

<b>Meeting Name</b>	<b>New Knowledge and Innovation</b>		<b>Council/Meeting Minutes</b>	Please check off all components and indicators that relate to each topic being discussed.	
<b>Location</b>	<b>Family Medical Conference Room</b>				
<b>Date</b>	12/19/2018				
<b>Time</b>	<b>9am-11am</b>				
<b>Conducted By</b>	<b>Judy Kennedy BSN,RNC</b>				
<b>Topic/ Facilitator</b>	<b>Discussion</b>	<b>Staff Input &amp; Feedback</b>	<b>Action</b>	<b>Magnet Components</b>	<b>Strategic Plan Indicator</b>
1.Introduction  Review of minutes.  Judy Kennedy	<ul style="list-style-type: none"> <li>Introduction of any new members or guests.</li> <li>Minutes reviewed. Minute recorder assigned</li> </ul>	<ul style="list-style-type: none"> <li>Welcome Karen Barger BSN, RN, CCRN from ICU!</li> </ul>	<ul style="list-style-type: none"> <li>Minutes accepted</li> </ul>	<input checked="" type="checkbox"/> Transformational Leadership <input checked="" type="checkbox"/> Structural Empowerment <input checked="" type="checkbox"/> Exemplary Professional Practice <input checked="" type="checkbox"/> New Knowledge, Innovations and Improvements	<input type="checkbox"/> People <input type="checkbox"/> Patient Experience <input type="checkbox"/> Quality <input type="checkbox"/> Financial Performance <input checked="" type="checkbox"/> Operations
2. New Knowledge.  Judy Dillworth, PhD, RN, NEA-BC, CCRN-K, FCCM	<ul style="list-style-type: none"> <li>J. Dillworth - Update on Magnet related activities</li> </ul> <p>J. Dillworth thanked everyone for a great 2018. There was good dialogue and building of new relationships at the Advance held in November.</p> <p>Dr. Peggy Tallier EdD, RN, MPA will make an effort to come to the NK shared governance meetings in Jan. &amp; Feb. As a goal for 2019, P. Tallier plans to be here 2<sup>nd</sup> and 4<sup>th</sup> Fridays of every month.</p>	<ul style="list-style-type: none"> <li></li> </ul>	<ul style="list-style-type: none"> <li>If you need help developing your PICO Questions or zeroing in a unit project, P. Tallier and J. Dillworth are here to help.</li> </ul>	<input checked="" type="checkbox"/> Transformational Leadership <input checked="" type="checkbox"/> Structural Empowerment <input checked="" type="checkbox"/> Exemplary Professional Practice <input checked="" type="checkbox"/> New Knowledge, Innovations and Improvements	<input checked="" type="checkbox"/> People <input checked="" type="checkbox"/> Patient Experience <input checked="" type="checkbox"/> Quality <input checked="" type="checkbox"/> Financial Performance <input checked="" type="checkbox"/> Operations

<p>3. Updates to the Nursing Website And Virtual Journal Club presented by Kathleen Calabro</p>	<ul style="list-style-type: none"> <li>• K. Calabro accessed the nursing website and reminded everyone about the Virtual Journal Club. K. Calabro reminded how beneficial this would be for the night nurses and bringing new interventions into the hospital.</li> <li>• All RNs feedback is welcomed and encouraged. When you make a post don't post twice or a duplicate post will appear on the virtual journal club.</li> <li>• K. Calabro also shared the RNs who moved up the Clinical Ladder - Congratulations!</li> </ul>	<ul style="list-style-type: none"> <li>• Clinical educator Doreen Wall MSN, RN-BC discussed how the Journal Club will need to determine fair measurement for those nurses using Journal Club as their council requirement. Is it the number of articles they recommend and/or the quality of the comments?