

Friday June 10, 2022 8:30am-11:30am

### Welcome From Your Chair



•Jeanette Palermo DNP, RN, NPD-BC, PCCN-K

# In Case You Missed It: PA at Vizient, Part

2

Time	Topic	Presenter	
0830-0835	Welcome	Jeanette Palermo DNP, RN, NPD-BC, PCCN-K	
		Chair, PA-AC Nurse Residency Collaborative	
0835-0905	Working Smarter, Not Harder: Improving Efficiency	Joanna Dixon, MSN, RN, NPD-BC, CEN	
	and Effectiveness	Lead Clinical Nurse Educator for Nurse Residency and Onboarding	
		Main Line Health	
0905-0935	Who are the "Zs?" Facilitating the Next Generation	Elizabeth Holbert, BSN, RN	
		Nursing Professional Development Generalist – Nurse Residency Coordinator	
		Penn State Hershey Medical Center	
0935-0955	Impact of Structured Check-in Labs on EBP Projects	Jeanette Palermo DNP, RN, NPD-BC, PCCN-K	
		Director of Nursing Professional Practice & Research	
0955-1005	Break	Thomas Jefferson University Hospital	
1005-1035	Virtual Space: Same Time, Same Place	Lisa Iozzo, BSN, RN, MEDSURG-BC	
1003-1033	vii tuai space: Same Time, Same Flace	Nursing Professional Development	
		Michelle Keller-Oglesby, MSN, RN, NPD-BC	
		Nursing Professional Development Specialist	
		Karen Ulmer, MSN, RN, RN-BC, NPD-BC	
		Clinical Nurse Education Specialist	
		University of Pennsylvania Health System	
1035-1100	Quality and Value Analysis Come On Down!	Amy Popp, BSN, RN, OCN	
		Nurse Educator	
		Robin George, BSN, RN	
		Manager, Staff Education	
1100 1105	n l' d c'l W ln l'	UPMC Harrisburg	
1100-1125	Breaking the Silence: Virtual Rounding	Amy Popp, BSN, RN, OCN Nurse Educator	
		Robin George, BSN, RN	
		Manager, Staff Education	
		UPMC Harrisburg	
1125-1130	Closing	Amy Ricords, MEd, BSN, RN, NPD-BC	
11140-11130	Closing	Director, Nursing Professional Advancement	
		PA-AC	
		I A-AC	



# Working Smarter, Not Harder: Improving Efficiency and Effectiveness

Joanna Dixon, MSN, RN, NPD-BC, CEN



# **Learning Objectives**

Following participation in this Power Session the participant will be able to:

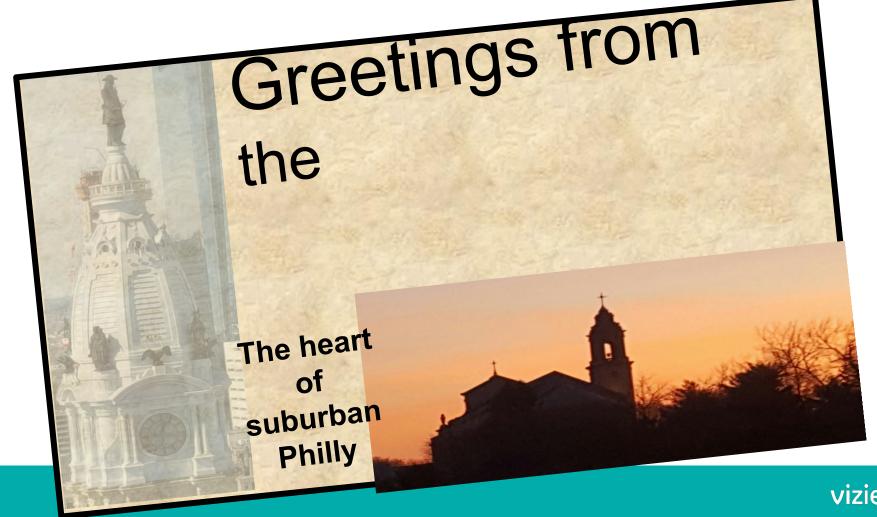
- Discuss various easy-to-implement strategies to maximize efficiency when navigating Nurse Residency Program initiatives.
- -Identify growth areas for creative solutions to improve productivity.



### **Disclosure Information**

Joanna Dixon has no relevant financial relationships to disclose.





