Dear Nurse Resident Colleagues:

A special thank you to the more than 300 nurses, nurse coordinators, CNOs, nurse residents and nurse resident graduates who gathered March 14 – 17, 2016 in Bonita Springs, FL for our annual Vizient/AACN Nurse Residency Program™ Annual Meeting.

It was so rewarding to see the excitement and hear the enthusiasm and creativity all the nurse residents had about their projects. Their enthusiasm and energy was contagious, their innovative projects so compelling. The residents reminded all of us how invaluable our roles as nurses are in the lives of patients and their families.

This year has been prosperous for our organization as we’ve brought on 50 new hospitals to work with us in the nurse resident program. That comes on the heels of 2015, when 81 new organizations joined our ranks growing our organization to 260 members, up from six when we started.

There’s a lot to celebrate, but at the heart of our organization, we are most grateful for the nurse residents who are on the front lines of patient care every day making a difference in patient’s lives. The 230 abstracts they submitted underscored the impact that technology is making on health care. Many nurse residents developed apps to help boost patient care, from music therapy to projects that have changed the nursing policy and practice at hospitals nationwide.

We’re proud to honor and showcase the inspiring stories in this newsletter.

The words of Taylor Batten, BSN, RN at Duke University Hospital speak volumes about what it means to be a nurse today. “A woman had been admitted onto her unit from ER and was in excruciating abdominal pain. Oral medications weren’t working and the nurse was waiting for the IV team to arrive. The patient was really suffering. “I started to think about what I would want if I was in that much pain and medication wasn’t working. I just remembered my mom’s foot and back rubs to try to soothe me. So I went into the room, asked her what her favorite music was and pulled it up on YouTube on the computer. I dimmed the lights, put on gloves and grabbed some lotion and asked if it would be okay if I rubbed her feet. Her husband joined me and started massaging her hands. So there we were, just the three of us and a gentle reminder of the power of a simple touch can lessen the pain even a little. I think of everything else that happened that night and I was proud of myself for going back to the basics. Sometimes we get wrapped up in all the medicines and technology that we forget that simple interventions can make such a difference.”
Lehigh Valley Hospitals Achieve Magnet® Designation—Again

For the fourth time, Lehigh Valley Health Network hospitals were awarded the prestigious Magnet® designation for nursing excellence and quality patient outcomes for the fourth time. One of a couple of exemplars that made the Allentown, PA-based hospital network stand out among other organizations is its nurse residency program, said Donna Havens, PhD, RN, FAAN, chair of the commission on Magnet® Recognition, who called the nurse residency program out when making the recognition announcement.

The nurse residency program was honored for its focus on retaining graduate nurses—91 percent retention rate among new graduate nurses, as well as for the nurse resident’s work on evidence-based practice (EBP) projects. Nurse residents have completed 108 EBPs since 2013 and 64 currently are in progress. Lehigh Valley is one of only 29 hospitals nationwide that have been recognized by the Magnet® program four times. Currently, just over 400 health organizations have received this status, which is administered by the American Nurses Association.

“Is There a Better Way?” Two Evidence-Based Practices Shine Spotlight on Nurse Residents Leading the Way

All evidence-based practices start with the same question: “Is there a better way?” By following the evidence, nurse residents discover new ways to deliver care and improve outcomes.

Since 2013, nurse residents at Lehigh Health Network hospitals have completed 108 evidence-based practice projects (EBPs), and at any given time, dozens of evidence-based projects are underway.

But recently the LVHN system shined the spotlight on two evidence-based projects that speak volumes about the creativity—and impact, nurse residents are making every day.
Sleep Promotion by Clustering Care

Sleep quality plays a significant role in patient health and well-being. So in order to see how older medical-surgical patients fared, nurses Casey Herrera, BSN, RN, Pam Fisher, BSN, RN and Arielle Cratensenberg, BSN, RN, examined the impact on sleep for these elderly patients of clustering patient care activities between 10 p.m. and 7 a.m., as opposed to normal care provision.

They wanted to test Florence Nightingale’s assertions that it’s beneficial to avoid waking patients during the night. Older adults in particular are at high risk for sleep disturbances. Falls, functional decline, delirium and hospital-acquired infections occur more frequently when a patient’s sleep/wake cycle is disturbed.

The end result: Patients on average reported more total hours of sleep following care clustering education. Following education, patients responding “yes” to the survey question “Did you experience any nighttime sleep interruptions?” dropped from above 90 percent to just over 30 percent.

Next step: They hope to implement nighttime care clustering throughout the LVHN hospital system.

Saving Skin One Pressure Dressing at a Time

When patient safety reports at LVHN during a recent eight-month period, revealed that the Intensive Palliative Care Unit experienced at least one skin tear every month, nurse residents Kyle Kromer, BSN, RN and Amanda Rapp, BSN, RN, wanted to explore standardized protocol for pressure dressing removal, specifically for adhesive remover wipes to see if they aid in removal and skin-tear prevention.