</li> <li>• Karen Barger BSN, RN, CCRN who is the chair of the credentialing committee agreed that defining the requirements for the Journal Club is important.</li> </ul>	<ul style="list-style-type: none"> <li>• Journal Club members to propose a measurement method for RNs using the Journal Club for their Clinical Ladder Advancement</li> <li>• K. Barger shared that she is currently reviewing and evaluating Northwell Health's Clinical Ladder.</li> </ul>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Transformational Leadership</li> <li><input checked="" type="checkbox"/> Structural Empowerment</li> <li><input checked="" type="checkbox"/> Exemplary Professional Practice</li> <li><input checked="" type="checkbox"/> New Knowledge, Innovations and Improvements</li> </ul>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> People</li> <li><input checked="" type="checkbox"/> Patient Experience</li> <li><input checked="" type="checkbox"/> Quality</li> <li><input type="checkbox"/> Financial Performance</li> <li><input checked="" type="checkbox"/> Operations</li> </ul>
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<p>4. Organizational Updates presented by Education Specialist, Alicia Mulvena MA, RN, NPD-BC</p>	<p>A. Mulvena shared:</p> <ul style="list-style-type: none"> <li>• TeamSTEPPS training will be rolled out starting in January.</li> <li>• Nursing News was delivered via email.</li> <li>• EBP class offered this Friday 12/21 from 9-1. This is class to satisfy the clinical ladder requirement. In 2019, the class will be offered in March, July, and November to earn level 4.</li> <li>• Donor Nurse Challenge course will be held in NYC on Jan 29. CEUs are available.</li> </ul>		<p>Informational</p>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Transformational Leadership</li> <li><input checked="" type="checkbox"/> Structural Empowerment</li> <li><input checked="" type="checkbox"/> Exemplary Professional Practice</li> <li><input checked="" type="checkbox"/> New Knowledge, Innovations and Improvements</li> </ul>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> People</li> <li><input checked="" type="checkbox"/> Patient Experience</li> <li><input checked="" type="checkbox"/> Quality</li> <li><input type="checkbox"/> Financial Performance</li> <li><input checked="" type="checkbox"/> Operations</li> </ul>
<p>5. Organizational Updates presented by Organizational Development Director, Nancy Fox MS, RN, NPC-BC, NEA-BC, CNML</p>	<p>N. Fox distributed several handouts regarding TeamSTEPPS. TeamSTEPPS is an evidence-based program designed to improve communication and teamwork skills among health care professionals.</p> <p>See attachments below.</p> <p>Tools using:</p> <ul style="list-style-type: none"> <li>- hand out</li> <li>- Communication skills.</li> </ul> <p>During handoff (shift change and pt. movement on and off the floor) SBAR will be replaced with I-Pass-the-Baton.</p> <p>We are going to start bedside shift report in March. RNs to start at the bedside then go to computer.</p>	<p>Council members inquired whether physicians were also going to participate in the TeamSTEPPS training. The answer is YES.</p>	<ul style="list-style-type: none"> <li>• Please discuss with your manager and sign up for the appropriate training in Healthstream.