



Phelps Hospital Nursing News July 2020



Celebrations:

Daniella Gavilanes, MST of 3North graduated from Dominican College with her BSN.

Latonia Edwards, MST of 5 North graduated from Mercy College with her BSN.

Meaghan McKiernan, MST of 5 North graduated from Sacred Heart University with her BSN.

Carmy Guangalli, RN of MCH received her NCC certification for External Fetal Monitoring.

Catalina Chistol, MST of 2Center passed her NCLEX exam.

RN Residency Graduation:

On July 10, 2020 five nurses, who started as new graduates in September 2019, officially completed the Northwell Health System RN Residency program at Phelps Hospital. RN Residency programs are recognized nationally as best practice in supporting new nurses as they transition from the academic setting to professional practice. **Regina Diffley (2 Center), Anthony Mensah (5 North), Jessica Patino (2 Center), Casey Root (5 North) and Kathryn Scherf (3 North)** participated in monthly education classes on various clinical and professional development topics such as cardiac arrest management, critical thinking, leadership, patient experience and stress management. Residents also participated in 3 hour classes on evidence based practice with Peggy Tallier, MPA, EdD, RN, Coordinator of Evidence Based Practice and Research. At 6 months, the residents were invited to participate in a year-long mentoring program with experienced nurse mentees. The residency program culminated with a graduation where the residents presented their EBP project on Pain Assessment (in the post-op knee replacement older adult patient) to directors, managers, educators and mentors. Thank you to Mary McDermott, SVP of Patient Care Services and CNO; Paula Keenan, Nursing Director Med Surg; Marilyn Maniscalco, Nurse Manager 2C; Ellen Parise, Nurse Manager 3N and Barbara Vetoulis, Nurse Manager 5N who supported and facilitated scheduling so the residents were able to attend classes. To all the presenters, including the Clinical Educators, RN Wound Specialist, emergency medicine instructors, interdisciplinary department leaders and the Education Specialists, thank you for sharing your time and expertise with the residents. Special thanks to Peggy Tallier for being flexible and resuming the EBP classes virtually during the COVID surge period.

Best of luck to our new residency graduates on your continued journey as Phelps professional nurses!

Nursing Standards:

Please review the attached document regarding changes/updates to Standards.

Medication Safety News:

When recording a telephone order for a medication hold it is best practice to write down the date and time of the specific dose as it appears on the eMAR for when the hold will commence.

Example is: Hold Heparin 5,000 units SQ beginning with the 6/01/2020 at 2359 hours dose.

Northwell Educational Opportunities:

Annual Nursing Research Conference (Virtual) on November 12th. More information to follow. There is a call for Abstracts and Poster Presentations for this conference- see the attached flyer.

Organizational Development Department Classes: If you are not going to attend a class for which you have registered, please cancel the registration. There are often waitlists for attendees who could attend in your place. Please support your peers and communicate that you will not be attending.

You will be notified if there is any change in classes that you registered for. Register in iLearn.

- **EBP Workshop**, July 30th 12-4pm & September 18th, 9a-1pm.
- **Preceptor Workshop**, August 13th, 8:30a-4:30pm
- **Conflict and Delegation**, September 1st, 8:30a-4:30pm.

BLS Classes – BLS classes have resumed. The classes will be smaller in size to accommodate proper distancing. Please call Organizational Development to register for a class if your card is expiring.

Magnet Moments:

We will participate in our **Virtual Magnet Site visit Wednesday August 19 – Friday August 21, 2020.**

Using Microsoft Teams, the Magnet appraisers will virtually "visit" Phelps to meet all of you.

We were lucky to learn more about the visit from 6 different Northwell Magnet Program Directors. They shared that the Magnet appraisers "read the book and now they want to watch the movie". During every session conducted, my peers were all very impressed with your passion, warmth and commitment to excellent patient care, before, during and after COVID-19. We are all so very proud of all of you, as you shared what you do every day.

Here are some of the findings from our "dress rehearsal" held Tues (7/14) and Wed (7/15).

Sessions typically started with **introductions**: identifying yourself (name, title (Clinical nurse II), unit where you work and years experience) and being able to talk about what you do every day.

From the introductions, the appraisers easily identified **themes**, which they wanted to hear more about (to "amplify"). The sessions flowed as you listened to each other and confirmed and/or elaborated on what was said ("piggybacking"). There was an obvious connection of "themes" from the breakfasts and nurse leader meetings to the shared governance council meetings, lunch and unit sessions. Some examples of the themes you spoke about were: your focus on the patient/family as part of the PPM, goals aligned with the strategic plan, teamwork during COVID-19 and support to work in a safe environment, leader/educational support & advocacy for your ideas/use of EBP, educational opportunities, shared governance, mentoring etc.