As part of their project, they attached two adhesive remover wipe packets to the pressure dressings for Physician Assistants and Nurse Practitioners to use in pressure dressing removal.

The results: During the first eight recorded pressure dressing removals, only one patient sustained a skin tear, which was attributed to a lack of education on adhesive remover use.

Next step: Continue the pilot study to make adhesive remover wipes part of the protocol and collect data and examine results.
Good Catch: Nurse Prevents Medicine Snafu

When a pill doesn’t look right, it pays to make certain the patient is not being given the wrong medication.

That’s the lesson Jessica Little, RN and nurse resident on the immediate care unit at Meritus Medical Center in Hagerstown, MD learned.

Medication was sent to the unit with the correct patient name and drug name and dose. But prior to administering it, Jessica discovered it was the wrong medication. “Because Jessica took the time to check the medication, she prevented this patient from getting the wrong medication and possibly an adverse drug reaction, said Barbara Drury, MSN, RN, Nurse Residency Coordinator at Meritus.

For that, Little also receives, Vizient/AACN Nurse Residency Program™ “good catch” kudos!

Congratulations to the Georgetown Cohorts

Congratulations to the 37 residents of the Winter 2015 Cohort at Georgetown Medical School who held their pinning ceremony March 25, 2016. There were 19 evidence-based practice projects, with the top three winners:

“Teach the Teacher: Using Teach-back with older adults to improve comprehension of discharge instructions” by Rachel Pozzatti and Lisa Seng

“Aromatherapy: Decreasing Postoperative Nausea and Vomiting One Sniff at a Time” by Leslie Ling, ReAnn Arcand and Fabian Moreno

“Size Does Matter: How small volume phlebotomy tubes pack a big punch for patients and hospitals” by Rebecca Nunn and Alexandra Chapman
Education Station: Project Prevents Readmissions

When nurse residents at Mount Carmel West Hospital in Columbus, OH wanted to help their peers on the surgical unit—and patients there who kept returning with the same ills, they decided that educating the patients about how to care for and prevent a recurrence was the best way to go.

So they created a patient education program specifically designed for patients who had experienced Small Bowel Obstruction, which led to the creation of similar patient resources for other related conditions and diseases treated in their department.

The residents—Stephanie Bailey, Danielle Decker, Bailey Leger and Bret Nehrenz completed the project and then published their helpful patient educational materials. The information related in large part to the use of pain medication following surgery. The handout was placed on the Mount Carmel Intranet site and was included in hospital library materials for patients and their caregivers.

The efforts were so successful the four nurse residents are being called on to help the marketing team create additional patient materials.

Blood Sweat & Tears: RN Makes Her Own Kind of Music

When Hawaii Pacific Health nurse resident Joy Bumanglag wanted to make her point about “Preventing CLABS,” Central Line-Associated Bloodstream Infections, she picked up her guitar and started strumming.

Along with her nurse resident peers, Bumanglag had been called on to cover a lecture and teach a 15-minute presentation in a creative way.

And creative she did. With her presentation focused on CAUTI, blood transfusions, and core measures to prevent CLABS, she stepped up to the front of the class with her acoustic guitar. To the tune of “Price Tag,” by Jessie J., she renamed the song, “Keep the Line Safe.”

“Keep the Line Safe”

<pre>Seems like everybody’s getting hyped Wonderin’ how Straub is doing right? With their policies in the CLABS fight!

CLABS is something serious, Patients may die, it’s not mysterious
So be knowledgeable Get your full gear on So we can all have a good time

PRE-CHORUS

Everybody go to INTRANET (for policies) Everybody look to LIPPINCOTT (Procedures) When you find them yeah They will guide us how to do things right

CHORUS

It’s all about safety, safety, safety We don’t need s CLABS, CLABS, CLABS
We just wanna keep the line safe Yes another life saved!

Start with what? Hand-washing, washing Alcohol swabs and caps will be your Ba-Bling, Ba-Bling Wanna keep the line safe Yes another life saved!</pre>
Back to the Basics: From the Front Lines of Nursing
Excerpts from her story

Bu Taylor Batten, BSN, RN, Duke University Hospital

A few weeks ago, I was assigned an off-service patient who had just been transferred to our floor from ER. She was a female in her late forties who was admitted with extreme abdominal pain, a week after a hernia surgery. The note suggested the pain was from kidney stones.

When I went into the room I could tell that this woman was in excruciating pain. Her husband was at her side and obviously hurting for her. I felt so bad for both of them. There was an order for an IV, but when I went to connect it, it was leaking. I had to wait for the IV team to come to help.

