

| Meeting Name                              | CNO Advisory Council   |  |  |   |  |
|---|--|--|--|---|--|
| Location                                  | Atrium   |  |  |   |  |
| Date                                      | 6/19/2019  3:00 pm - 5:00 pm   |  | <b>Council/Meeting Minutes</b>   | Please check off all components and indicators that relate to each topic being discussed.   |  |
| Time                                      |  |  |  |   |  |
| <b>Conducted By</b>                       | Mary McDermott, MSN, RN, NEA-BC  |  |  |   |  |
| Recorder                                  | Kathleen Calabro, Magnet Data Analys   | st   |  |   |  |
| Topic/<br>Facilitator                     | Discussion   | Staff Input & Feedback   | Action   | Magnet<br>Components  | Strategic Plan<br>Indicator  |
| Review of previous minutes from 5/15/2019 | Prior to reviewing the meeting minutes, Mary wanted to share how she was so moved at a Board of Trustees meeting she attended. There was a grateful patient who talked about his journey in the hospital battling esophageal cancer. He was a professional singer and his story was so touching. | Minutes approved - no changes required   |  | <ul> <li>☒ Transformational Leadership</li> <li>☒ Structural Empowerment</li> <li>☒ Exemplary Professional Practice</li> <li>☒ New Knowledge, Innovations and Improvements</li> </ul> | <ul> <li>☑ People</li> <li>☑ Patient         Experience</li> <li>☑ Quality</li> <li>☑ Financial         Performance</li> <li>☑ Operations</li> </ul>   |
| Uniforms                                  | The long awaited uniforms are in! Additional fittings will be scheduled for the RNs that were not able to make the May fitting. The benefit here is it's a step process: try on, place order and gets shipped to your house. There is not out of pocket expense.                                 | The infusion center did receive their uniforms. The top is comfortable, stretchy but just slightly see-through. May need to wear a cami underneath.  The staff asked for the 2019 benefits, could we order navy pants. | Mary checked with Rosendy who then checked with the vendor. Yes, we will be able to mix the next order at end of year with tops and bottoms. | <ul> <li>☑ Transformational Leadership</li> <li>☑ Structural Empowerment</li> <li>☐ Exemplary Professional Practice</li> <li>☐ New Knowledge, Innovations and Improvements</li> </ul> | <ul> <li>☑ People</li> <li>☑ Patient</li> <li>Experience</li> <li>☑ Quality</li> <li>☑ Financial</li> <li>Performance</li> <li>☑ Operations</li> </ul> |



| Irma Tertulien,<br>MSN, RN, C-<br>EFM follow up<br>from April. | Irma shared that Angela Adjetey sent an email with update on the residual/dead volume EBP/PI project.  Pilot is currently in progress  As a follow-up to the May discussion,   | Judy Dillworth, PhD, RN,   | Mary suggested we invite Maureen  | <ul> <li>☑ Transformational Leadership</li> <li>☑ Structural</li> <li>Empowerment</li> <li>☑ Exemplary</li> <li>Professional Practice</li> <li>☑ New Knowledge,</li> <li>Innovations and</li> <li>Improvements</li> </ul> | <ul> <li>☑ People</li> <li>☑ Patient         Experience</li> <li>☑ Quality</li> <li>☑ Financial         Performance</li> <li>☑ Operations</li> </ul> |
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| and "I pass the baton"   | team steps is going well. Each unit has a different process for the bedside shift report.  • 5 North keeps in a binder.  • 3 North writes info in bedside shift report that keeps the history of pt. stay  • 5 South RNs write their own rpt at change of shift.  ED to floor:  - ED should be calling or use vocera - missing key fields  - Patients coming up in 7 minutes as opposed to the agreed upon 15 minutes. | NEA-BC, CCRN-K, FCCM asked if the report can pull the info from meditech or could something be built in meditech?  Katherine Urgiles, BSN, RN thought a communication section would be helpful: - Non-administered section (Med is considered late if never given yet there may be a valid reason) Doctor ordered BP meds with parameters. | Lopez to the CNO Council. Maureen is the Director of CIS Nursing, Northern Westchester / Phelps. She may be able to answer some of the meditech questions. K. Calabro to send an invite to Maureen.  Still issues with missing key info when pt. transferred from ED to floor so will keep on the agenda.  Mary to bring concerns to proper channels. | <ul> <li>☒ Transformational Leadership</li> <li>☒ Structural</li> <li>Empowerment</li> <li>☒ Exemplary</li> <li>Professional Practice</li> <li>☒ New Knowledge,</li> <li>Innovations and</li> <li>Improvements</li> </ul> | <ul> <li>☑ People</li> <li>☑ Patient         Experience</li> <li>☑ Quality</li> <li>☑ Financial         Performance</li> <li>☑ Operations</li> </ul> |
| Joint<br>Commission<br>Preparedness                            | Mary shared that we are in the Joint Commission window. They have been running 3 months early so we expect them soon.  Focus:  Disinfecting Hand washing   | "Bring Em On!" was the council's reaction  Susanne Neuendorf BSN, RN, NCC-EFM expressed concern with MCH temporarily moving to 3   | Survey will probably be in July or September.  We need constant staff readiness - Please make sure to check your unit.  | <ul> <li>☑ Transformational Leadership</li> <li>☑ Structural Empowerment</li> <li>☑ Exemplary Professional Practice</li> <li>☑ New Knowledge, Innovations and Improvements</li> </ul>                                     | <ul> <li>☑ People</li> <li>☑ Patient         Experience</li> <li>☑ Quality</li> <li>☑ Financial         Performance</li> <li>☑ Operations</li> </ul> |



