

Voice of Nursing

Frances Langford Heart Center Nears

By Karen Ripper, Chief Nursing Officer

The "go live" date for cardiac surgery and angioplasty at Martin Memorial is right around the corner. In fact, less than four months from the time this edition is published. The mix of construction and hurricanes has created some difficult circumstances over the past year, but a new era is about to begin. Many of you have expressed quite an interest in the status of the program and how it is shaping up for our opening, which is set for August 1, 2006. The heart center planning team has been meeting every two weeks for the past 12 months and has been diligently working to see that all aspects of planning for success has been included. There are many parts of the planning process I wish to share with you:

Construction has been on time and somewhat ahead of schedule. The four new operating rooms (two of the four are dedicated

to open heart) are completed and the existing ORs have been updated. The OR area now consists of a new nine-bed holding area, new Central Sterile and support/equipment storage areas. There are now a total of nine OR rooms versus eight rooms prior to construction. CVICU (new construction) is complete with eight beds. The remaining construction includes the new 16-bed PACU and an extension of Central Sterile Supply. 6West will be dedicated to CV Stepdown and that area will be equipped with telemetry in April as well as new interiors. The Cath Lab will be equipped with one new unit, thanks to the generosity of benefactors in our community courtesy of the 2005 Chrysanthemum Ball. Cath lab room renovations to retrofit the new unit will begin in April.

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Update on the Clinical Nurse Leader Program

By Barbara Sorbello, MSN, RN, BC, CNA, Assist. VP, Patient Services

Our first four Clinical Nurse Leader (CNL) students from Martin Memorial (Susan Clark, Debbie Neubauer, Kelly Zukowski and Marie Macias) will be completing the first year of their two-year program at the end of this semester. We are currently in the process of planning the selection of the Martin Memorial nurses to start the program as part of the second cohort of CNL students to be starting in the fall at Florida Atlantic University (FAU).

Let me share some information about this first class of CNL students. Twenty-eight students are currently enrolled. There are 11 from Baptist Hospital in Miami, two from Boca Raton Community Hospital, three from JFK Hospital, four from Martin Memorial, four from St. Lucie Medical Center, two from the PB School Nurse Program and one from Children's Medical Services.

The CNL curriculum prepares nurses at the graduate level (MSN) to serve as advocates for the profession and the patient, team manager, outcomes manager and facilitator and coordinator of care for groups of patients within a unit. Their coordination and evaluation of patient care should improve continuity of care, patient outcomes and cost effectiveness.

We are very proud of our first four students who are doing very well in the program, and are looking forward to speaking with nurses who are interested in the role. Dr. Rose Sherman, director of the Nursing Leadership Institute at FAU, and coordinator of the CNL program, will be coming to Martin Memorial in April (date to be announced) for a session at the Medical Center and Hospital South to present the role and curriculum and answer questions. Stay tuned for an announcement on the dates.

I will close this article with comments from some of the students who are members of the first CNL class. Here are their thoughts about the CNL role. I could not say it any better:

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Our Vision

The vision of the Nursing Department at Martin Memorial is to utilize evidence-based practice to continually improve patient outcomes; to enhance nursing autonomy and staff involvement in nursing decisions and shared governance. This is achieved by promoting superior interdepartmental relations and respect through a caring attitude toward patients, physicians and each other, thereby becoming the employer of choice and a Magnet-designated hospital.

Our Mission

The mission of Martin Memorial's Department of Nursing is to facilitate patient self-care utilizing an interdisciplinary, holistic, research-based approach. This mission promotes value, high quality and professional nursing practice, resulting in concern for patient's individuality and nurturing harmony among staff, physicians and our community.