</li> <li>• Please take the 2 north report sheet as a sample back to your units. Nancy suggested for the 2 North tool to be customized to your Units specific needs. For example, units like Behavioral Health and ASU will have different requirements.</li> <li>• If you are interested in a Clinical Ladder Project regarding Team STEPPS and improved communication, please contact N. Fox x3167.</li> </ul>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Transformational Leadership</li> <li><input checked="" type="checkbox"/> Structural Empowerment</li> <li><input checked="" type="checkbox"/> Exemplary Professional Practice</li> <li><input checked="" type="checkbox"/> New Knowledge, Innovations and Improvements</li> </ul>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> People</li> <li><input checked="" type="checkbox"/> Patient Experience</li> <li><input checked="" type="checkbox"/> Quality</li> <li><input type="checkbox"/> Financial Performance</li> <li><input checked="" type="checkbox"/> Operations</li> </ul>

Topic/ Facilitator	Discussion	Staff Input & Feedback	Action	Magnet Components	Strategic Plan Indicator
The information below is shared by the unit representative regarding their Active Innovative Projects. Projects are identified as Evidence Based Projects (EBP), Research Projects or Performance Improvement Initiatives					
<b>Maternal Child Health (MCH)</b> presented by Mona Maloney MSN, RN, NCC-EFM, RNC - OB & Danielle Rush BSN, RN, NIC ----- Evidence Based Project: Maternal hemorrhage	This is a DOH, AWOHN and Motherhood initiative to improve patient safety by measuring/ quantifying blood loss (QBL) vs. estimating blood loss (EBL).  <b>Outcome Measurement</b> - Reduction in emergency blood transfusions.  M. Maloney stated that the scales were purchased and we are awaiting delivery to the units.  Need to ensure the: - Policy changes - Standards of Practice, move away from EBL to QBL	Alicia Mulvena RN in Organizational Development stated that the education was ready to go in Healthstream, however the new policies need to be signed.	M. Maloney would discuss with the MCH Director, Yve Lauture-Jerome RN	<input checked="" type="checkbox"/> Transformational Leadership  <input checked="" type="checkbox"/> Structural Empowerment  <input checked="" type="checkbox"/> Exemplary Professional Practice  <input checked="" type="checkbox"/> New Knowledge, Innovations and Improvements	<input checked="" type="checkbox"/> People  <input checked="" type="checkbox"/> Patient Experience  <input checked="" type="checkbox"/> Quality  <input checked="" type="checkbox"/> Financial Performance  <input checked="" type="checkbox"/> Operations

<b>M Maternal Child Health (MCH)</b> presented by Judy Kennedy BSN, RNC  Evidence Based Project: Transcutaneous bilirubin measurement.	Prevention of needle stick for babies that meet a certain criteria. <ul style="list-style-type: none"> <li><b>Outcome Measurement -</b> Improve Patient Experience</li> </ul> J. Kennedy shared the project has been rolled out and going well.		Continue to educate in MCH.	<input checked="" type="checkbox"/> Transformational Leadership <input checked="" type="checkbox"/> Structural Empowerment <input checked="" type="checkbox"/> Exemplary Professional Practice <input checked="" type="checkbox"/> New Knowledge, Innovations and Improvements	<input checked="" type="checkbox"/> People <input checked="" type="checkbox"/> Patient Experience <input checked="" type="checkbox"/> Quality <input checked="" type="checkbox"/> Financial Performance <input checked="" type="checkbox"/> Operations