If the appraisers ask to identify **challenges**, or what keeps you up at night, remember that Magnet is about *process improvement*. Some examples may include getting back to some of the goals you had pre-COVID (e.g. challenges with falls, HAPIs) and plans for the future. Identify opportunities your unit or Phelps as an organization are looking at to provide even better care.

The MPDs suggested that if every one is prepared is to say "what you are most proud of" about: 1) the organization, 2) your unit and 3) specific outcomes achieved, then you can "pivot" to answer any question the appraiser may have.

We continued to hold our **Shared Governance Council meetings** on Wed 7/15 and used some of the time for the dress rehearsal. Please ask the nurses who participated in these meetings about their experience. You may want to highlight some of the "themes" they talked about during your unit sessions.

I am sorry that some of you tried to "call in" and were unable to do so. Since we needed to test Microsoft teams with just the 3 appraisers calling in, we asked all council members to be present. The opportunity to "call in" to council meetings was identified as a good method to ensure communication and be sure to say you generally call in, especially if you work nights. We will resume "calling in" during the September meetings.

We know the Magnet appraisers will meet with the nurses who participate in each of the Shared Governance Councils (RRR, New Knowledge & Innovation, Professional Practice & Development, Quality & Safety, CNO Advisory, APRN Council). Since the visit is from August 19-21, it is not possible to hold Shared Governance council meeting day on the 3rd Wed (Aug 19) as we usually do. The council meetings will be interspersed through the three day visit. I am currently working on the actual virtual Magnet site visit agenda with the lead appraiser and will share this agenda as soon as it is finalized. Please work with your nurse managers to be here on the day of your council meeting so that you can participate.

Once the schedule is finalized, you will know who is invited to each session. Right now, we know they will visit every inpatient and ambulatory unit for about 30 min. The time will go by fast and everyone should have an opportunity to speak. It is a good idea to get together and decide what each person will talk about. You may want to comment on why you came to Phelps, why you love it here or why you stay here. The appraisers love it when you “piggyback” on each other – or build conversations upon each other (this amplifies what we say we do). If you participated in the dress rehearsal, please share your experience with your peers and colleagues so they can prepare too. Don't hesitate to vocera or call me at x3509 if you have any ?s.

We also learned that we need RN "escorts" to take the appraiser WOW from session to session, ensure attendance is taken and to make sure each session begins and ends on time. Interested? Please let your nurse manager and Judy know as soon as possible.

You have all worked very hard to provide exemplary care and deserve to be recognized by the ANCC as Magnet nurses! You are and will be awesome!

With utmost pride and hugs,

Judy

Dates to Remember:

August 19-21: Virtual Magnet® Site Visit

Judy L. Dillworth, PhD, RN, CCRN-K, NEA-BC, FCCM
Magnet Program Director

Nursing Promise Program: Nursing Promise is a donor-funded program providing incentive and financial assistance for Phelps Hospital Northwell Health employees beginning or advancing a career in nursing.

Employees accepted into Nursing Promise receive an annual grant from Phelps to assist with expenses.

Nursing Promise supports two paths to a BS in Nursing. Employees may earn a Bachelor's in Nursing, or if already an RN one may pursue an RN to BS in Nursing program.

Nursing Promise Scholars

- Must be accepted and enrolled in an accredited program to earn a BS degree in nursing.
 - Must complete their degrees within four semesters in two consecutive years. No award is given for less than two semesters.
- Complete “*Work Promise*” after graduation as defined in the policy in lieu of repayment of cash stipend.

If you will be starting class in the Fall 2020 semester, the application for Nursing Promise is due by August 1st.

If you are interested in applying please contact Alicia Mulvena of Organizational Development for an application, contact info is: amulvena@northwell.edu. Or 914-366-3165.

Perioperative News: Successful first-time surgeries at Phelps:

June was an eventful month for the OR staff!

- On June 24th, Dr. Silva and Dr. Jourdy conducted the first endoscopic, transnasal, transphenoidal approach pituitary gland tumor resection.
- On June 26th, Dr. Whitehead performed his first gender-affirming surgery.
- Bringing new OR procedures to a hospital is a complicated process. A significant amount of behind-the-scenes work takes place to ensure that surgical cases go off without a hitch. Staff need to be educated on the procedures, new equipment, and intra-op care of the patient during surgery. Thanks to all of the personnel who were involved in making these cases a positive experience for our Phelps patients.