#### We Care for People



LANKENAU MEDICAL CENTER LANKENAU INSTITUTE FOR MEDICAL RESEARCH



7,553 Births







160,258 ER visits



1,314 | Licensed beds



249,168 the Home health visits







58,954 Total discharges 1,156,024



### Introduction

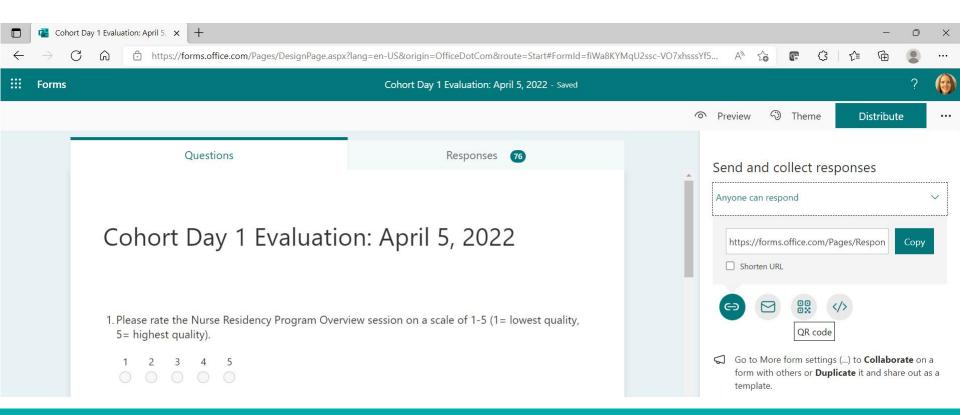
### Reality

- Crisis-level staffing shortages
- Insufficient resources
- Doing more with less

### Response

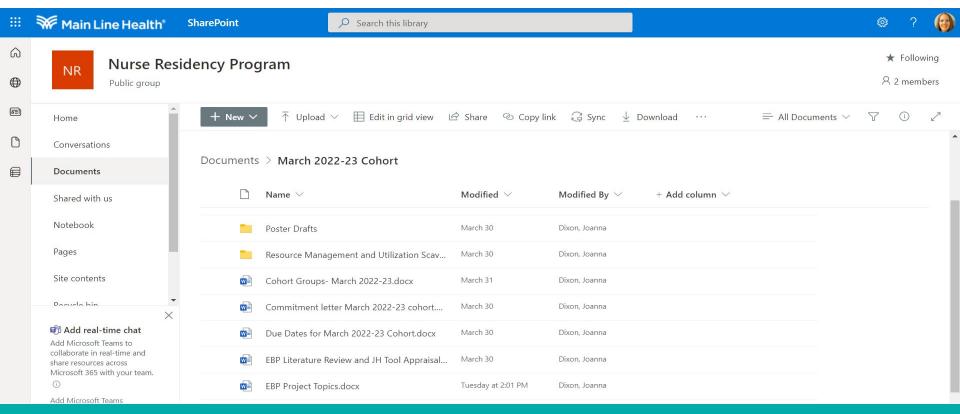
- Innovative solutions
- Maximizing efficiency
- Support and advocacy

### **Electronic Evaluations**





# Virtual Assignment Submissions/Document Access

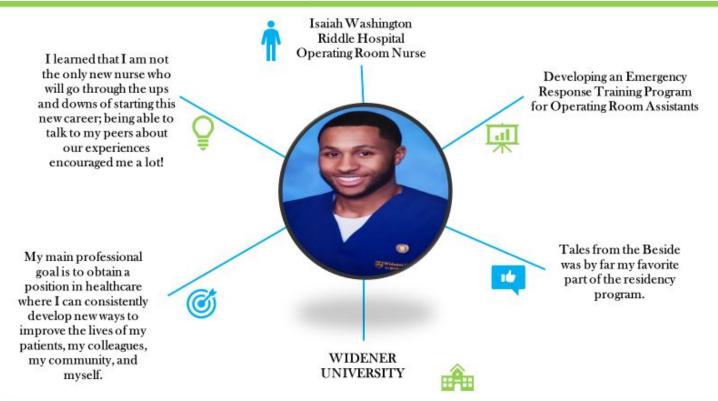




## **Maximize Nurse Residency Facilitator Roles**

Bedside Facilitator	Educator Facilitator
Lead Tales from the Bedside	Mentor Bedside Facilitator
Respond to Reflections Journals	Track assignment completion
Check in with cohort group at least once between each session	Round on residents during designated EBP Project time
Round on residents during designated EBP Project time	Lead content sessions as interested
Lead content sessions as interested	Assist with graduation
Assist with graduation	Evaluate residency applications
Evaluate residency applications	