5South presented by Tammy Wilson BSN, RN-BC  Evidence Based Project: Video and Brochure on Patient Rounding	Multimodal approach to Patient Education. <ul style="list-style-type: none"> <li><b>Outcome Measurement:</b> Improved communication with nurses and reduction of falls.</li> </ul> T. Wilson shared the Video is being shown to the patients. There are still concerns with the Allen TVs working appropriately as well as the dangerous arms.  The brochure needed to be updated and will hopefully be finalized soon.  The assignment of the Rounding Champion is only effective when the staffing is at needed level.	Other units expressed interest in creating their own video. J. Kennedy thought the video approach would be great in MCH.  K. Calabro shared that she is tracking 5South's Patient Experience scores regarding communication with nurses and falls	J. Kennedy to pursue the patient rounding video in 2019 for MCH.	<input checked="" type="checkbox"/> Transformational Leadership <input checked="" type="checkbox"/> Structural Empowerment <input checked="" type="checkbox"/> Exemplary Professional Practice <input checked="" type="checkbox"/> New Knowledge, Innovations and Improvements	<input checked="" type="checkbox"/> People <input checked="" type="checkbox"/> Patient Experience <input checked="" type="checkbox"/> Quality <input checked="" type="checkbox"/> Financial Performance <input checked="" type="checkbox"/> Operations

<p>2 Center presented by Kristen Santoro BSN, RN</p> <p><b>Evidence Based Project:</b> “Getting to know me Clouds”</p>	<p>K. Santoro attended a Nurses Improving Care for Healthsystem Elders (NICHE) conference. She saw a way to improve communication with patients who showed signs of delirium. K. Santoro created a form with clouds that the nurses complete with the patient to better understand the patient’s needs.</p> <ul style="list-style-type: none"> <li>• <b>Outcome Measurement:</b> Improvement in communication with nurses.</li> </ul> <p>K. Santoro shared that she had created a pre-test for nurses regarding knowledge of communication with patients with delirium. She did the pre-test in Feb - April and now doing the post-test. The questions are the same in both the pre and post.</p>	<p>K. Santoro and K. Calabro will meet in January to look at the pre and post test results as well as the outcome measurements.</p>	<p>Please reference pages 11-12 of Meeting minutes:</p> <ul style="list-style-type: none"> <li>• Sample page of the “Getting to know me Clouds”</li> <li>• Sample of Patient experience graph</li> <li>• K. Santoro to share the PICO Question.</li> </ul>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Transformational Leadership</li> <li><input checked="" type="checkbox"/> Structural Empowerment</li> <li><input checked="" type="checkbox"/> Exemplary Professional Practice</li> <li><input checked="" type="checkbox"/> New Knowledge, Innovations and Improvements</li> </ul>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> People</li> <li><input checked="" type="checkbox"/> Patient Experience</li> <li><input checked="" type="checkbox"/> Quality</li> <li><input checked="" type="checkbox"/> Financial Performance</li> <li><input checked="" type="checkbox"/> Operations</li> </ul>