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Welcome New Nurses

Name	Department
Jessica L. Thomas	Pediatrics
Roberta J. Bach	South OR
Nadine C. Baccas	Surgical Urology, 4NE
Julie A. Harpis	South Med/Surg, 3C
Dew L. Symonds	South PCU/Tele 2A/2C
Jacqueline Buchanan	Labor and Delivery
Jennifer L. Hill	Medical Renal, 4NW
Marni J. Dargis	OR
Jing Xia	PCU, 5NW
Kevin B. McGuinness	PCU, 5NW
Diane Guertin	SICU
Monica A. Shannon	Oncology, 3W
Karin R. Curto	Telemetry, 5NE
Kathleen A. Neely	Surgical Outpatient, 2NE
Carol M. Davis	South ED
Jennifer S. Hanley	South ED
Kelly A. Webb	ED
Carol A. Young	MICU

Langford Heart Center Nears

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Staffing for the program has included hiring for the CVICU, OR, Stepdown and Cath lab. There are a total of 42 new positions that are forecasted for the heart center. All open positions are posted on the career site at www.mmhs.com. As positions are recruited for the above areas, training and education plans are also being implemented for those areas, i.e., MICU and SICU which have had transfers to the CVICU. A critical care residency is in full swing for five associates who have been chosen for SICU and MICU positions.

Training for heart center Associates will begin in May at Munroe Regional Medical Center in Ocala, which has been a Top 100 heart hospital for the past seven years. Munroe is a member hospital of VHA Southeast and is partnered with the Ocala Heart Institute. Ocala Heart Institute is also our partner for CV surgeons and CV anesthesiologists.

Stuart Cardiology and Cardiology Associates are establishing a Cardiac

Clinical Nurse Leader Program (continued from page 1)

- *We are the pioneers.*
- *It will be a more holistic approach to care.*
- *We need support from our peers to make it work.*
- *The role will provide a type of clinical ladder that does not exist in too many settings.*
- *This program will keep some of our best nurses at the bedside.*
- *We will help retain our novice nurses who now struggle.*
- *We will improve care and our current models are not working.*
- *It moves nursing from a focus on specialization to looking at a bigger picture.*
- *We will be able to bring caring back into nursing and away from a focus on tasks.*
- *It moves nursing from a focus on specialization to looking at a bigger picture.*
- *The role will affirm the impact of nursing.*
- *It will transform and professionalize nursing.*
- *We have the opportunity to visualize a new future for nursing.*
- *It is worth the jump and risk for us—it can't fail—things can only improve.*

CLICK ON—Check out additional articles on the risk of Pandemic influenza and MMHS Service Excellence by visiting the “For Employees” section of www.mmhs.com.

Interventional practice by recruiting Cardiologists who will be performing angioplasty and stenting in the Cath Lab.

Equipment has been chosen and delivery dates established. The planning of the heart ORs and support areas has included the most state-of-the-art digital and support equipment which will truly benefit patient care and staffing effectiveness. Val Ruby, Judy Wilcox and many other staff members have had input into selection of equipment, supplies and furniture.

Protocols and Processes are being formulated as they relate to the continuum of care for open-heart surgery and angioplasty patients. A true interdisciplinary approach to care is our goal, ranging from EMS first responder through cardiac rehab and community education.

The Frances Langford Heart Center Campaign: Philanthropy—The cost of bringing world-class heart care to our community is significant. The Martin Memorial Foundation has set a campaign goal of \$25 million to benefit the building and staffing of the heart center.

To date, the Frances Langford Heart Center Campaign has passed the \$11 million mark. Recent campaign gifts include a \$50,000, \$100,000 and \$250,000 gift. A very exciting gift for nursing is also in progress: a \$1 million trust that will fund an endowment for cardiac nursing excellence at Martin Memorial. Watch for more news of this generous gift soon to come.

The “Associates with Heart” campaign is led by co-chairs Sheryl Dominico and John Romano, RN. Every member of the Executive team has made campaign commitments and more than 70 percent of the Management team has given to date. “Associates with Heart” officially launched on April 8 at the Associate Picnic.

In August 2006, a new day will dawn as we open the Frances Langford Heart Center at Martin Memorial. Residents of Martin and St. Lucie counties will have access to critical cardiac care close to home. Families will no longer be torn apart by long commutes when a loved one is receiving heart care miles away. Lives will be saved.

Nurse Excellence Winners Announced

By Karen Grien, BS, RNC, Director of Medical Surgical Units, Medical Center

Every year, 20 of Martin Memorial's nurses are voted by their peers to be recognized for their nursing excellence in practice, professionalism and commitment.