| Compensation & Benefits                          | • Suicide  | North. Rooms are so different. Yve trying to get standalone carts.  Mary shared that move is delayed unit 1 July 1.  Irma was wondering how the holidays effect the infusion center.  Mary said we will need to figure things out in 2020. We will probably need on call staff for those holidays in PACU  Lauren Guardino, BSN, RN shared how difficult that 13th shift can be. You do have the ability to use your PTO time. | Follow up from a previous CNO Council Meeting - the per-diem rate was questioned. Mary shared that we are currently analyzing the rate along with other elements and will share when finalized.  | <ul> <li>☑ Transformational Leadership</li> <li>☑ Structural Empowerment</li> <li>☑ Exemplary Professional Practice</li> <li>☑ New Knowledge, Innovations and Improvements</li> </ul> | <ul> <li>✓ People</li> <li>✓ Patient</li> <li>Experience</li> <li>✓ Quality</li> <li>✓ Financial</li> <li>Performance</li> <li>✓ Operations</li> </ul> |
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| Nursing Website<br>presented by<br>Kathy Calabro | Kathy shared the updates to the nursing website: - Nurses Week Pictures - EBP Poster Presentations - Events - Journal Club Pain Article Added Co-Chair interest? |  | Please encourage your units to use the website. Would love for all nurses to read the journal articles and share their voice.  If anyone is interested in co-chairing the journal club, please contact Kathy Calabro. (does count for the career ladder) | <ul> <li>☑ Transformational Leadership</li> <li>☑ Structural Empowerment</li> <li>☑ Exemplary Professional Practice</li> <li>☑ New Knowledge, Innovations and Improvements</li> </ul> | <ul> <li>☑ People</li> <li>☑ Patient         Experience</li> <li>☑ Quality</li> <li>☑ Financial         Performance</li> <li>☑ Operations</li> </ul>   |



| Unit Reports   |  |  |   |  |  |  |  |
|--|--|--|---|--|--|--|--|
| PACU presented<br>by Eden Simms,<br>BSN, RN,<br>CPAN         | Eden distributed the revamped Pre-Operative Surgical Check list.  Not part of the patient record.  | If anyone has feedback regarding the surgical check list please email Edeesimms@northwell.edu  Attached to end of document |   | <ul> <li>☑ People</li> <li>☑ Patient         Experience</li> <li>☑ Quality</li> <li>☑ Financial         Performance</li> <li>☑ Operations</li> </ul> |  |  |  |
| MCH presented<br>by Susanne<br>Neuendorf BSN,<br>RN, NCC-EFM | Qualitative Blood Loss (QBL) Project is 1 step closer.  ✓ Education has been completed Should be up and running soon.  |  | <ul> <li>☑ Transformational Leadership</li> <li>☑ Structural Empowerment</li> <li>☑ Exemplary Professional Practice</li> <li>☑ New Knowledge, Innovations and Improvements</li> </ul> | <ul> <li>☑ People</li> <li>☑ Patient         Experience</li> <li>☑ Quality</li> <li>☑ Financial         Performance</li> <li>☑ Operations</li> </ul> |  |  |  |
| 5 South<br>presented by<br>Lauren<br>Guardino, BSN,<br>RN    | Handing out brochures upon admission to the unit.  A lot of the staff working on their PCCN.  Stroke education - need education for Endovascular Neurosurgery program. |  | <ul> <li>☑ Transformational Leadership</li> <li>☑ Structural Empowerment</li> <li>☑ Exemplary Professional Practice</li> <li>☑ New Knowledge, Innovations and Improvements</li> </ul> | <ul> <li>☑ People</li> <li>☑ Patient         Experience</li> <li>☑ Quality</li> <li>☐ Financial         Performance</li> <li>☐ Operations</li> </ul> |  |  |  |