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<p>OR presented by Catherine McCarthy BSN, RN and Lorrie Presby RN</p> <p><b>IRB Approved Multi Site Study:</b></p> <p>“What is the Effect of an Educational Intervention on Perioperative Registered Nurses Knowledge, Attitudes, Behaviors and Barriers toward Pressure Injury Prevention in Surgical Patients?”</p>	<p>C. McCarthy stated that the following was completed:</p> <ul style="list-style-type: none"> <li>• pre-test (before education)</li> <li>• post-test1</li> </ul> <p>Post-test2 will be completed in February.</p>	<p>Council members all cheered for Lorrie Presby who is retiring on 12/21/18. Lorrie shared that we will see her on a per-diem basis and she plans to help with the final phase of the study.</p> <p><b>Best of Luck to Lorrie!</b></p>	<p>Post-test phase of research study to be performed in Feb. 2019.</p>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Transformational Leadership</li> <li><input checked="" type="checkbox"/> Structural Empowerment</li> <li><input checked="" type="checkbox"/> Exemplary Professional Practice</li> <li><input checked="" type="checkbox"/> New Knowledge, Innovations and Improvements</li> </ul>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> People</li> <li><input checked="" type="checkbox"/> Patient Experience</li> <li><input checked="" type="checkbox"/> Quality</li> <li><input checked="" type="checkbox"/> Financial Performance</li> <li><input checked="" type="checkbox"/> Operations</li> </ul>
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<p>Wound care presented by Dianna Pollock BSN, RN</p> <p><b>Evidence Based Project:</b> Reduction of TED Stockings</p>	<p>Background: Evidence does not support the use of TED Stockings for better patient outcomes. In fact, TED Stockings can contribute to the development of Hospital Acquired Pressure Injuries. After surveying the physicians, some physicians still felt the TED Stocking prevented other negative patient outcomes (VTEs).</p> <ul style="list-style-type: none"> <li>• <b>Outcome Measurement:</b> 0 HAPI's related to TED Stockings</li> </ul> <p>Wound and Ostomy specialist Deborah Reynolds AAS, RN, CWOCN was determined to reduce HAPIs Related to TEDs. TEDs come in 32 sizes and we are in the process of having all sizes available to all units. Drop-downs in Meditech were added to help the nurse determine the proper size to be ordered.</p> <p>D. Pollock shared that we did have an incidence HAPI related to TEDs in 4<sup>th</sup> Q18. When reviewing the data, the patient had a very large foot and the TEDs were probably not the appropriate size. In the surgical areas the different sizes were not available.</p>		<p>2019 Goals for the Wound Care Team:</p> <ul style="list-style-type: none"> <li>• Wrap up the TED Project. Ensure that all areas have access to the 32 sizes available.</li> <li>• Adopting the Braden Q scale for pediatric patients.</li> </ul>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Transformational Leadership</li> <li><input checked="" type="checkbox"/> Structural Empowerment</li> <li><input checked="" type="checkbox"/> Exemplary Professional Practice</li> <li><input checked="" type="checkbox"/> New Knowledge, Innovations and Improvements</li> </ul>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> People</li> <li><input checked="" type="checkbox"/> Patient Experience</li> <li><input checked="" type="checkbox"/> Quality</li> <li><input checked="" type="checkbox"/> Financial Performance</li> <li><input checked="" type="checkbox"/> Operations</li> </ul>