During the month of February, a call for nominations for Nursing Excellence is distributed to all licensed staff. Any RN or LPN is eligible to submit a nomination of a nurse that they feel demonstrates excellence in practice. The nominations are then judged anonymously by the

previous year's recipients, narrowing it down to 20 winners. This year, there were 50 nominations submitted.

During nurse's week, a reception is held for the winner, their family and their nominator. At the reception, their nomination is read and they receive a plaque and a pin that designates them as a nursing excellence recipient. The following week a dinner is held at which the recipient and their director celebrate this accomplishment.

2005 Nurse Excellence Winners

Associate Name	Department	Submitted by
George Anderson	3West	Lynn Brouillette
Lorraine Andreozzi	S/3C	Jean Marangio
Nancy Bates	Mat/Child	Jodi Smart
Diane Blythe	MICU	Jody Borecki
Joanne Burto	S/PACU	Kathy Benoit
Susan Clark	4West	Deb Neubauer
Leslie Creel	PEDS	Kathy Vogt
Angela Dowd	Mat/Child	Teresa Sewell
Kathy Ergl	Mat/Child	Angela Dowd
Carmen Harbach	2E	Joyce Deltoro
Kathy Jones	S/ER	Stephanie Spampani
Judy Keller	4West	Lisa Ferguson-Kohl
Susan Kujawa	S/Cardiology	Nancy Vagedes
Elizabeth McConnell	S/Ortho	Michelle Foss
Jackie McCree	PACU	Melinda Romano
Angie McDonald	S/ICU	Kelly Zukowski
Geraldine Moore	6West	Nikki Markwood
Whitney Parker	S/Ortho	Karen Swager
Nina Riker	4East	Jamie Lunsford
Cheryl Sheppard	NICU	Amanda Schuman

NDNQI 2005 RN Satisfaction Survey Results

By Sherry Guffin RN, BSN, MBA, BC, Chair, Nursing Executive Council

The 2005 National Database of Nursing Quality Indicators has presented Martin Memorial with the final results of the 2005 RN Satisfaction Survey. This benchmarking report reflects data from 144,207 RNs across the country providing direct patient care representing 9,124 nursing care units. The average unit response rate was 64 percent. Martin Memorial's response rate was 69.6 percent which was comprised of 368 RNs.

The 382 participating hospitals represent 48 states. 60.5 percent of these hospitals have achieved Magnet designation by the American Nurses Credentialing Center. Of the 382 hospitals who participated 35 percent were teaching hospitals, 19 percent were academic medical centers and 46 percent were non-teaching hospitals

Individual unit results will be presented by your director and governance council. Thank you for your participation in our first NDNQI RN satisfaction survey; look forward to the 2006 survey in July.

Medication Reconciliation

By: Dalynn Sotomayor RN, BSN, MBA, CPAN, Nursing Pharmacy Committee Chair

What is Medication Reconciliation?

Effective medication reconciliation involves collecting an accurate medication history from all patients at every entry point at Martin Memorial: physician offices, emergency department, preadmission and direct admits. It includes current medications, dosage, route and frequency. While taking a medication history has been standard practice, studies have found that there are inconsistencies and inaccuracy in the process. This is especially true when patients are transitioned into and out of the hospital, between units and between other providers. It is during these times that the increased chance of medication errors may occur.

How significant a problem is ineffective medication reconciliation?

Studies have shown that as many as half of all medications errors, and up to 20 percent of adverse drug events in hospitalized patients result from inadequate communication when transitioning from one level of care to another.

How is "Medication Reconciliation" different from what we have been doing?

The focus of medication reconciliation is maintaining a medication profile that is comprehensive and accurate, including prescription medications, herbals, "nutriceuticals," OTC and the like. The profile is maintained in electronic or print format and reviewed when patients transition from one location or provider to another to ensure that all changes are incorporated and documented. It is then reviewed with the patient or family to ensure accuracy. The new JCAHO standard requires that hospitals maintain a comprehensive and accurate listing of medications.

What benefits do we expect from the new Medication Reconciliation Process?

