

Meeting Name	Shared Governance Professional Practice and Development		Council/Meeting Minutes	Please check off all components and indicators that relate to each topic being discussed.	
Location	FMCR				
Date	5/16/2018				
Time	1100-1300				
Conducted By	Tammy Wilson, BSN, RN Coordinator 5S Sherin Ninan, MS, CNRN ED Carolynn Young, MS, RN-BC (Facilitator)				
Topic/ Facilitator	Discussion	Staff Input & Feedback	Action	Magnet Components	Strategic Plan Indicator
1. Call to Order: A. Recorder B. Introductions C. Review of previous meeting minutes	<ul style="list-style-type: none"><li>• Meeting called to order @ 1105.</li><li>• Recorder/Timekeeper: Keirra Gonzalez, MSN, RN-BC</li><li>• New Members/Welcome</li><li>• April minutes distributed via email.</li><li>• Approval of April 2018 meeting minutes.</li></ul>	<ul style="list-style-type: none"><li>• Clarification of pg. 2 -- IR embolization project. Night RN staff recommends a project with IR physician and pharmacy to work on an interdisciplinary pain management algorithm for post embolization patients.</li><li>• No additional changes.</li></ul>	Attendees Conference "Call-in" number: <b>888-602-0202</b> Then press passcode: <b>914-366-3502#</b> .  <ul style="list-style-type: none"><li>• Judy Dilworth discussed importance of reading meeting minutes and giving corrections in order for minutes to be accurate. Responsibility of council members is sharing the information from council meetings to unit colleagues.</li><li>• Approved.</li><li>• Minutes distributed by email to council members 1 week prior to meeting.</li></ul>		

<b>2. Charge Nurse Competency</b>	<ul style="list-style-type: none"> <li>Discussion led by <b>Nancy Fox</b>. Presented Charge Nurse Competency form. Discussed differences between Triage vs Charge RN.</li> <li>A. Purpose is to define the role of the charge nurse and to have consistent responsibilities throughout the facility (Phelps).</li> <li>B. Triage Nurse Title will be changed to <b>Charge Nurse</b> which embodies a more involved leadership role on the unit with ongoing accountability.               <ul style="list-style-type: none"> <li>Breaks: Identified as one of the main concerns in the RN Engagement Survey: "staff not getting their breaks".</li> </ul> </li> <li>C. Competency Assessment Form will be used to educate &amp; validate Triage Nurses. It outlines the need for the charge nurse role, leadership behaviors, and behavioral criteria.               <ul style="list-style-type: none"> <li>Validation will be performed by Manager or Level IV RNs.</li> </ul> </li> <li>D. Level II RNs are required to attend Professional Practice Development workshop.</li> </ul>	<ul style="list-style-type: none"> <li>What is the difference? Difference between Triage and Charge Nurse discussed. <u>Triage Nurse</u> ensures a smooth work flow on the unit. The main responsibilities include-assigning beds and staff to patient assignment. <u>Charge Nurse</u> is responsible for smooth work flow on the unit, but also needs to be knowledgeable about the patient cases on the unit/area, the ability to address any issues and conflicts (patient, family and staff), to make sure staff are assigned breaks, and to oversee overall operations on the unit.</li> <li>Form reviewed.</li> <li><b>Rachel Ansaldo RN INF</b> asked when classes are offered. Classes are scheduled quarterly, and as needed. Contact Organizational Development for information.</li> <li><b>Diana Pollock RN ICU</b> suggested that units should</li> </ul>	<ul style="list-style-type: none"> <li>Charge Nurse is the point person when anyone asks, "Who is in Charge?"</li> <li>See attached. Send feedback to <b>Nancy Fox, Org. Development</b>.</li> <li>Form approved by council.</li> <li>See Nursing Career Ladder &amp; workshop schedule, attached.</li> <li>Recommend to make class one of the yearly goals for all</li> </ul>	<input type="checkbox"/> Transformational Leadership <input checked="" type="checkbox"/> Structural Empowerment <input checked="" type="checkbox"/> Exemplary Professional Practice <input type="checkbox"/> New Knowledge, Innovations and Improvements	<input checked="" type="checkbox"/> People <input checked="" type="checkbox"/> Patient Experience <input checked="" type="checkbox"/> Quality <input type="checkbox"/> Financial Performance <input checked="" type="checkbox"/> Operations
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<b>Charge Nurse Competency (cont)</b>	<p>E. Clarification of monetary compensation according to Clinical Ladder (leveling) including Charge Nurse responsibility.</p>	<p>have the list of RNs who need the class.</p> <ul style="list-style-type: none"> <li>• <b>Doreen Wall</b> asks about RN career ladder advancement and annual performance evaluation being fair within all units. When an RN does not fulfill ladder requirements, the RN's level would be decreased.</li> <li>• As Career Ladder advancement, RNs are compensated with each increase in "level" by 5% to their <u>base pay</u>. Clinical Ladder increase in pay is received with <u>every shift worked</u>, whether they are working, in charge, as a preceptor or at a council meeting.</li> <li>• This was new information to many council members.</li> </ul>	<p>RNs (if not attended previously).</p> <ul style="list-style-type: none"> <li>• Recommend that consistent process of annual evaluation needs to be done. Managers ensure that level requirements are fulfilled for maintaining and advancement, then the career ladder committee reviews portfolios and approves advancement, if warranted.</li> <li>• Informational.</li> <li>• Communicate with colleagues at staff meetings and unit discussions</li> </ul>		
<b>3. Board Certification</b>	<p>A. Phelps Nursing Department Benchmarking Statistics (Magnet Journey).</p> <p>B. Success Pays Program Phelps pays for certification and renewal of certification.</p> <p>C. Compensation for Board Certification &amp; Preparation</p> <ul style="list-style-type: none"> <li>• Review course(s)</li> <li>• Certification exam</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Judy Dilworth</b> reported Phelps Nursing Board Certification rate is 38-43%.</li> <li>• Bachelor's degree in nursing rate is at 79%.</li> <li>• Certifications included in the "Success Pays" program includes: Gerontology, Medical Surgical, and Pain Management.</li> <li>• Phelps pays for specialty board certification exam-after successful passing. Submit</li> </ul>	<ul style="list-style-type: none"> <li>• Follow-up with exact number at next meeting.</li> <li>• Goal is to increase our Board Certification and Baccalaureate rates every year.</li> <li>• Success Pays eligible exams are attached.</li> <li>• Informational.</li> <li>• Communicate with colleagues at staff meetings and unit discussions.</li> </ul>	<p><input checked="" type="checkbox"/>Transformational Leadership</p> <p><input checked="" type="checkbox"/>Structural Empowerment</p> <p><input checked="" type="checkbox"/>Exemplary Professional Practice</p> <p><input type="checkbox"/>New Knowledge, Innovations and Improvements</p>	<p><input checked="" type="checkbox"/>People</p> <p><input type="checkbox"/>Patient Experience</p> <p><input checked="" type="checkbox"/>Quality</p> <p><input type="checkbox"/>Financial Performance</p> <p><input checked="" type="checkbox"/>Operations</p>