Meantime, I was going to give her oral meds, and had paged the physician. We were waiting for the IV to be placed. I had the most helpless feeling in the world.

I started to think about what I would want if I was in that much pain and medication wasn’t working. I just remembered my mom’s foot and back rubs to try to soothe me.

So I went into the room, asked her what her favorite music was and pulled it up on YouTube on the computer. I dimmed the lights, put on gloves and grabbed some lotion and asked if it would be okay if I rubbed her feet. Her husband joined me and started massaging her hands.

So there we were, just the three of us and a gentle reminder of the power of a simple touch can lessen the pain even a little. I think of everything else that happened that night and I was proud of myself for going back to the basics. Sometimes we get wrapped up in all the medicines and technology that we forget that simple interventions can make such a difference.
Keeping Newborns Safe: Evidence-based Project for Tiniest Patients Goes System-wide

Keeping the hospital’s youngest, and most vulnerable patients safe, was the mission of four nurse residents at MedStar Franklin Square Medical Center in Baltimore, MD. Best part: It not only received statewide attention health care leaders, but the infant patient safety project already has become part of the protocols for the 10-hospital MedStar system.

“A Model for Reducing Identification Errors in Newborns,” was identified as a creative and successful safety innovation that was simple to implement and had wide-ranging potential to prevent misidentification errors for the extremely vulnerable population of newborns born at MedStar hospitals. Nurse residents Sarah Miletich, Kristen Ellingson, Lindsey Walters and Chelsea Nahill created a system that identified the mother’s first name to the infant’s registration as an easy method of preventing the confusion of infants with the same last name.

Typically, newborns are registered as “Baby Boy Smith.” When there are multiple “Baby Smiths” registered, properly identifying the correct infant can be daunting, particularly when they have the same birth date. Adding the mother’s first name provides an additional protection that the correct newborn is being identified for medications, procedures and testing.

“This simple idea has now been implemented in the 10 hospitals in the MedStar system, making the system’s nurseries and maternity units much safer places for the littlest patients,” said Vicki Kron, MSN, RN, NE-BC and Nurse Residency Coordinator for MedStar Franklin Square Medical Center.

The project also was presented as a poster project at the Maryland Organization of Nurse Leaders meeting in May.

Chelsea Nahill Receives “Nurse Resident of the Year”

For this effort, Nahill, an RN on the Labor and Delivery unit, was named the “Nurse Resident of the Year” during Nurse’s Week in May, 2016. Her honor was the result of the evidenced-based project and “her willingness to work with nursing students, her professional and compassionate demeanor with patients and her participation in the nurse residency program,” said Kron.
Sign Posts: Challenging the Status Quo. Male Nurse Drives Change

Not every nurse resident finds herself or himself being filmed for YouTube, but Brad Wessels, an RN at Mercy Medical Center in Iowa found himself called to center stage of Five West being videoed as he was awarded the hospital’s “Spirit of Safety” award.

For his evidence-based project, Wessels questioned the variation in Homan’s sign assessments—the standard technique to predict lower deep vein thrombosis (DVT) of the lower leg—a blood clot. His evidence-based project resulted in Mercy immediately changing its deep vein thrombosis assessment.

“His questions resulted in significant value for patient outcomes,” hospital leaders said.

Immediately following his evidence, Mercy discontinued the use of Homan’s sign as a screening tool for DVT. Now, nurses assess patients for DVT using: severe pain, heaviness, warmth, swelling, low-grade fever and tachycardia. Then, they convey these results to the attending physician.

As a result of Wessels’ study, the Nursing Informatics Council is working to eliminate Homan’s sign from the hospital system’s electronic medical record.

Visit Us at the NRP Meeting Place

At the NRP Meeting Place, we want you to know you are not alone, that you are part of a nationwide community, one that extends beyond your health care institution or hospital system to include nurse residents across the country. That’s why we are here.

We provide a safe space and a community of others just like you, where you can be real about what it’s like to meet demanding schedules and struggle to fit in as a novice member of the care team.

We’ve listened to your feedback and have recently launched a couple of new features for you. The Nurse Residents’ Tool Box is a guest blog in which real nurses—women and men just like you—share practical tips and advice. The Q & A feature Nurse to Nurse: Lessons From the Front Lines features “day in the life” stories from your nurse resident peers. We invite you to stop by nrpmeetingplace.uhc.edu to find support and share your stories and ideas!

We Welcome Your Input! Please contact us with your questions, comments, and feedback. In addition, this newsletter is a way for nurse residents across the country and nursing professionals working in residency programs to share their professional and personal experiences. This is your forum, and we encourage you to submit your stories, pictures, and editorials to share with your colleagues. (312) 775-4401 • NRPinfo@uhc.edu

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