

Meeting Name	CNO Advisory Council Meeting Min	utes			
Location	Family Medical Conference Room				
Date	10/17/2018		Council/Meeting Minutes	Please check off all components and indicators that relate to each topic being	
Time	3:00 – 5:00 pm			discu	ssed.
Conducted By	Mary McDermott, MSN, RN, NEA-BC				
Note Taker	Kathleen Calabro			ı	
Topic/ Facilitator	Discussion	Staff Input & Feedback	Action	Magnet Components	Strategic Plan Indicator
Review of Minutes 9/17/18	Meeting minutes were emailed and also reviewed on Nursing Website	No changes		 ☑ Transformational Leadership ☑ Structural Empowerment ☑ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements 	 ☑ People ☐ Patient Experience ☑ Quality ☐ Financial Performance ☐ Operations
Outstanding topics from September meeting reviewed by M. McDermott	 Welcomed the new members: ICU - Alice Mulligan BSN, RN 5North - Candice Johnson BSN, RN Mary reiterated the main goal of the CNO Advisory Council is a forum for nurses to discuss with the CNO any questions for concerns on their units. Uniforms By year end 2018, nurses will be ordering white tops. They are high quality and anti-microbial. Mary is working with the vendor. For infection prevention reasons, nurses should not be wearing sweaters or fleece jackets. A shirt underneath the 	Uniforms A. Mulligan was concerned that a white top would show stains. M. McDermott shared that she saw a demo and when water was poured on the top, it beaded off.	Uniforms M. McDermott,RN will look into gender specific scrubs. She suggested that a scrub jacket be worn. There will be a "fashion show" by year end for RNs to try the scrub tops to determine the correct size.	 ☑ Transformational Leadership ☑ Structural Empowerment ☑ Exemplary Professional Practice ☐ New Knowledge, Innovations and Improvements 	 ✓ People ✓ Patient Experience ✓ Quality ☐ Financial



	white top is allowed as well as scrub jackets. For this year, scrub pants are not being changed. Nursing Town Halls We had great feedback for those who attended the town halls.	Kelly Perish BSN, RN was inquiring if they make scrubs that are gender specific since the current scrubs do not fit properly. Nursing Town Halls Council members asked if the Nursing Town Halls would be repeated this year. They suggested that these forums be better publicized and consider unit-based town halls for those areas where attendance is difficult (e.g. OR).	Nursing Town Halls Based on feedback, M. McDermott,RN will plan quarterly town hall sessions in 2019.		
	Recruitment, Retention & Recognition Council Marisol Antunez, Sr. Talent Acquisition Specialist and Career Coach was invited and agreed to be a regular member on the council. We are also looking for representation from every unit/service with committed and engaged RNs to participate.	Recruitment, Retention & Recognition Council Michael Palazzo BSN, RN 2Center representative works nights and suggested the shared governance day 6:00-7:00 pm would be engaging for the night staff. K. Perish,RN thought the 8:00-9:00am would be the best time.	Recruitment, Retention & Recognition Council Meeting structure, including regular membership and consistent meeting times to be developed. All CNO Advisory Council members to poll their nurse colleagues to determine the best time and day for the council members. Please email MMcDermott2@northwell.edu Or JDillworth@northwell.edu		
Professional Practice Model (PPM)	J Dillworth, RN said that 100% of the nurses who responded to the HealthStream module agreed the PPM reflects by-in from the nurses	All discussed possible ways to write the narrative for the PPM e.g. use comments from	Clinical nurses will bring back the Professional Practice Model and discuss at the unit based shared governance councils. Each of the units will chose a	☑ Transformational Leadership☑ Structural Empowerment	☑ People☑ PatientExperience☑ Quality