	<ul style="list-style-type: none"> <li>Continuing education by CE direct (free)</li> <li>Certification renewal</li> <li>Additional 50¢/hour for each board certification with maximum of 3 certifications</li> </ul> <p>NOTE: Northwell Health only reimburses and compensates for 1 board certification.</p> <p>C. Certification Updates on Units</p>	<p>"Outside Education Reimbursement" form.</p> <ul style="list-style-type: none"> <li>Members encouraging co-staff to prepare/sit for certification.             <ul style="list-style-type: none"> <li>Infusion Center: RN's taking ONCC exam.</li> <li>OR: 2 RNs are taking their certification exam.</li> <li>ASU: RNs to take the certification this year.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Refer to unit Educator/CNS for certification information.</li> <li>Kudos!</li> <li>Council members discussed creative ideas for support with review and preparation by unit poster boards, quizzes, Tip of the Week, etc.</li> </ul>		
<p><b>4. SOC Committee Report</b></p> <p>Updates in Policies and Protocols</p>	<p>Discussed by <b>Carolynn Young</b> and <b>Rachel Ansaldo</b>:</p> <p><b>A. Hypercritical Value Notification:</b></p> <ul style="list-style-type: none"> <li>Lab calls Hospitalist Team Leader/MD of hypercritical values needing immediate intervention. If MD unable to immediately go to pt bedside, nursing unit HUC will be called and informed that RRT will be called by lab.</li> </ul> <p><b>B. Bar Code Medication</b></p> <ul style="list-style-type: none"> <li>When administering 2 IVP or SQ medications: scan, draw up and administer each medication separately.</li> </ul>	<p>Action/policy is driven by NW.</p> <ul style="list-style-type: none"> <li>Seven (7) "hypercritical values" were reported at Phelps in 2017.</li> <li>Discussed that "Lab should also speak with the patients' RN to evaluate / compare previous results to find out <u>if this is expected</u> or requires immediate intervention."</li> <li>Discussed how to have "evidence" of a time lapse in the eMAR where meds are scanned and administered independently.</li> <li>Patient Medication Safety Change in practice to scan, prepare and immediately administer meds.</li> </ul>	<ul style="list-style-type: none"> <li>See attached, Policy Update 5/2018.</li> <li>Each occurrence is reviewed by nursing &amp; laboratory administration.</li> <li>Continue to follow-up with clinical RN's for best practice and evidence in the eMAR.</li> </ul>	<p><input type="checkbox"/> Transformational Leadership</p> <p><input type="checkbox"/> Structural Empowerment</p> <p><input checked="" type="checkbox"/> Exemplary Professional Practice</p> <p><input checked="" type="checkbox"/> New Knowledge, Innovations and Improvements</p>	<p><input checked="" type="checkbox"/> People</p> <p><input checked="" type="checkbox"/> Patient Experience</p> <p><input checked="" type="checkbox"/> Quality</p> <p><input type="checkbox"/> Financial Performance</p> <p><input checked="" type="checkbox"/> Operations</p>