| 5 North<br>presented by<br>Candice<br>Johnson, BSN,<br>RN    | 5 North is still focused on quiet time and improving the patient experience.  Also looking to get more people chemo certified. Should we make it required if work on that unit?  Candice is excited to be the PI for the NICER Study. Hospitalist will stay overnight in a patient room to get the full patient experience. They will be co-horted  |                    | Mary to discuss with Paula and Barbara regarding the need for chemo certified RNs on 5 North. | <ul> <li>☑ Transformational Leadership</li> <li>☑ Structural Empowerment</li> <li>☑ Exemplary Professional Practice</li> <li>☑ New Knowledge, Innovations and Improvements</li> </ul> | <ul> <li>☑ People</li> <li>☑ Patient         Experience</li> <li>☑ Quality</li> <li>☐ Financial         Performance</li> <li>☐ Operations</li> </ul> |
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| 3 North<br>presented by<br>Katherine<br>Urgiles, BSN,<br>RN  | Katherine shared that she is so proud of her unit. For the first time, they are 80% compliant with utilizing the ALLEN TV for medication education. The patient satisfaction scores for medication education was at 100%! Katherine stressed how important it is for her patient to understand why they are taking certain medications and possible side effects. They have a printout of the medication information for the patients that prefer a printout and that information is clear and concise. | Way to go 3 North! |   | <ul> <li>☑ Transformational Leadership</li> <li>☑ Structural Empowerment</li> <li>☑ Exemplary Professional Practice</li> <li>☑ New Knowledge, Innovations and Improvements</li> </ul> | <ul> <li>✓ People</li> <li>✓ Patient         Experience</li> <li>✓ Quality</li> <li>✓ Financial         Performance</li> <li>✓ Operations</li> </ul> |
| 1 South<br>presented by<br>Kim Lidke-<br>Ahlberg, AAS,<br>RN | Kim shared how difficult it is especially on the weekends to attend to a patient who is out of control. There is a pcych NP but that NP cannot order an intramuscular injection. The nurse will have to contact the hospitalist. BRU - lot of new people 1south split visiting hours and think will help all around   |                    | Laws may be changing, Mary to research.   | <ul> <li>☒ Transformational Leadership</li> <li>☒ Structural Empowerment</li> <li>☒ Exemplary Professional Practice</li> <li>☒ New Knowledge, Innovations and Improvements</li> </ul> | ☐ People ☐ Patient Experience ☐ Quality ☐ Financial Performance ☐ Operations   |



| Infusion Center presented by Irma Tertulien, MSN, RN, C-EFM | Body map - trying to implement hospital wide. ECT - Night shift auditing charts.  The infusion center are fully staffed! A lot of new staff. They are very busy and productive.  Could there be a \$ incentive for educator to train staff?  Parking lot is still a concern  | Mary shared that the hospital is negotiating with Kendal to put a new finish on the parking lot.   | <ul> <li>☑ Transformational Leadership</li> <li>☑ Structural Empowerment</li> <li>☑ Exemplary Professional Practice</li> <li>☑ New Knowledge, Innovations and Improvements</li> </ul> | ☐ People ☐ Patient Experience ☐ Quality ☐ Financial Performance ☐ Operations   |
|---|--|--|---|--|
| Open Discussion  Concerns with room assignments             | Candice expressed concerns on 5 North with what seems to be an increase in rapid responses.  - Maybe patients placed in wrong spot?  Katherine shared that 3 North are getting patients they normally do not have (i.e. shoulder, hip replacements). Katherine concerned of patient falls due to knowledge needed to how to specifically care for those types of patients.  Rose shared on 2 Center they are getting medical patients and they don't have room for ortho patients. | Mary responded that bed assignment is very challenging. Helen shared that there is an additional challenge with keeping the clean patients together. | <ul> <li>☒ Transformational Leadership</li> <li>☒ Structural Empowerment</li> <li>☒ Exemplary Professional Practice</li> <li>☒ New Knowledge, Innovations and Improvements</li> </ul> | <ul> <li>✓ People</li> <li>✓ Patient         <ul> <li>Experience</li> <li>✓ Quality</li> <li>✓ Financial</li></ul></li></ul> |