-Judy Dillworth PhD, RN, FCCM, CCRN-K, NEA-BC	 we need to write a narrative that coincides with the development of the PPM. Next steps: Rachel Ansaldo BSN, RN, the PPM artist, will share with Judy her inspiration to developing the PPM. Obtain feedback from the nurses in order to write the narrative J. Dillworth, RN will begin narrative, incorporating nursing theorists; Jean Watson and Patricia Benner. 	HealthStream, have unit councils choose a portion of the PPM (leaf, tree) to write about.	leaf of their choice and describe what it means to them. Please email jdillworth@northwell.edu your unit responses.	 ☑ Exemplary Professional Practice ☑ New Knowledge, Innovations and Improvements 	☒ Financial Performance☒ Operations
Clinical Nurse Agenda with Updates	Council member's re- introduced themselves and shared their units are focusing. See below			 ☑ Transformational Leadership ☑ Structural Empowerment ☑ Exemplary Professional Practice ☑ New Knowledge, Innovations and Improvements 	 ☑ People ☑ Patient Experience ☑ Quality ☑ Financial Performance ☑ Operations
5North: Candice Johnson BSN, RN	5 North is continuing to work on reducing noise on the unit. They are considering a change in the designated start time of quiet time from 3:30 to 4:30. The plan is also to establish a quiet time at night.	Candice Johnson, RN asked M. McDermott, RN if they will get back the equipment room that was converted to a patient room due to the high census. Candice is concerned about the clutter in the unit and that it adds to the noise on the unit.	M. McDermott, RN explained the decision to use the equipment room as a patient room is census dependent. To address the space/noise issue, Mary McDermott, RN is working closely with IT trying to decrease the clutter/Workstations on wheels (WOWS) and possibly have flat screen TV's on the walls.		
ICU Alice Mulligan BSN, RN	A. Mulligan,RN said the ICU is focusing on the Awakening and Breathing Coordination, Delirium Monitoring and Management, and Early Mobility Family (ABCDEF)	A. Mulligan, RN asked why an updated resume is required for the yearly evaluations.	Congratulations to ICU for having no VAEs. To help visualize outcomes of the ABCDEF initiative, K. Calabro will graph Vent days and Restraints.		



	Bundle to improve outcomes for Ventilated patients.		M. McDermott, RN explained that a resume is part of your professional portfolio and important to keep current. M. McDermott looks at every portfolio, which provides a snapshot for further professional development, such as obtaining board certification or a specific competency	
Endoscopy	ENDO is going electronic with a new		More information regarding outcomes	
Paola Zavala,	gMed in room Solution. Also the		to follow.	
BSN, RN	plan is to use Allen TV's as a part of			
	patient education.			
Infusion Center		M. McDermott, RN added	The infusion center just implemented	
- Irma Tertulien	I. Tertulien shared the unit focus is	how fortunate we are to	MediTech in the Cancer Center and All	
MSN, RN, C-	improving work flow. Gathering the	now have Dr. Richard	Scripts is used by the physicians.	
EFM &	data is very time consuming since	Barakat as the Physician-	The goal is to decrease wait time.	
Mary	there are various repositories.	in-Chief and Director of		
Phiakhamta	M. Phiakhamta shared that there is	Cancer at Northwell	The new policy to have labs reviewed	
ASN, RN Coordinator in	discussion to require lab work to be	Health Cancer Institute.	72 hours before treatment is in review.	
the Cancer	completed prior to the patient's treatment. There would be a			
Program/	tremendous benefit to know the			
Infusion	patient's lab values before they make			
111451011	the trip to the hospital. Sometimes			
	treatments need to be postponed due			
	to the lab values.			



Behavioral Health -Doreen Wall MS, RN-BC	Doreen Wall, RN is the Principal Investigator of t the IRB Approved Study "The Effect of Mandala Coloring on Psychiatric Inpatient's Anxiety". She reported that 4 patients have been enrolled in the study and have completed the Becks Anxiety (BAI) Tool pre and post coloring to date. Patient recruitment (sample size of 75 patients over a 6-month period) is challenging because ECT Patients are excluded from the study.	S. Giammattei, RN also acknowledged Jessica Khalaf, recreational therapist on 1 South for working with Doreen on this study. M. McDermott, RN shared how proud she is of the 2 IRB approved studies in progress and the two studies which are being submitted for scientific review: 1) "The effects of lavender essential oil on sleep in hospitalized adults", Carol Daley MSN, RN, CNML is the site PI. 2) "Evaluating the efficacy of a mindfulness based mobile application on stress reduction amongst nurses", Candace Huggins MSN, RN, NE-BC, CEN is the site PI.	M. McDermott reminded everyone of the resources available to the staff: - Dr. Peggy Tallier, EdD, RN, MPA - Judy L. Dillworth, PhD, RN, FCCM, CCRN-K, NEA-BC - Organization Development Resources at Northwell.	
1 South Steven Giammattei AAS, RN	S. Giammattei, RN shared how the two techs on the unit completed a safety checklist with the goal of making the unit safer. Also, report sheets were revamped. S. Giammattei, RN said there is a need for a real restraint bed on the unit.		Other council members thought they too would benefit with safety check list. Steven will share the finalized safety plan with K.Calabro so she can distribute to council members. S. Giammattei should discuss the need for beds with his Nurse manager so that it can be submitted in the capital budget.	
MCH Susanne Neuendorf	Susanne Neuendorf, RN explained that the Quantitative Blood Loss (QBL) project is ready to be implemented, pending education in	M. McDermott, RN explained how the patient hemorrhage events from 2017 led to new and	More information to follow.	