<p><b>SOC Committee Report</b> (continued)</p>	<p><b>C. Surgical Skin Preparation</b></p> <ul style="list-style-type: none"> <li>• Skin Prep must be performed prior to patient arrival in ASU / Surgical Center.</li> <li>• Chlorhexidine (CHG) wipe/cloths are be used as the prep (skin antimicrobial).</li> <li>• <u>All jewelry, including wedding rings and body piercings, must be removed.</u> Any skin surface that is in contact with metal may burn when monopolar electricity is applied. This is possible in equipment used during surgery (as per <b>Lorrie Presby</b>, OR Educator).</li> </ul> <p><b>D. Specimen Labeling</b></p> <ul style="list-style-type: none"> <li>• Specimen for Type&amp;Screen MUST be initialed clearly. Blood Bank will reject specimen if they are unable to decipher/read the phlebotomist.</li> </ul> <p><b>E. Blood Product Administration</b></p> <ul style="list-style-type: none"> <li>• Northwell Policy (NW Guardrails Library) New Blood Administration parameters (rate of adm). FFP will be administered as fast as possible.</li> </ul> <p><b>F. Alaris Pump Guardrails Library</b></p> <ul style="list-style-type: none"> <li>• On June 4, Phelps "old" med library will be changed to Northwell Alaris Guardrail library.</li> </ul>	<ul style="list-style-type: none"> <li>• Patient Safety-Prevent SSI.</li> <li>• Discussed MD Order or "core measure procedure guidelines".</li> </ul> <p>No taping of rings. No exceptions!</p> <ul style="list-style-type: none"> <li>• Patient Safety concern.</li> <li>• Initials must be legible or specimen will be rejected by blood bank (and redrawn). Examples provided by <b>Carolynn Young, RN-BC</b>.</li> <li>• Policy in final rounds of NW System review.</li> <li>• Discussed changes, refer to handout.</li> </ul>	<ul style="list-style-type: none"> <li>• Continue with education regarding the policy and practice.</li> </ul> <ul style="list-style-type: none"> <li>• Informational.</li> <li>• Communicate with colleagues at staff/council meetings.</li> <li>• Sample attached.</li> <li>• Informational.</li> <li>• Presented in Med/Surg RN Competency. Healthstream education module under development.</li> </ul>	
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<b>SOC Committee Report (continued)</b>	<p>Screen changes:</p> <ol style="list-style-type: none"> <li><u>Profile</u>: Med-Surg (includes 1S); L &amp; D; Critical Care (PACU, ER, ICU, Tele); Oncology; Peds.</li> <li><u>Unit phone #</u> - 4 digits (same)</li> <li><u>Guardrail IV fluids</u>--will be in rate of infusion range instead of the specified IVF name (LR)</li> <li><u>Drugs</u> will be in alphabetical order and <u>Generic/Brand name</u>.             <ul style="list-style-type: none"> <li>- Heparin Nomogram Protocol</li> <li>- IVIG</li> <li>- Critical Care Vasopressors</li> <li>- Prbc/Blood</li> <li>- Code Blue Medications</li> </ul> </li> </ol>	<p>Discussed changes.</p> <ul style="list-style-type: none"> <li>• <b>IVF 31-300ml/hr.....</b></li> <li>• <b>Tammy Wilson RN 5S</b> asked for review of policy on IVIG and monitoring of patients during infusion (too frequent).</li> <li>• Request to review guardrail profiles for IVIG administration. We only have 10% IVIG in formulary which can be administered in Med-Surg and Critical Care.</li> </ul>	<ul style="list-style-type: none"> <li>• IVIG: Policy &amp; NW Guardrail library will be rechecked with regards to vital signs monitoring, weight, and dosing, etc.</li> <li>• Follow-up at SOC meeting.</li> </ul>	
<b>5. New Nursing Website</b>	<p><b>Kathleen Calabro</b>, Data Analyst demonstrated the new <u>Nursing Website</u>.</p> <ol style="list-style-type: none"> <li>Communicates and disseminates Nursing information.</li> <li>Accessed through Phelps Intranet.</li> <li>Information of Phelps Shared Governance Councils and Council agenda's, minutes, and handouts.</li> <li>Information on past and coming events: Our Magnet Journey, Nurses Awards and Presentations, NW Seminars, Conferences, and Educational opportunities.</li> </ol>	<ul style="list-style-type: none"> <li>• Judy D. reminded everyone that unit-based Shared Governance Councils need to send their monthly agenda and council minutes to Judy (who will post on the website).</li> <li>• Doreen W. suggested a Journal Club link to be added.</li> </ul>	<ul style="list-style-type: none"> <li>• KUDO's! See attached.</li> <li>• Great idea!</li> <li>• Implemented by Kathleen.</li> </ul>	<div> <input type="checkbox"/>Transformational Leadership         </div> <div> <input checked="" type="checkbox"/>Structural Empowerment         </div> <div> <input checked="" type="checkbox"/>Exemplary Professional Practice         </div> <div> <input type="checkbox"/>New Knowledge, Innovations and Improvements         </div> <div> <input type="checkbox"/>People         </div> <div> <input checked="" type="checkbox"/>Patient Experience         </div> <div> <input checked="" type="checkbox"/>Quality         </div> <div> <input type="checkbox"/>Financial Performance         </div> <div> <input checked="" type="checkbox"/>Operations         </div>

