#### The Organizational Structure and Support That Enable Direct Care Nurses to Improve the Quality of Care

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#### Meridian Health



#### Meridian Health Nurses

Department of Nursing

Degrees

 Bachelors - 49.2%
 Masters - 8.6%
 Doctorate - 0.5%

 68% Nationally

 Certified



#### The Clinical Nurse Specialty Scholar Program

- Envisioned by Richard Hader, RN, PhD, FAAN, CPHQ, SVP/CNO, Meridian Health
- A New Knowledge and Innovation Magnet Component
- To support and grow the capacity of direct care nurses to lead quality improvement teams that will make a meaningful difference in the quality of care provided.



### The Specialty Scholar Program

• An extension of the Meridian Health Nursing Philosophy to support and nurture each nurse's clinical expertise, ability for creative problem solving, continuing education, shared governance and evidence-based practice.



### The Specialty Scholar Program

- Geriatric Nurse Scholars
- Quality Nurse Scholars
- Research Nurse Scholars
- Evidence Based Nurse Scholars
- Leadership Nurse Scholars



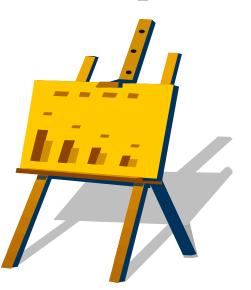
#### The Nurse Quality Scholar (NQS) Program

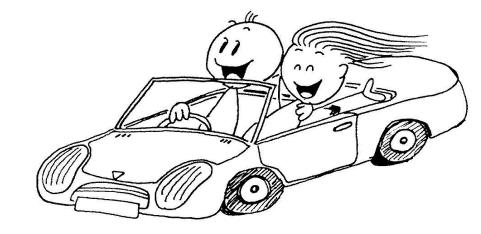
• Teaches nurses how to lead multidisciplinary teams to creatively and methodically examine a problem, work to identify best practice, and implement evidence based practice changes.



### The NQS Program

- Empowers the Direct Care Nurse to apply quality improvement methods and nationally benchmarked data to...
- **Drive** quality improvement teams that result in improved patient outcomes.





### NQS Contract

To become a Nurse Quality Scholar the candidate must:



- Complete a three day curriculum
- Lead a minimum of one quality PDCA project a year and
- Attend at least 70% of the monthly quality scholar meetings.
- Present an annual report in the form of a presentation to peers and leaders

#### Roles and Responsibilities

# Problem Solving



#### Quality Standards





#### Evidence Based Practice with Team Members



#### The Core Curriculum

• Provides the structure, knowledge and expertise needed to equip the new nurse leader for the challenges of team leadership.

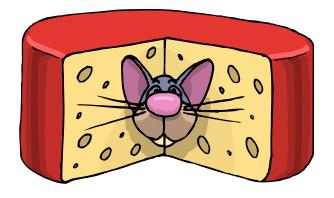


Day 1 – Morning Sessions Everyday Creativity Introduction to Evidence Based Practice The Librarian: (Your New Best Friend)



#### Day 1 – Afternoon Sessions

• Managing Change ("Who Ate My Cheese?")



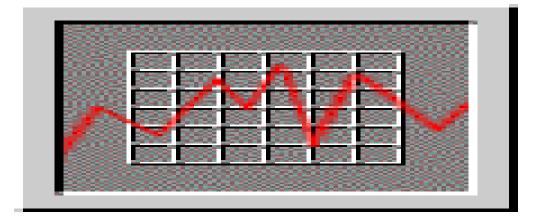
- Team Management/Meeting Planning
- Communication Expectations for Scholars

Day 2 All Day - PDCA Course

• Navigating the Maze



- Day 3 Morning Sessions
- Benchmarking
- Data Interpretation/Analysis
- Indicator Development



Day 3 – Afternoon Sessions

 Working Your Project (Building your charter, developing a plan, identifying PI tools, planning supplies/equipment, building data collection tools, securing plan approval



- Presentation Skills
- Special feature: 2010 "Report Out" Presentation



• 3<sub>1/2</sub>Hour Excel Class



#### **Economic Incentive**



 To emphasize the organization's commitment to the program, and in recognition of the scholar's personal commitment of time and achievements, the scholars are paid for their time during the core curriculum, and earn three dollars an hour above their base pay.

### NQS Support

• Remove Barriers

Allocate Resources



### NQS Support

Peer Nurse Quality Leaders

The Institute for Evidence Based Care

The Booker Library Staff

The Ann May Center for Nursing and Allied Health

#### NQS Facilitator Role

- Participate in the planning, coordination and provision of the Core Curriculum
- Approve project implementation plans
- Plan and oversee monthly Quality Council meetings



#### NQS Facilitator Role

- Provide a timeline for completion
  - Fishbone Diagram, Flowchart, graphs, monthly monitoring





### NQS Facilitator Role

- Send reminders for meetings, paperwork due
- Plan Annual "Report Out" Program
- Prepare scholars for "Report Out" presentations
- Provide ongoing mentoring



### Team Projects

Scholar projects have resulted in system practice changes that include:

- Bed surface management
- Patient Rounding
- Nutritional support for bed bound patients
- Improved staff communication
- Patient education
- Ensuring a safe sleep environment for infants
- Development of pain protocols for our youngest and oldest patients.