Our hospitalized patients will have a more accurate medication history resulting in fewer medication errors and improved patient care.

Highlighting Nursing Certification

By Diane Giersdorf, RN, BSN, CCRN, CNA, MBA

New data reveals that nurse certification is a key component of patient safety and retention and recruitment of nurses. The American Association of Critical Care Nurses released a white paper and supporting data of the benefits that specialty certified nurses bring to the public, employers and to themselves. The report, titled "Safeguarding the Patient and the Profession: The Value of Critical Care Nurse Certification," puts forth a call to action for the healthcare industry and for all who can influence and benefit from certified nurses' contribution to excellence in patient care.

Martin Memorial is taking this information seriously. With the generosity of the Martin Memorial Foundation, we will be having a national speaker present a review course for those wishing to become certified in Critical Care or Progressive Care Nursing through the American Association of Critical Care Nurses.

Mark your calendar for an exciting review class, presented by Barbara McLean RN, MN, CCRN, CCNS, CRNP, FCCM. Ms. McLean has been in critical-care nursing for almost 30 years. She is currently a Critical-Care Nurse Intensivist at the Atlanta Medical Center in Georgia. She is a guest lecturer for Emory University School of Medicine. She is a member of many organizations including AACN and SCCM. She has written many journal articles, book chapters and is well known for her critical-care lecturing.

She will be here June 15 and June 16 (Thursday and Friday) for the PCCN review. She will be here June 16 and June 17 (Friday and Saturday) for the CCRN review. Both days' review sessions are from 8 a.m. to 4:30 p.m. at the Medical Center Conference Room. Registration forms are available through Lori Stepanek at ext. 3000, or through your manager. It is free for Associates to attend, with your manager's approval. People willing to take their exam after the review class (within 3 months) will have priority for registration. All nurses are welcome to attend, as the material is pertinent for ED, PACU, Med/Surg and other adult healthcare areas. Hope to see you then! You will be glad you went.

Nursing Magnet Project Excellence in Nursing

By John Romano RN, BSN

Magnet is the celebration of a journey toward nursing excellence within the hospital setting. This March, Sherry Guffin, Barbara Sorbello and Kathy Rowell attended the Ninth Annual Magnet Conference which was hosted by the American Nurses Credentialing Center (ANCC) and Baptist Hospital of Miami. There were 2,800 attendees at the conference to gain additional insights as to how to work toward ANCC Magnet status.

The purpose of Magnet, as developed by the ANCC, is to recognize healthcare organizations that provide the very best in nursing care and uphold the tradition within nursing of professional nursing practice. To achieve Magnet status, an organization must document evidence of the existence of each of the 14 Forces of Magnetism: quality of nursing leadership, organizational structure, management style, personnel policies and programs, quality of care, quality improvement, consultation and resources, autonomy, community and the hospital, nurses as teachers, image of nursing, interdisciplinary relationships and professional development.

The benefits of becoming a Magnet-designated facility are numerous: it is an important recognition of nurses' worth, a major factor in nursing recruitment and retention, attracts high-quality physicians and specialists, reinforces positive collaborative relationships, improves patient quality outcomes and finally creates a "Magnet culture" which values nursing empowerment, pride, mentoring, nurturing, respect, integrity and teamwork.

Magnet accreditation is generally regarded as the seal of approval for quality nursing care. Martin Memorial is setting the goal of achieving Magnet accreditation in the future.

Nursing Clinical Achievement Program

2006 marks the fourth season of the Clinical Achievement Program or CAP. The Nursing Professional Practice Council (NPPC) has approved the 2006 packet and has sent it on to the Nursing Executive Council for final approval as of March 17, 2006.

Slight changes have been made to the application, so it should be carefully read. This year, the behavioral scores will be obtained from the annual peer review, which should streamline the evaluation process. The CAP year starts October 1 and ends September 30. Nurses will be able to obtain copies of the application and the forms packet on SharePoint.

The purpose of the CAP is to encourage the promotion of nursing professionalism, nursing education, evidence-based practice, as well as contributions to the complexities that make up the job itself.

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