<p><b>Nursing Website</b> (continued)</p>	<p><b>E. Phelps Professional Practice Model and Theoretical Framework.</b></p>	<ul style="list-style-type: none"> <li>• Judy D. reported of the successful developmental session to create a Phelps Professional Practice Model.</li> <li>• Our theoretical framework is based on the work of Brenner's from Novice to Expert and Watson's Culture of Caring. Our Practice Model will reflect Phelps Pride and what Phelps Nursing is all about.</li> <li>• It is guided by the question, "What does Phelps nurses do every day?"</li> </ul>	<ul style="list-style-type: none"> <li>• Additional sessions to be scheduled.</li> </ul>		
<p><b>6. NW Mock Survey</b></p>	<p>Representatives from Northwell will be at Phelps Hospital to perform a Mock Joint Commission Survey on Monday and Tuesday (May 21 and 22). <b>Carolynn Young RN 2C</b> demonstrated how to access Phelps Intranet and review Nursing Policies/Protocols.</p>	<ul style="list-style-type: none"> <li>• Staff should know where to get information (Phelps Intranet).</li> <li>• Review policies of Nursing Standards and Practice.</li> <li>• Northwell Policies on Restraints and Constant Observation/ Enhanced Supervision are included in the SOP manual.</li> <li>• Unit Specific Policies can be found in Department Specific Policies on Phelps Nursing menus.</li> <li>• Look for Standards of Care Policy UPDATES in the monthly Nursing News editions.</li> </ul>	<ul style="list-style-type: none"> <li>• Support and prepare colleagues with attentiveness of a JC survey.</li> <li>• Refer to 2018 Hospital National Patient Safety Goals (NPSG) (attached).</li> </ul>		



<b>7. Nurse's Week Feedback</b>	Judy Dillworth asked, "How can we increase nurse engagement in programs/activities for night shift? What is a doable time for night staff?"	<ul style="list-style-type: none"> <li>Night RN members suggested that around 1am - 3am would be better times to schedule activities for night shift.</li> </ul>	<ul style="list-style-type: none"> <li>Judy D. to discuss arranging activities with Anne Marie Treanor.</li> </ul>	<input checked="" type="checkbox"/> Transformational Leadership  <input type="checkbox"/> Structural Empowerment  <input checked="" type="checkbox"/> Exemplary Professional Practice  <input type="checkbox"/> New Knowledge, Innovations and Improvements	<input checked="" type="checkbox"/> People  <input type="checkbox"/> Patient Experience  <input type="checkbox"/> Quality  <input type="checkbox"/> Financial Performance  <input type="checkbox"/> Operations
Adjournment  Next meeting	Meeting adjourned at 1305.  <b>June 20 at 1100-1300</b> in the Family Medical Conference Room (FMCR).		Conference "Call-in" number is <b>888-602-0202</b> Then press passcode: <b>914-366-3502#</b> .		
<div> <div> <b>Respectfully Submitted,</b>   <b>Recorder/Credentials Maria Keirra Gonzalez MSN RN-BC</b>   <hr/> <b>Co-Chair Signature</b>             Date _____         </div> <div> <b>Date: June 3, 2018</b>   <hr/> <b>Director Signature</b>             Date _____         </div> </div>					

**ATTACHMENTS**

1. Charge RN Validation Competency form 5/17/2018
2. RN Nursing Career Ladder 4/13/2018
3. Professional Development Workshop 2018
4. ANCC Certification; Success Pays Program
5. Specialty Board Certification List (in progress)
6. Nursing News—Policy UPDATE 5/2018
7. 2018 Hospital NPSG