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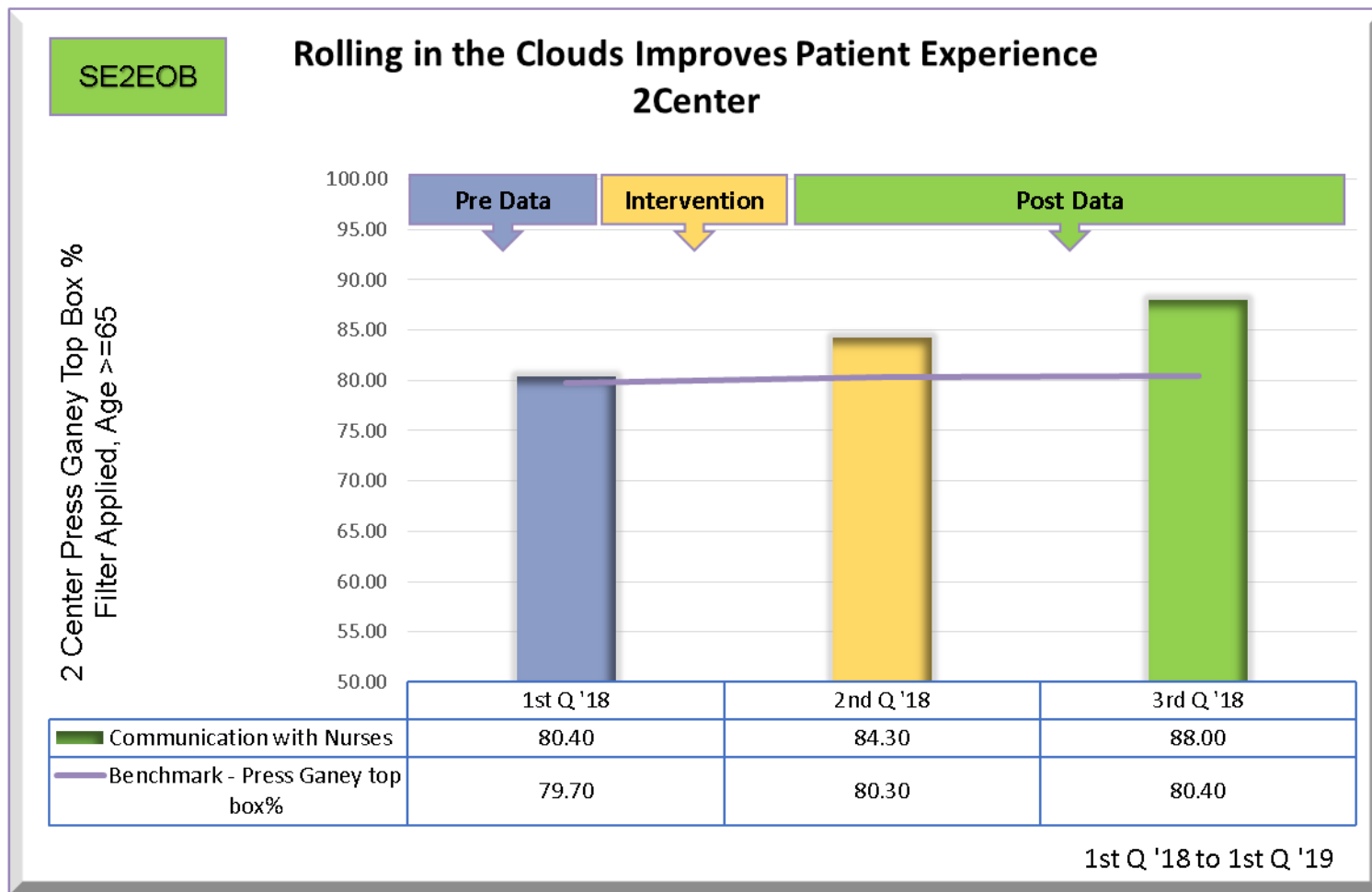


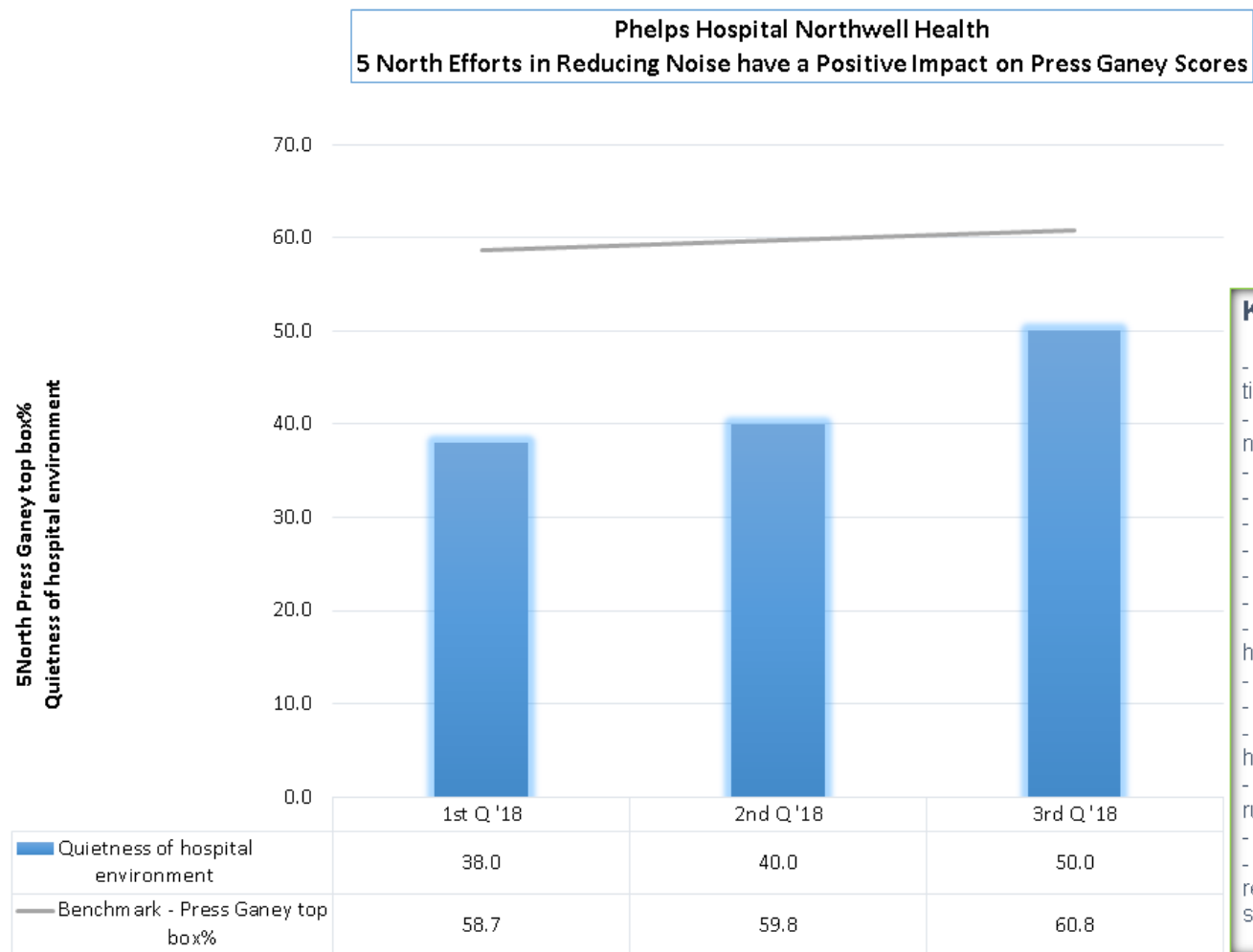
<p>2North presented by Kierra Gonzalez MSN, RN-BC</p> <p><b>PI Project:</b> Use of Allen TVs to Improve Patient Education regarding Medication.</p>	<ul style="list-style-type: none"> <li>• <b>Outcome Measurement:</b> Patient Experience data involving communication about meds.</li> </ul> <p>K. Gonzalez shared that the nurses continue to try to use the Allen TV to educate the patients on Medication.</p>	<p>K. Calabro said the Allen TV Education appeared to have an impact on the Patient Experience data regarding Education on Medication.</p> <p>When the Allen TV Compliance improved, our scores were higher; When the Allen TV Compliance dipped, our scores were lower.</p>	<ul style="list-style-type: none"> <li>• K. Gonzalez to continue to track the Allen TV Compliance.</li> <li>• K. Calabro to continue to graph the patient experience data regarding Patient education and Medication.</li> </ul>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Transformational Leadership</li> <li><input checked="" type="checkbox"/> Structural Empowerment</li> <li><input checked="" type="checkbox"/> Exemplary Professional Practice</li> <li><input checked="" type="checkbox"/> New Knowledge, Innovations and Improvements</li> </ul>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> People</li> <li><input checked="" type="checkbox"/> Patient Experience</li> <li><input checked="" type="checkbox"/> Quality</li> <li><input checked="" type="checkbox"/> Financial Performance</li> <li><input checked="" type="checkbox"/> Operations</li> </ul>
<p>ICU presented by Karen Barger BSN, RN, CCRN</p> <p><b>Research Study</b> “The effects of lavender essential oil on sleep in hospitalized adults”</p>	<p>Multi-site study preparing for scientific review.</p> <ul style="list-style-type: none"> <li>• <b>Outcome Measurement:</b> To be determined</li> </ul> <p>K. Barger shared that ICU using various methods to improve the patients stay:</p> <ul style="list-style-type: none"> <li>• Weighted blankets</li> <li>• Coordination of care to limit disruptions.</li> <li>• Diffusers</li> </ul>		<p>This Northwell Multi-site study is pending approval from Nursing Scientific Review.</p>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Transformational Leadership</li> <li><input checked="" type="checkbox"/> Structural Empowerment</li> <li><input checked="" type="checkbox"/> Exemplary Professional Practice</li> <li><input checked="" type="checkbox"/> New Knowledge, Innovations and Improvements</li> </ul>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> People</li> <li><input checked="" type="checkbox"/> Patient Experience</li> <li><input checked="" type="checkbox"/> Quality</li> <li><input checked="" type="checkbox"/> Financial Performance</li> <li><input checked="" type="checkbox"/> Operations</li> </ul>

