project LeaRN

Enables experienced nurses to make scholarly visits to other health facilities to observe and learn best practices

### Funding

The Carl R. & Anne C. Anderson Trust

### Evidence

Practice-based sabbaticals have succeeded from a cost-benefit perspective in business, industry, and academia. Though rare in the acute hospital setting, such sabbaticals are intended to boost retention, revitalization, and renewal; promote loyalty and organizational commitment; decrease burnout; and enhance employee productivity and satisfaction.

### Selection of Experiences

Aligned with patient care priorities

### Participants

Clinical nurses with a minimum of 5 years seniority

### Implications

Aligns with several Magnet Recognition Program® sources of evidence:

- Transformational leaders and clinical nurses pursue resources that support nursing and organizational goals.
- Clinical nurses gain new knowledge by evaluating and incorporating evidence into their practice.
- Innovations in nursing are supported, encouraged, and implemented in the organization.



## Project LeaRN Site Visits

TOPIC	HOST ORGANIZATION	LVHN RESULTS
Pediatric Burn Care Delivery Model	Arizona Burn Center at Maricopa Medical Center, Phoenix, AZ	A new care delivery model that integrates the burn care and pediatric specialties to assure consistent best practice standards of care
Extracorporeal Membrane Oxygenation (ECMO) and Left Ventricular Assist Device (LVAD)	Texas Heart Institute, Houston, TX	Implementation of ECMO and LVAD programs; ECMO volumes exceed projected numbers and outcomes outperform Extracorporeal Life Support Organization benchmarks
Cesarean Section surgeries	Brigham and Women's Hospital, Boston, MA	Standardization of Cesarean Section surgeries in accordance with American Operating Registered Nurses (AORN) standards
Mobile Communications	University of Iowa Hospitals and Clinics, Iowa City, IA	In process - considering use of smartphone technology in clinical areas
Reliable and Variable Rounder Care Delivery Model	University of Pittsburgh Medical Center, Pittsburgh, PA	New care delivery model for ancillary personnel
Pressure Ulcer Reduction	Virginia Commonwealth University Medical Center, Richmond, VA	Involvement of unit Skin Champions in monthly prevalence audits Revision of skin care and pressure ulcer prevention education for Skin Champions Unit weekly skin safety huddles with Certified Wound, Ostomy, Continence Nurses (CWOCN) and staff
Target Zero Program (Error Prevention, Zero Harm)	Colorado Children's Hospital, Colorado Anschutz Medical Campus, Aurora, CO	Education of "All Teach, All Learn" approach New 'Hospital Acquired Conditions' group auditing tool

### Selected References:

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3. Institute of Medicine. *The Future of Nursing: Leading Change, Advancing Health*. October 5, 2010. [www.iom.edu/Reports/2010/TheFuture-of-nursing-leading-change-advancing-health.aspx](http://www.iom.edu/Reports/2010/TheFuture-of-nursing-leading-change-advancing-health.aspx).
4. Swenty CF, Schaar GL, Phillips LA, Embree JL, MCOol IA, Shirey MR. Nursing sabbatical in the acute care setting: what is the evidence? *Nurs Forum*. 2011;46(3):195-204.

## What Project LeaRN Has Meant to Me

### By Karen Jones, BSN, RN, CCRN



After graduating with my baccalaureate degree in nursing, I was hired by Lehigh Valley Hospital (LVH) as a clinical nurse on a medical-surgical orthopedic trauma unit. After 4 years, I began my critical care experience on the open heart unit, where I remain 26 years later. About 4 years ago, my unit initiated two new services: left ventricular assist device (LVAD) and extracorporeal membrane oxygenation (ECMO).

These services were ideal for our first Project LeaRN experience. I was thrilled to be chosen as a participant. The other participant works on the transitional open heart unit. From the start, we were involved in planning our experience. We investigated multiple hospitals, but chose the Texas Heart Institute (THI) in Houston because of its well-established programs for mechanical heart devices—and because our LVAD surgeon trained there. THI staff were extremely receptive and excited to mentor us.

Our THI visit involved 2 travel days and 3 full days observing care delivery. We identified four general visit objectives and multiple specific objectives and questions related to various skill competencies. Before our visit, we conveyed these objectives to our THI point person. We got answers not only to our identified questions but also to many more, including some we couldn't have anticipated. One of our goals was to identify a mentor with whom to communicate during initiation and continued development of our LVAD and ECMO programs. As it turned out, we gained many mentors, not just one.

Our visit was no vacation. We spent 3 long days observing patient care in this amazing place. Even after we returned to LVH, our Project LeaRN experience was far from over. We were required to complete a post-trip report template, comparing the original trip objectives to our trip activities, learnings, and take-home documents. Most important was the template's last column—the "so what"—actions taken at LVH based on our Project LeaRN experience. Not only did Project LeaRN allow me to gain significant clinical knowledge, but it also fostered my formal presentation skills. My travel colleague and I prepared a presentation, which we offered to our unit colleagues and, separately, to our chief nursing officer and senior nursing leadership team. Also, we became members of the LVH ECMO and LVAD committees and faculty members for our ECMO and LVAD classes.

When I started working on the open heart unit 24 years ago, people told me I'd quickly grow bored there because it would be the "same old thing." Well, I've never been bored! Who could have predicted back then the new surgical techniques and technologies, such as ECMO and LVAD, that now exist? Or that I'd get the chance to travel from Pennsylvania to Texas for a 3-day learning experience at a world renowned center of excellence? Or that I'd be able to offer a formal presentation about my experience to more than 750 nurses at the ANCC National Magnet Conference®? Most of all, who could have predicted that after 26 years, my passion for nursing would be greater than ever?

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