BSN, RN,	Health Stream and purchase of the	improved policies and		
NCC-EFM	scales.	procedures.		
	New physicians believe in physician	We also have a contract		
	and nurse rounding and this initiative	with a blood agency which		
	is working out very well. Dr.	provides us with platelets		
	Manzen Khalifeh is the new	at all times.		
	neonatologist. As a patient safety			
	focus, Dr. Khlaifeh is investigating a			
	baby monitoring system called			
	BioStamp. This will help keep babies			
	safe while still promoting rooming in.			



	Quantitative Blood Loss (QBL) project is	waiting for rollout of RN	M. McDermott shared how the patient		
Patient Experience	M. McDermott, RN shared that every Wednesday morning Management reviews all the Press Ganey Patient Experience comments.		As part of a new initiative to improve patient experience, Managers are tasked to speak to the patients who had a negative comment in order to better understand the patient complaint. When a staff member is complimented, their name should be entered in the My Recognition Program A certification can be printed from that recognition and it can be added to your portfolio!	 ☑ Transformational Leadership ☑ Structural Empowerment ☑ Exemplary Professional Practice ☑ New Knowledge, Innovations and Improvements 	 ☑ People ☑ Patient Experience ☑ Quality ☑ Financial Performance ☑ Operations
Allen TV:	coverage for maintenance of the Allen TV's? Concern with the arms of the Allen m	Council members ommented on occasions when patients had to be noved to different rooms ue to non-working TV's.	M. McDermott, RN spoke to Glen Taylor to replace the Allen TVs with wall mounted flat screen TVs. Staff are encouraged to visit 3 North (sleek and not cluttered). K. Calabro will add to questions/concerns for Glen Taylor.	 ☑ Transformational Leadership ☑ Structural Empowerment ☑ Exemplary Professional Practice ☑ New Knowledge, Innovations and Improvements 	 ☑ People ☑ Patient Experience ☑ Quality ☑ Financial Performance ☑ Operations
Opening of 3 North M. McDermott, RN	Nov.1, 2018 as primarily a post-op surgical floor with 1 bariatric room. There will be a sink in every room to promote hand hygiene compliance.	The plan to increase ursery from Level 1 to evel II will provide a reat service to many of the woman who want to eliver here.	Long term vision: -5North will temporality go to 2North so we can cosmetically fix 5North. When that is complete 5North will return to their unitBRU unit will all be on the 2 nd floorMaternal Child Health including Pediatric unit will be on the 4 th floorIncrease nursery from Level 1 (Basic Newborn Care) to Level II (Advanced Newborn Care).		



Updates to the Nursing Website- K.Calabro	Demonstrated the following enhancements to the Nursing Website Updates Reviewed: Professional Practice and Development New request form for outside educational program Added 2nd Q '18 RN Education New Sections Displayed: The Journal Club - converted to the traditional monthly meeting to a Blogging Page. There are articles posted and the expectation is that the RNs would add comments. This supports RN-RN communication and innovation! Pressure Injury Resource (PIR) Team Pictures from the Skin Champion Education Program	Council Members discussed BSN and Certification Rates. Every unit should establish realistic unit goals Question on the Clinical Ladder? If you meet the requirements of a level IV, is there a time frame that you need to be at a level III before moving up? Irma Tertulien, RN thought you could move from RN II to RN IV if all the requirements are met.	. Please seek K. Calabro's help if you need it. M. McDermott, RN will review with the Directors and clarify at the next meeting.	 ☑ Transformational Leadership ☑ Structural Empowerment ☑ Exemplary Professional Practice ☑ New Knowledge, Innovations and Improvements 	 ☑ People ☑ Patient Experience ☑ Quality ☑ Financial Performance ☑ Operations
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