

## CNO TEAM AWARD FOR TEAM EXCELLENCE

Presented to the area of patient care that has consistently shown excellence in teamwork to provide extraordinary care to their patients and families.

# Vascular Surgery Progressive Care Unit



The Vascular Surgery Progressive Care Unit is aptly named—it is, indeed, progressive. Whether it is a new initiative to increase hand hygiene, increase staff ownership or decrease patient falls, or simply approaching any challenge with a can-do attitude, this unit is innovative and engaged. The staff members' enthusiasm and positivity are infectious. Their desire and efforts to continuously improve patient care extend well beyond the walls of their unit. Please read on to understand why I have chosen the Vascular Surgery Progressive Care Unit, also known as Gudelsky 5 East (C5E), to receive the annual CNO Team Award for Extraordinary Care.

I arrived on C5E during Quiet Hour, which occurs daily from 1 to 2 pm and 1 to 2 am. The lights were dimmed and the voices were hushed. **Virginia Nganga**, BSN, RN, SCNI, explained Quiet Hour was initiated in January to address patient complaints of noise on the unit interfering with their rest. Breaking the silence, a bed alarm rang. Every single staff member, including the nurse manager, **Simone Odwin-Jenkins**, MBA, BSN, RN, started sprinting to the room where the alarm was sounding. The reason was not to silence the alarm but rather to ensure the patient would not fall. The staff members on C5E take falls seriously and personally. They all feel account-

ability for their patients' fall data and each of them can tell you how many days have gone by without a patient fall.

The staff members used several strategies that led to success in reducing the number of falls on C5E from an average of 15 falls per quarter to three falls per quarter. About 18 months ago, Virginia led a small group to create a Falls Board (see below) that tracks each day of the month; highlights the number of days without a fall; offers falls updates; lists the protocol in the event of a fall and a tool for a post-fall huddle; provides goals and expected outcomes, action plans and interventions; and lists the members of the Falls Committee. As of March 31, the team and patients had gone 62 days without a fall—great work!

### Falls Board



In addition, the team on C5E performs a huddle twice a day. During these huddles, they discuss:

- **Falls:** High-risk patients are identified, specific interventions are listed and they double check to ensure the bed alarm is on.
- **Wounds:** High-risk patients are identified

# “WE HAVE REVAMPED ALL OF OUR UNIT-BASED COMMITTEES TO MAKE THEM PURPOSEFUL WITH MEASURABLE GOALS.”

– Simone Odwin-Jenkins, MBA, BSN, RN, Nurse Manager

and someone checks to ensure the wound/ostomy nurse has seen these patients; the medical record for every wound is checked to ensure a dressing order is written and performed with consistency.

- **Urinary Catheters:** All catheters are assessed to determine if they are still required or can be discontinued (per protocol).
- **Central Lines:** All central lines are assessed to determine whether they can be discontinued (per order).
- **Drips:** All drips are quickly listed; times for the next PTT are mentioned.
- **Walking Buddy:** Another innovation!

The Walking Buddy is a new, joint initiative on C5E with our colleagues from Rehabilitation Services. Eight nurses and patient care techs have been trained by the Rehab staff in a Train the Trainer program, which has a goal of mobilizing the patients earlier in their hospitalization. As most of the patients on the unit are on the Vascular Surgery Service, early and safe mobilization is important for their recovery. The 8 Mobility Champions have been trained on lifts and gait belts and have a goal of safely getting patients out of bed every day by 11 am. As the remainder of the staff members are trained, they will no longer need to wait for a rehab therapist to mobilize their patients for the first time out of bed following a surgical procedure. This initiative has just started, and the Mobility Task Force will start tracking metrics to study compliance with their goals and whether earlier discharges occur from the intervention.

As I heard about this initiative, I asked, “How is it possible that you all are involved in so many innovative processes?”

Virginia replied, “Simone pushes us. We all write our goals and she enforces that a timeline is placed on our work.”

I responded with a question: “Do you have even more goals as a team then what we’ve discussed?”

Absolutely! Virginia shared C5E’s new goal of 100% Med-Surg certification for all of the nurses. To achieve this lofty goal, the nurses have formed a study group and are reviewing all of the systems, one session at a time. **Katrina Daye-Whitehead**, BSN, RN, PCCN, CNII is the chair and champion of the certification initiative.