| Staffing                              | Mary shared that we continue to work on flex staff and having the expertise available.  | Council members shared how when the techs get pulled from the unit it's very difficult.  Mary shared that the telesitter program will be rolled out in August and that should help alleviate techs being pulled.  Katherine asked if we could have a float pool for nurses.   |  | □ Transformational     Leadership     □ Structural     Empowerment     □ Exemplary     Professional Practice     □ New Knowledge,     Innovations and     Improvements                | <ul> <li>☑ People</li> <li>☑ Patient         Experience</li> <li>☑ Quality</li> <li>☑ Financial         Performance</li> <li>☑ Operations</li> </ul> |
|---------------------------------------|---|---|--|---|--|
| Compensation for continuing education | There was discussion whether the current \$7,500/year towards continuing education could be enhanced? Other area hospitals give more. (I.e. NYP, Montefiore).  Catherine is currently looking into Hofstra for continuing education and finding the process very difficult with a lot of unknowns. She knows they guarantee preceptors.  Catherine shared that a lot of nurses want to get their masters. | Mary shared we do have the nurse promise program which is a great benefit.  Mary asked if it would be helpful for Hofstra to come here for an informational session.  Mary has to credential every NP/FNP.  Jen Laffe (NP from Northwell) did a presentation here that is on the nursing website under Shared governance/Professional Practice and Development. | Catherine to get back to Mary regarding Hofstra and the process. | <ul> <li>☒ Transformational Leadership</li> <li>☒ Structural Empowerment</li> <li>☒ Exemplary Professional Practice</li> <li>☒ New Knowledge, Innovations and Improvements</li> </ul> | <ul> <li>☑ People</li> <li>☑ Patient         Experience</li> <li>☑ Quality</li> <li>☑ Financial         Performance</li> <li>☑ Operations</li> </ul> |



| What is going to happen on 2 North? | There has been a lot of discussion and changing plans for 2 North.  - 5 North going to 2 North so that every patient has a private room or  - 4 North to 2 North or ?   | Patient love 3 north They consider it a "VIP floor"  The village will not allow us to build up.  There are lots of exciting new services and we do need to find the best fit.  We purchased a PET Scan and trying to figure out the best place to fit. |  | <ul> <li>☑ Transformational Leadership</li> <li>☑ Structural Empowerment</li> <li>☑ Exemplary Professional Practice</li> <li>☑ New Knowledge, Innovations and Improvements</li> </ul> | <ul> <li>☑ People</li> <li>☑ Patient Experience</li> <li>☑ Quality</li> <li>☑ Financial Performance</li> <li>☑ Operations</li> </ul>                 |
|-------------------------------------|---|--|--|---|--|
| Shifts                              | Candice told Mary that she is passing along a request from a previous council meeting.  Can BRU go to 12 hours shifts?  Irma asked it infusion center could go to 10 hour shifts. She thinks there would be a financial savings due to most of the RNs needed to work overtime.  Lilly said the wound center has a similar issue. | Mary shared that Mary, Suzanne and Rona are looking into it. "Highly probable"   | Mary advised Irma and Lilly to speak to their colleagues, write up a proposal and give to their manager. | <ul> <li>☑ Transformational Leadership</li> <li>☑ Structural Empowerment</li> <li>☑ Exemplary Professional Practice</li> <li>☑ New Knowledge, Innovations and Improvements</li> </ul> | <ul> <li>☑ People</li> <li>☑ Patient         Experience</li> <li>☑ Quality</li> <li>☑ Financial         Performance</li> <li>☑ Operations</li> </ul> |



June 11, 2019

Dear Colleague,

Phelps strives to maintain a compensation and benefits program that is competitive with similar organizations in our local market in order to attract and retain the most qualified and professional team members. In March of this year we made you aware that we were reviewing mid-year enhancements to compensation and benefits that were anticipated for 2019. These enhancements also continue our efforts to integrate into the Northwell system.