<p>5 North presented by Candice Johnson BSN, RN</p> <p><b>PI Project:</b> Reduction of Noise</p>	<ul style="list-style-type: none"> <li><b>Outcome Measurement:</b> Patient experience data - “Quietness of hospital environment”</li> </ul> <p>C. Johnson shared that many interventions have been put into place to reduce noise on the unit. The focus has been on the day shift. Now 5 North Nurses are moving toward quiet time at night.</p>	<p>K. Calabro said the 5North’s reduction of noise shows a positive trend.</p>	<ul style="list-style-type: none"> <li>K. Calabro added graph to page 13 of meeting minutes.</li> <li>2019 - 5 North goal is to focus on an evidenced based rounding project.</li> <li>Ann Marie Treanor RN, Senior Administrative Supervisor is creating a quiet time focus throughout the hospital in 2019.</li> </ul>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Transformational Leadership</li> <li><input checked="" type="checkbox"/> Structural Empowerment</li> <li><input checked="" type="checkbox"/> Exemplary Professional Practice</li> <li><input checked="" type="checkbox"/> New Knowledge, Innovations and Improvements</li> </ul>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> People</li> <li><input checked="" type="checkbox"/> Patient Experience</li> <li><input checked="" type="checkbox"/> Quality</li> <li><input checked="" type="checkbox"/> Financial Performance</li> <li><input checked="" type="checkbox"/> Operations</li> </ul>
<p>1 South and BRU by Pat Sullivan AAS, RN &amp; Doreen Wall MSN, RN-BC</p> <p><b>IRB Approved Study:</b> “The effect of Mandala Coloring on Psychiatric Inpatient Anxiety”</p>	<ul style="list-style-type: none"> <li><b>Outcome Measurement:</b> Reduction of anxiety measured by using the Beck anxiety inventory (BAI) tool.</li> </ul> <p>D. Wall shared they will continue to collect patient data until March (study duration 6 months). There are 12 patients currently in the study. There is very stringent criteria that needs to be followed in order satisfy the requirements.</p> <p>1South is still focused on reducing falls with exercise. The Yoga project is on hold.</p> <p>1 South, 4 North and 2 South merged to create a combined behavioral health unit council and it’s been very positive experience.</p>		<ul style="list-style-type: none"> <li>Due to the sample size, this study is considered a “pilot”. After completion, the goal is to recommend a multi-site study.</li> </ul>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Transformational Leadership</li> <li><input checked="" type="checkbox"/> Structural Empowerment</li> <li><input checked="" type="checkbox"/> Exemplary Professional Practice</li> <li><input checked="" type="checkbox"/> New Knowledge, Innovations and Improvements</li> </ul>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> People</li> <li><input checked="" type="checkbox"/> Patient Experience</li> <li><input checked="" type="checkbox"/> Quality</li> <li><input checked="" type="checkbox"/> Financial Performance</li> <li><input checked="" type="checkbox"/> Operations</li> </ul>

# Getting to Know Me







#### Key Interventions:

- **Quite time** from 1530-1630, Harp announces quite time.
- A&OX3 patient pup volumes turned down to level 3 at night.
- Call bell system placed on nighttime mode at night.
- Staff education.
- Reminders to keep voices down.
- No call bell pass zone.
- No pump alarm pass zone.
- Patient education.
- Staff encourage use of sleep masks, ear plugs and headphones.
- Med cart moved to end of hall.
- Hall lights off at 2230 to promote quietness.
- Signs for whisper unit and quite promotes healing hung throughout.
- Tea bells placed at nurses' station that can be gently rung as a reminder when staff is getting too loud.
- Closing unit door 0000-0500.
- Patient survey to obtain additional information regarding noise. Review feedback, comments and suggestions.