All C5E staff members, regardless of role, are expected to be a member or leader of a unit-based committee. Members vote on the chairs of their many unit-based committees. Once elected, the committee chair campaigns for staff members to join that committee. It is a competitive process to engage their colleagues for their committees and they enthusiastically appeal to others to join. The photo below illustrates a “campaign poster” created by **Victoria Phelps**, BSN, RN-BC, SCNI to invite colleagues to join the Quality and Safety Committee. Talk about staff engagement!

In addition, one of the committees is totally focused on employee engagement.

The C5E C2X committee, chaired by **Darlene Bonner**, BSN, RN, CNII celebrates special events, such as staff birthdays, years of service and awards received. For example, the C2X Committee sponsored the Employee Recognition Board in the staff break room. **Bing Casal**, BSN, RN, SCNI, is pictured for receiving the Certificate of Distinction for Outstanding Unit Leader from the Philippine Nurses Association and **Biljana Brkic**, RN, CNII and **Nana Musa**, BSN, RN, CNII, are pictured on this board for their years-of-service recognition. Darlene explained the team is planning celebrations during Nurses Week and Administrative Assistants Day, April 24. They will also recommend names of colleagues to Simone for a unit-based Employee of the Month. During this month, the C2X committee is focusing on NDNQI data and patient satisfaction via HCAHPS data. Of the past five months, C5E has scored above the Medical Center and national average for patient satisfaction. The staff is clearly doing many things the right way and you can sense it in their attitudes about their work and each other.



**Judy Hill, CNII, BSN, RN, ACRN; Simone Odwin-Jenkins, MBA, BSN, RN, Nurse Manager and Victoria Phelps, BSN, RN-BC, SCNI**

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The teamwork and care for each other is palpable on C5E. **Fredin Pallikal**, RN, CNII, has been on the unit for two years. He said, “I love this unit. The staff are great and very supportive. We see a variety of patients and it’s always interesting.”

Virginia echoed Fred’s comments and also said, “I love this unit! I love this unit! We were on 3D before and we’ve had a change in our patient population and environment. When we moved to C5E, we put a lot of initiatives in place and have seen great results. The culture of the unit is positive and our manager listens to us.”

The “feel” of the culture is evident on the unit’s large C2X Bulletin Board, visible as you enter the unit. On the bottom row, where each unit can customize the information with its own content, you can find the following under the pillars:

- **People:** New C5E employees are pictured.
- **Service:** Patient satisfaction results are listed. The team is especially proud that its pain management scores have been above the 90th percentile for each quarter of the past year. After an intensive re-education about assess-

ment of breakthrough pain, they were able to see significant improvement in the HCAHPS data.

- **Safety & Quality:** In *The Quality Management Briefing*, a System newsletter about quality, C5E is featured for its work on hand hygiene.
- **Stewardship:** The successful Medical-Surgical toy drive, which raised more than 300 gifts for children, is listed.
- **Innovation:** *The Quest*, a staff newsletter edited by Victoria Phelps and Katrina Daye-Whitehead, was just launched.

*The Quest*, in its inaugural issue, encouraged the staff to get involved and described all the unit-based committees. In addition to the aforementioned C2X Committee, C5E has robust committees in place for Clinical Practice, Education, and Safety & Quality.

Simone Odwin-Jenkins said, “We have revamped all of our unit-based committees to make them purposeful with measurable goals.” Simone speaks with energy and focuses on excellent outcomes. She is described by the group as someone who listens well and is open to change. She said,

“I tell the team what I’m thinking about and they are so creative, they can take my vision to places I hadn’t dreamed of. I like the Magnet concept, with centrally strong shared governance. A member of each of our four, big unit-based committees attends the hospital-wide corresponding committee and brings back the information and education to our whole team. The group is open, flexible and readily embraces new ideas. Whenever we have a sense of resting on our laurels, one of the staff members inspires us to re-focus. It is a great team, environment and culture.”

What is in store for C5E? More change. They transition to intermediate care (IMC) status by November. Currently, the staff members are attending the Critical Care course and all of the nurses are becoming ACLS certified. The nurses and techs from C5E are shadowing nurses and techs in the Surgical IMC to learn from their colleagues. The team also has plans to spend time in the OR observing vascular cases so they have a thorough understanding of the continuum for their patients.