# **Nurse Resident Champions and Social Chairs**



# **Assignment and Email Templates and Checklists**



#### Title in Bold 54-64 Point Font with Main Words in Caps- Clear and Concise Summary of the Project's Purpose



Author, BSN, RN, Author, RN & Author, BSN, RN (alphabetical order)
Hospital Name

#### Purpose

- Place your PICOT question here (but you do not need to write "PICOT Question:...")
- Make sure your purpose follows through to the methods and results
- When referring to a patient population group, say "patients with "x" disease" rather than "x disease patient"
- Always write out a word the first time and then you can use abbreviations (eg, Main Line Health System (MLH))

#### Background

- Why was this issue important on your unit or to your area of practice/specialty?
- Were you implementing guidelines that have been accepted nationally in practice?
- Were you correcting a problem or addressing collected data?
- Do not include a specific unit name (say "a medical-surgical unit" as opposed to the specific unit name) or specific information that reflects negatively on MLH- if it is not public data, you must ask nursing leadership and legal if it is OK to publish (instead of saying, "HCAHPS scores were low" say "there was room for improvement in regards to HCAHPS scores")
- Do not use first person ("I" or "we"). Do not say, "the nurse residents wanted to find out more about "x" topic."
- It should be referred to as a project and not research/study

#### Review of Literature

- Brief and succinct description of your research findings and non-research evidence
- Summarize your findings into a few bullet points focusing on the most important findings and the highest quality research studies
- Don't list every study you found...keep this section concise!!
- Do not need citations unless direct quote

#### Methods

- If creating a survey tool, it must be reviewed and approved by your unit educator. If using a preestablished survey tool, you must obtain permission from the author to use.
- How did you conduct your project?
- What are the steps you took for your project?
- Again, keep it brief and maintain clarity. Not everyone understands your area of practice or the practice problem as clearly as you understand it
- Do not put entire survey tool here (consider bringing to poster session)
   OVERALL TIPS
- For the body of the poster, use 24-32 point font in Arial, Geneva, Helvetica, or Avant Garde for readability: be consistent with type and size of font throughout postershould be able to read from 10 feet away
- Make overall poster visually appealing to grab the attention of the reader-balance white space and avoid light text on light background or dark text on dark background ("print preview" to see big picture of poster layout)
- Use phrases in bullet form rather than full sentences- succinct summary of most important/interesting facts (omit non-essential details)- should be able to read entire poster in 60 seconds
- To align indentation of text, use the ruler (click on "ruler" under "View" tab)- should be left aligned throughout
- Click on "Insert" tab to add text box or graph
- Double check grammar and punctuation
- For photos: need consent to have patient or staff photos; if from internet- do not use copyrighted photos from Google to avoid legal ramifications (see next slide for details); recommend photo quality of ≥200 dpi: blow up poster to 200% to see clarity for printing
- Do not change the order of the sections

#### Results

- What were your findings and outcomes? Make sure to include number surveyed as "n="
- Look at the overall outcomes that have the biggest impact
- Best to use graph/visual tools to portray results- pick only the most important facts and make sure the graph labels are large enough (label x and y axis)
- Make sure results tie back to PICOT/purpose
   Captions: font size 20 point

#### Implications for Nursing Practice

- Is there a broader meaning for other units, your hospital, or MLH?
- Answer the question, "what do the outcomes mean to nursing practice and patient care"?
- Link back to purpose
- Use language such as "potential impact" instead of "it will" since impact is uncertain
- Use STEEEP (safe, timely, efficient, effective, equitable, and patient-centered) categories

#### Next Steps

- What are you going to do next?
- Is there more work to be done on your unit or at the hospital level?
- Can you hand this project to a future nurse resident to continue?
- Can you publish your findings?
- Will you present your findings at a local, regional, or national conference?
- Will you present to local nursing students?
   Can you present at a council or committee meeting?