We are pleased to inform you of the following changes that will be implemented effective July 7, 2019:

- **1. Overtime** for those eligible to receive overtime pay...
  - If the standard full-time work hours for your job are scheduled at 37.5 hrs./wk. and you are eligible for overtime, overtime will apply to hours worked after 37.5 hrs./wk.
  - If the standard full-time work hours for your job are scheduled at 40.0 hrs./wk. and you are eligible for overtime, overtime does not change for you and continues to apply to hours worked after 40.0 hrs./wk.
  - For those nurses eligible to receive overtime who are paid using a "smoothing" schedule, i.e. a schedule that pays you based on 75 hours of work per bi-weekly pay period, overtime will be calculated beyond 75 hrs. paid in that pay period.

## 2. On-Call

The on-call pay rate will increase from \$9.00/hr. to 12.00/hr. Additionally, there will be a *new* on-call pay rate of \$13.00/hr. for weekends (11pm Friday – 7am Monday) and holidays (11pm eve of holiday to 11pm day of holiday).

## 3. Holidays

You have asked us to standardize the Phelps observed holidays with Northwell's calendar. We heard you! Effective January 1, 2020, Phelps will observe the same holiday calendar as Northwell. The following observed holidays, unless otherwise specified, will be:

- New Year's Day
- Martin Luther King Jr.'s Birthday
- President's Day
- Memorial Day

- Independence Day
- Labor Day
- Thanksgiving Day
- Christmas Day

In addition, we continue to review our compensation and benefits programs to maintain market competitiveness. Market reviews using surveys based on local & regional data are currently being conducted. We will keep you informed as we make additional efforts to enhance compensation and benefits during calendar year 2019.

We value your commitment to Phelps Hospital and to our mission. Thank you for all that you do to support our Culture of Care for every patient, every time.

Daniel Blum
President & CEO

Mary McDermott

SVP of Patient Care Services/CNO

Mary mcdemoth

## **Pre-Operative Surgical Checklist**

## **Patient Label Here**

| Date/Time: |  |
|------------|--|
|            |  |

| ALLERGIES:                                       | COMMENTS:             |    |  |  |
|--|-----------------------|----|--|--|
|  |                       |    |  |  |
|  |                       |    |  |  |
|  |                       |    |  |  |
| Latex Allergy Type                               | Escort/Phone:         |    |  |  |
| NPO since am/pm                                  | PSA Phone Assessment: |    |  |  |
| Height: ft in. SCALE WEIGHT:                     | _ kg                  |    |  |  |
| VS (day of surgery): T BP P                      | R O2                  |    |  |  |
| Time of last void: am/pm Bladder Scan:           |                       |    |  |  |
| Anticoag: Last dose                              | e (date/time):        |    |  |  |
| Beta Blocker: Last dose                          |                       |    |  |  |
| Accucheck: Last checked (date/time):             |                       |    |  |  |
| PLEASE INITIAL WHEN COMPLETE                     | ASU/Floor             | OR |  |  |
| Double Identifier verified                       |                       |    |  |  |
| DNR: In Effect Waived Consent DNR changed?       |                       |    |  |  |
| Isolation Precautions: Yes No Type               |                       |    |  |  |
| ERAS/Bundle Protocol: Yes No                     |                       |    |  |  |
| Test Results on chart (CBC/EKG for patients 50+) |                       |    |  |  |
| Urine HCG complete (12 - 55 years)               |                       |    |  |  |
| Type & Screen complete                           |                       |    |  |  |
| IV site intact and patent                        |                       |    |  |  |
| Antibiotic present on chart                      |                       |    |  |  |
| Jewelry Clothing Prosthetics removed             |                       |    |  |  |
| Implants or metal?                               |                       |    |  |  |
| Anti-embolim stockings applied                   |                       |    |  |  |
| Site and Laterality confirmed                    |                       |    |  |  |
| Site marked by Surgeon (conforms to policy)      |                       |    |  |  |
| Medical Clearances on chart                      |                       |    |  |  |
| Surgeon H&P < 30 days old on chart               |                       |    |  |  |
| Home Medication List on chart                    |                       |    |  |  |
| CPPP New on Chart (Inpt only)                    |                       |    |  |  |
| Surgical Consent complete                        |                       |    |  |  |
| Blood Consent complete                           |                       |    |  |  |
| Anesthesia Consent complete                      |                       |    |  |  |
| Signature/Initials:                              | Signature/Initials:   |    |  |  |
| Signature/Initials:                              | Signature/Initials:   |    |  |  |
| Signature/Initials:                              | Signature/Initials:   |    |  |  |