**Rajabrata Sarkar**, MD, PhD, chief of vascular surgery, said, “The nurses on C5E have made significant progress in caring for our patients. I find the nursing staff friendly, responsive and always willing to assist when I am on the unit. We look forward to continuing our collaborative work and efforts focused on education and training with the same positive spirit.” He and **Robert Crawford**, MD, **Maureen Shirflett**, CRNP, and **Kristy Gorman**, MS, RN, OCN, Clinical Practice & Education Specialist offered 16 hours of classes to educate the C5E staff members about vascular surgery when they moved from 3D. Now, as C5E transitions to an IMC, we will once again count on our colleagues for further education.

The nurses have also remembered to educate new staff, as part of their onboarding to the unit. Recently, Virginia just taught a



**Yonas Abebe, BSN, RN, CN I and Pauline Amaechi, Patient Care Technician**

**Simone Odwin-Jenkins, MBA, BSN, RN,  
Nurse Manager**

follow-up vascular class to staff members who joined the unit over the past year. **Susan Sims, RN, CNII**, said, “The vascular class taught by Virginia was informative and she did a great job. I’ve been here for just a little over a year now, after my previous nursing position at another hospital for 19 years, and I’m so happy with my decision to come here. I’ve been impressed with UMMC and this wonderful unit; the nurses are great and we have a constant learning environment.” Susan has a wealth of experience in teaching cardiac care, arrhythmias, and ACLS, and in addition to caring for patients, she performs annual competency assessments in reading and interpreting EKGs for the unit. Informally, Virginia leaves weekly rhythm strips at the nurses’ station for nurses to independently assess themselves. If they would like remediation, Susan makes herself available.

It is easy to encounter a positive spirit throughout C5E. **Anthony Barksdale**, unit secretary, greeted me with a warm C2X kind of welcome when I entered the unit. He has been on the C5E for four years. Prior to working in Patient Care Services, Anthony was in Housekeeping.

**Pauline Amaechi**, patient care technician, just started working on the unit in March. “I like being a tech, I like the unit and I like the work,” said Pauline.

**Roslyn Mack**, patient care tech, has been on the unit for three years. She said, “I like the staff and teamwork.”

**Cindy Schmigel**, OTR/L, is a traveling occupational therapist. “UMMC is one of the best places I’ve ever worked. The hospital is clean, the staff have great rapport with the patients, the physicians get back to you almost immediately, and the Intranet resources are excellent. It is definitely a great place to be and really different, and much better than other places I’ve work as a staff member or traveler,” said Cindy.

While rounding on the unit, I visited with a patient and his family member. The



patient said “I’m retired police and a cynical person. I had reservations about having my surgery here. I need to tell you, this unit has a group of people here who care about what they do. After spending time with them, I will take these people to my grave with me, that’s how much they mean to me. They went beyond helping a fellow human being. I just can’t say enough.”

**Cheryl-Ann Daley, MS, RN, CNII** has been on the unit for two years. Cheryl-Ann, who previously earned a degree in criminal justice, said, “I enjoy working with everybody on the unit. The teamwork is great, the general attitude is positive, we have improved patient outcomes in hand hygiene and falls, and we’ve implemented some house-wide protocols. You want to be a part of a movement that focuses on improving patient care. We also focus on recognizing staff on the unit. We all work hard, moving together to accomplish something.”

It’s true! The staff members of C5E have accomplished a lot!

“It has been a joy to watch the cultural transformation on the Vascular Surgery PCU,” said **Tina Cafeo, DNP, RN**, director of nursing, medical and surgical services. “When you walk onto the unit, staff are openly friendly and engaging. They are innovative in their approach to improve patient care processes, satisfaction, and safety. The staff successfully made the transition

from medical to surgical care delivery. This was no small endeavor. They continually evaluate their progress to set goals and formulate plans to improve outcomes. This unit functions as a true professional environment. The staff engage in continuous change, hold each other accountable, own their practice and outcomes, and truly care for each other and their patients and families. I am so proud to have them as part of my team at UMMC.”

It is rare to see a unit with this much energy and vibrancy, with a penchant for improving patient care and continuing their own professional development. If you had any doubt about the C5E staff members’ enthusiasm for quality improvement and nursing care, just watch the video “Hand Washing in the House Tonight.” Maybe you were fortunate enough to catch it at one of the C2X Employee Communication Forums? It was conceived of and written, directed and produced by members of C5E. In the video, it is evident how C5E staff members combine their love of singing, dancing and having fun with engaging colleagues from other units across the Medical Center to participate in this video about an important message for patient care.

For these reasons, C5E has been awarded the CNO Team Award for Extraordinary Care for 2013. Please join me in congratulating them and recognizing their excellence.