#### Acknowledgments

- Name, Credentials (degree, RN, certifications)
   Acknowledge individuals who helped you with the project, such as Nurse Educator (list CNE first, then alphabetical). Nurse Managor, Nurse Equilitator, Other healthcare professionals.
- Patients who participated (don't list patients by name)
  This section can be in a smaller font size

#### References

- APA format- eg- Last Name, First Initial. (year). Title with only the first word capitalized. Journal Name in Italics with All Capital Words, Volume#(Issue#), Page#-Page#.
- This section can be in a smaller font size
   You do not have to include every article that you reviewed but only those that were benchmark studies or those that you specifically used for the project

#### **Virtual Graduation Checklist**

#### **Months Prior:**

- Select date when CNO is available and send Outlook invite to Nurse Leadership Assembly and ANMs (leaders only get invited to the last two hour of the final 4-hr meeting)
- · Order Pins from Vizient for the graduates
- Ask CEO and CNO to share a few words and send them an Outlook invitation with my cell phone number for last minute questions
- Invite campus-based leaders to breakout session- include my cell phone for any technical difficulties

#### Weeks Prior:

- Put together memory books (see full graduation checklist for details)- have Mary Grace create certifications (update letters if needed)
- Create and send Zoom link to residents to share with friends/family and put into nurse leader invitations
- Make sure Vizient survey link is open prior to day of graduation
- Email residents, facilitators, and nurse leaders with expectations (see email templates)- ask everyone to keep video on; encourage leaders to write congratulatory notes in chat box during ceremony
- Invite nurse externs and newer residents.



# **Integrated Advisory Board Meetings**

Goal	Expected Outcome	Competencies	Measurement	
Transition from advanced beginner nurse to competent professional nurse	Successful completion of the Nurse Residency Program	Demonstrates professional behaviors; clinical competence; and adherence to institutional mission, values, goals, and ethical principles, including sensitivity to diversity, as a member of the professional nursing staff	<ul> <li>Graduation Rate</li> <li>Vizient survey data (Casey Fink- "I feel prepared to complete my job responsibilities")</li> </ul>	
A strengthened commitment to the profession of nursing	1 year retention rates equal to or greater than the Vizient national average	Demonstrates commitment to learning by attendance at, participation in, and completion of the Nurse Residency Program	<ul> <li>Attendance (or make up work) for all program content</li> <li>1 year retention rates</li> <li>Vizient Survey Data (Progression Survey- "Overall, I am satisfied with nursing as a career")</li> <li>Completion of a professional development plan</li> </ul>	
Incorporate research- based evidence, linked to outcomes, into practice; provide clinical nursing leadership at the point of care	Provides care that incorporates evidence-based practice, research, and quality data; participates as an effective member of an interdisciplinary healthcare team	Demonstrates application of research to practice through participation in performance improvement and evidence-based practice activities; demonstrates leadership through effective provision of care, including adherence to safety principles; effective communication with the health care team, patients, and family members; appropriate and safe delegation; and participation in performance improvement and evidence-based practice activities	<ul> <li>Completion and presentation of an evidence-based practice project at the end of the 12-month Nurse Residency Program</li> <li>Vizient Survey Data (Progression Survey- "In my current work, I work collaboratively with interdisciplinary health care team members").</li> </ul>	

# **Leadership Stay Interviews**

What do you like most about working at Main Line Health (MLH)?

What would make MLH a more rewarding place to work?

What do you desire most from your nursing leaders?

## **Leadership Stay Interviews**



### **Financial Incentives**

1: One or more Nurse Residency assignment(s), including Vizient surveys, not submitted on time 3: All Nurse Residency assignments, including Vizient surveys, submitted in a timely and complete manner

4: Presentation of the Nurse Residency
Evidence-Based Practice Project at a Main Line
Health committee or leadership meeting
5: System-wide implementation of a Nurse
Residency Evidence-Based Practice Project or
project acceptance at a conference or
professional meeting outside of Main Line Health

**Project Plan** and Graduation Salary Increases

# **Key Takeaways**

Utilize Technology

Create
Leadership
Opportunities

Streamline Workflow

Align Workgroup Efforts

Stay Interviews Incentivize Performance

# Let's work together

# vizient

Joanna Dixon: DixonJo@mlhs.org

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# Who are the "Zs?" Facilitating the Next Generation

Elizabeth Holbert, BSN, RN, Nursing Professional Development Generalist – Nurse Residency Coordinator Lauren Libhart, MSN, RN, Nursing Professional Development Specialist – Neonatal Intensive Care Unit May 2022



### Penn State Health Milton S. Hershey Medical Center



#### 610 bed Academic/ Quaternary Care Medical Center in Central PA

- Hospital admissions (adult & pediatric): 28,472
- Emergency Room Visits: 74,945

#### **Medical Center campus includes:**

- Penn State Health Milton S. Hershey Medical Center
- Penn State College of Medicine
- Penn State Hershey Cancer Institute
- Penn State Hershey Children's Hospital

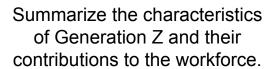
Magnet Hospital Designations: 2007, 2012, 2017, 2022

**CCNE** accredited employee-base nurse residency program: 2020

Average 190 nurse residents annually

### **Objectives**







Articulate how Generation Z's characteristics and traits influence their learning styles.