KellyAnn Esposito
OR Nurse Manager

Medication Reconciliation: please read the attachment for Reconciliation of PRN Home Medications. If the reason for use is not chosen from the drop down menu it complicates the discharge orders when the patient is leaving.

NICHE:

Phelps- A NICHE HospitalNurses Improving Care for Healthsystem Elders

Dear Staff: please read the information related to NICHE below. NICHE has been part of our culture for about 7 years. Most RNs have completed the initial education. There are many education programs for CEUs on the website along with various tools to assist in best practice for geriatric care. NICHE will be sending you an email within the next week so you may set your passwords and log into the site. When we changed our emails from pmhc to Northwell NICHE had to reset all staff Northwell passwords. So please check your emails under focused and other over the next 1-2 weeks to obtain instructions from NICHE.

Please contact me if any difficulties. Thank you. Cheryl

Background: 25% of inpatient days are used by patients who are 75 yo and older. Older adults have a longer length of stay (7.8 vs 5.4 days), increased hospital readmissions, higher rates of functional decline and med errors, hospital costs 3-5x greater than < 65 yo, account for 50% of hospital spending, 80% of home care visits and 90% of LTC costs.

What is NICHE: NICHE (Nurses Improving Care for Healthsystem Elders) is the leading nurse-driven program designed to help hospitals and healthcare organizations improve the care of older adults. The **vision** of NICHE is for all patients 65 and over to be given sensitive and exemplary care. The **mission** of NICHE is to provide principles and tools to stimulate a change in the culture of healthcare facilities to achieve patient-centered care for older adults. NICHE, based at NYU Rory Meyers College of Nursing has more than 680 hospitals and healthcare facilities in 46 states, Canada, Bermuda, and Singapore. A NICHE designation demonstrates a hospital's organizational commitment and continued progress in improving quality, enhancing the patient and family experience, and supporting the hospital and other healthcare organizations' efforts to serve its communities.

Founded: in 1992 by Terry Fulmer PhD who saw a national need for continuing education and counselling for nurses providing care to older adults. Dr. Fulmer also developed the SPICE tool (Sleep, Pain, Incontinence,

Confusion, Evidence of falls & skin breakdown), a tool used nationally to identify and provide interventions for these identified geriatric syndromes.

NICHE membership: Indicates an organization's dedication to improving care to older adults with resources and tools to achieve and sustain better care and outcomes for older adults.

There are 4 Levels of NICHE achievement: Phelps Hospital is level 4 Senior Friendly

- We have a NICHE Task Force...meets quarterly...multidisciplinary.
- NICHE at Phelps: Joined 2013 Education for RN's and Techs med surg, ortho, stepdown and ICU.
- GRN's Geriatric Resource Nurse GPCA Geriatric Patient Care associate. Education to new hires.
- Phelps Nurses have presented nationally: 2014 Poster Presentation, 2015 Fall prevention and Hydration, 2016 Medication Education/compliance/satisfaction, 2018 Hourly rounds / patient satisfaction-All podium presentations.

Initiatives and Interventions over the years to improve geriatric care: Get Up and Go assessment on admission and prn, Quiet Time, Early delirium recognition and CAM tool, Geriatric videos/music, Last BM documentation, aromatherapy, finger stick lancets (small size for elderly), education info (geriatric fonts/colors), Depends, mitt restraints, busy aprons, dementia pain scale, hourly rounds, Getting to know me clouds.



NICHE NEWS

Deconditioning: The Consequence of Bed rest. A Mobility Shift Assessment Intervention

We know bed rest for our senior patients is associated with numerous adverse negative patient outcomes (also known as geriatric syndromes). These negative outcomes includes pressure injuries, deep vein thrombosis, functional decline, falls, delirium and incontinence.

“Studies indicate that often elderly patients remain in bed 83% of their time while hospitalized and 3% walking. Total inactivity, such as bed rest accounts for 10-20% decrease in muscle strength per week (1-3% per day). Immobile seniors are 6 times more likely to be discharged to long and short term facilities”...even though they were admitted from home. Our Geriatric Resources Nurses on 5N and 2N recognized inactivity as potential for negative patient outcomes. If a patient walks into the hospital...why are they not walking out?