### Team Projects

And unit specific practice improvements to:

- Reduce or eliminate pressure ulcers in high risk patients
- Create and implement pain management protocols for neonates and cardiac surgery patients
- Eliminate hypothermia-induced morbidities in neonates
- Reduce the incidence of hypoglycemia in diabetic patients
- Reduce patient falls

#### Benchmarking Source for: Hospital Acquired Pressure Ulcer Rate



Benchmarking Source for: Restraint Rate

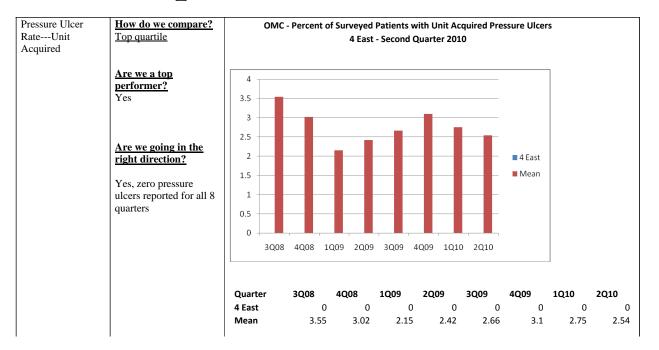


#### Benchmarking Source for:

#### Patient Fall Rate



#### • NDNQI Graph



#### NQS "Report Out" May 5th Presentations

Barbara Paratore, RN, CLIV

• *"Increasing Communication Among Patients and Healthcare the Team"* 

#### Eduardo Iway, Jr., BSN, RN-BC

• *"Increasing Compliance in Documentation of Pain Assessment and Reassessment "* 

Bridget Finnegan, RN, BSN, RNC

• "Preventing Sternal Wound Infections"

Connie Sim, BSN, RN, BC

• "Pressure Ulcer Prevention"

Marie Chisvette, RN, MSN

• "Reducing Pediatric Dosing Errors by Parents" Lisa Soberg, RN, BSN

- *"Reducing Patient Falls by Expanding Staff Education"*
- Marjorie Madison, RN, BSN, CCRN "Less is More"..."Restrictive Blood Transfusion is Better"

Clarice Schwartz, RN, BSN, ONC

- *"Pain Management for the Post Operative Patient"*
- *Quyen Tran, RN-BC, BSN, BS, MSN , MS*

*"Implementing the "Flipper" Program to Reduce the Occurrence of Pressure Ulcers"* 

Kathleen Curto, RN

• *"Shortening NPO Status for Late-Scheduled Cases"* 

#### NQS "Report Out" May 6th Presentations

- Amy Konow, RN
- *"Preventing Pressure Ulcers in Patients Assessed to Be At High Risk"*

Sharon Herlan, RNC

• *"Maintaining a Safe Sleep Environment for Infants"* 

Paris Botazzi, BSN, RN

"Reducing the Rate of Device-Related Pressure Ulcers in the MCU"

Orlene Reid, RNC

- "Reducing the Rate of Hypoglycemia in Patients Nadine Piccolo, BSN, RN-BC
- "Falls Reduction on BR Five"

Maria Brown, RN, BSN

- *"Streamlining the Discharge Process on Ackerman 3 East"*
- Kristine DeGaetano, RN, BSN "Implementation of the Pain Management Protocol for Cardiac Surgery Patients"

Kimberly Pratt, RN, BC

- "Preventing IV Phlebitis" Tracey Nerney, RN, BS
- "Creating a Process to Identify & Trend Potential Complications"

Joan Palermo, RN, BS

• *"Educating Patients about Risk Factors for Cardiac Heart* 

#### NQS Scholars

All of the nurses who have completed at least one year in the program report that their experience has brought them greater expertise in their individual practice, new confidence and a continuing commitment to take on new projects and be true agents of change.

#### Specialty Scholar Program Growth

The initial group of scholars have inspired other nurses to follow in their path.

- Initial program = 19 scholars (2008)
- Present program = 86 scholars (2010)
- Expanding offerings and participants each year

#### NQS Facilitator Experience

It has been my privilege to watch and encourage extraordinary nurses begin to lead their peers and interdisciplinary team members to change practice, and grow in confidence and personal commitment.



#### **References:**

- Definition of Evidence –Based Practice, Sackett et al, 1996.
- <u>Best Nursing Practice Based in Evidence</u>, Sarah Cole Hirsch, Western Reserve University
- <u>Who Moved My Cheese?</u> Spencer Johnson, MD.
- <u>The Improvement Guide, A Practical Approach to</u> <u>Enhancing Organizational Performance:</u> Gerald Langley, Kevin M. Nolan, Thomas W. Nolan, Clifford L. Norman, Lloyd P. Provost, Jossey-Bass Publishers, San Francisco, California.