There may be reasons related to diagnosis and changes in physical and mental status that might require a patient to maintain bed rest...but if not... the healthcare team needs to keep both **patient activity** and **increasing patient activity** as part of the patient's daily plan of care. One also needs to remember that OOB to chair is not “being mobile”. Patients with a diagnosis preventing them from leaving their rooms, if able and with an MD order can walk to the bathroom, walk in their room, move their legs on a regular basis and sit in a chair. All patients should have an activity order from the physician with includes type of activity and if assistance and or an assistive device is required. Patient activity should be assessed daily to determine increasing that activity when possible to maintain patient at pre hospital baseline.

Members of the nursing staff of 5N (Amanda Dayton, Kristin Cutaia and Tahler Cambriello) have been working with Dr. Kalra to develop a short mobility assessment to remind staff of present activity but also to visualize day by day progress and/or decline in mobility. The Mobility Assessment intervention will “Go Live” the beginning of August.

A poster or handout will be brought to your unit with the new intervention for you to review over the next week. Please speak with your clinical nurse educator if you have any further questions.

Remember...Nurses Improving Care for the Healthsystem Elders...improves care for all our patients.

Thank You, Cheryl A. Burke MS MBA RN-BC WCC NICHE Coordinator

1.Milanović, Z., Pantelić, S., Trajković, N., Sporiš, G., Kostić, R., & James, N. (2013). Age-related decrease in physical activity and functional fitness among elderly men and women.

Clinical Interventions in Aging, 8, 549–556. <http://doi.org/10.2147/CIA.S44112>

View Mobility Shift Assessment	
MOBILITY	
Out of Bed	<input type="radio"/> Yes <input type="radio"/> No, MD/LIP order (bedrest) <input type="radio"/> Pt refused activity
IF NO or REFUSED assessment is complete.	
Ambulation Ability	<input type="radio"/> Independent <input type="radio"/> 1 Person Assist <input type="radio"/> Minimum Assistance <input type="radio"/> 2 Person Assist <input type="radio"/> Non-ambulatory
Mobility Assistive Devices	<div><input type="checkbox"/> None <input type="checkbox"/> Standard walker</div> <div><input type="checkbox"/> Straight cane <input type="checkbox"/> Rolling walker</div> <div><input type="checkbox"/> Quad cane <input type="checkbox"/> Hemi walker</div> <div><input type="checkbox"/> Forearm crutches <input type="checkbox"/> Platform walker</div> <div><input type="checkbox"/> Axillary crutches <input type="checkbox"/> Wheelchair</div> <div><input type="checkbox"/> Stedy <input type="checkbox"/> Sara</div> <div><input type="checkbox"/> Maximize <input type="checkbox"/> Maxislide</div>
PATIENT ACTIVITY	
Patient Activity	<input type="radio"/> Chair <input type="radio"/> Ambulate <input type="radio"/> Ambulates & Chair
Number of times in Chair	<input type="text"/>
Total length of time in Chair	<input type="text"/> (Hours)
Total length of time in Chair	<input type="text"/> (Minutes)
Number of times Ambulated	<input type="text"/>
Total distance Ambulated	<input type="text"/> (Feet)
ACTIVITY COMMENT	
Activity Comment	<input type="text"/>

CultureVision- a free valuable resource, can be accessed from the Northwell Portal. The site provides culturally diverse information that can be beneficial to clinical and non-clinical employees when providing patient care as well as a tool to learn more about the heritage of our colleagues. Please see the attached flyer.

Mentoring: We are looking for **Nursing Mentors & Mentees** to take part in our exciting new mentorship program! Share your valuable professional experience as a mentor, or learn from experienced professionals as a mentee. Please review the attached flyer.

Updates to the Nursing Website

Please grab your tissue box and head to:

- In the **Spotlight** tab on the Nursing website.
- Go to the bottom and click on **Phelps Sprouts**
- Click on **June's 2020 Sprout Interview**



Thank you to our Phelps Sprout for taking the time out of your busy schedule to share your story or strength, teamwork and gratitude during the pandemic. Make sure to watch the full video where our next sprout to interview is revealed!

Also, thank you to all of you who participated in the Magnet Mock Visit/Dress Rehearsal. Remember to review the **About** section in the Nursing Website where there are links to the: Magnet® Document, Unit Site Visit Guidebooks, and Magnet® Minutes to help prepare for the site visit on **August 19, 20 & 21 - Your Time to Shine!**

Nursing News is compiled, edited, and distributed by: Alicia Mulvena (Organizational Development). If you would like to submit information for publication please contact: Alicia Mulvena, amulvena@northwell.edu, or ext. 3165