Illustrate facilitator strategies that can be implemented for Generation Z learners.

### **Generation Z**

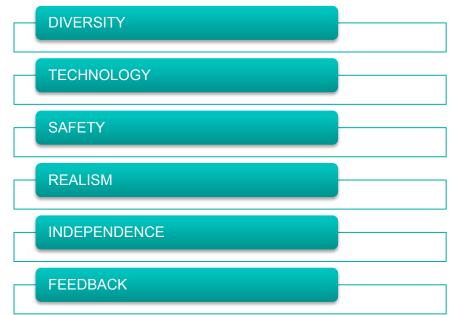


- Individuals born between 1995 2012<sup>4</sup>
- Represents 24% of U.S. population<sup>4</sup>
- Influenced by technology, cyber-attacks, unemployment, economy crash 2008, terrorism, and natural disasters.<sup>1,6</sup>
- Smartphones, social media, and a hyperconnected world are important aspects of life.<sup>6</sup>

### **Values and Characteristics**

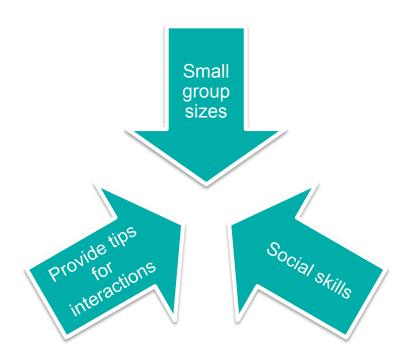


Photo taken prior to March 2020.



### **Feedback**

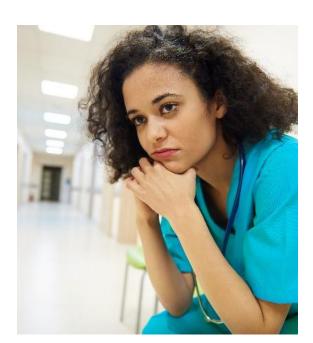




# **Mental Health and Wellbeing**







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"I didn't sign up for this"

Open Source image, used by permission of Envato Elements



"Over the last year I've experienced way more than someone my age should have, especially in the midst of COVID. I feel like I have overcome a lot while succeeding in my nursing career and the last thing I want is for the residency program to become a source of anxiety for me."

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## **Generation Z Learning Traits**



- Seek relevant and practical information<sup>2,3,4,8</sup>
- Enhance education with use of technology<sup>1,2,7,8</sup>
- Visually based content with traditional materials<sup>1,2,3,4,7,8</sup>
- Self-directed & individualized education<sup>1,2,3</sup>

## **Teaching strategies for Generation Z learners**







Virtual learning environment of simulation

Visually based content into lecture materials

Initiation of feedback activity with peer

# Potential Resources to Increase Engagement





### **Lessons Learned**



Embrace the use of technology



Facilitate opportunities to connect with others



Connect EBP to social change



Include in decision making process

### **Contact Information**

Liz Holbert, BSN, RN, Nursing Professional Development Generalist– Nurse Residency Coordinator

eholbert@pennstatehealth.psu.edu

Lauren Libhart, MSN, RN, Nursing Professional Development Specialists- Neonatal Intensive Care

<u>llibhart@pennstatehealth.psu.edu</u>



### References

<sup>5</sup>DiMattio, M. J. K., & Hudacek, S. S. (2020). Educating generation Z: Psychosocial dimensions of the clinical learning environment that predict student satisfaction. *Nurse Education in Practice*, 49. <a href="https://doi-org.lopes.idm.oclc.org/10.1016/j.nepr.2020.102901">https://doi-org.lopes.idm.oclc.org/10.1016/j.nepr.2020.102901</a>

<sup>6</sup>Hampton, D. & Welsh, D. (2019). Work Values of Generation Z Nurses. *JONA: The Journal of Nursing Administration*, *4*9(10), 480–486. doi: 10.1097/NNA.000000000000791.

<sup>7</sup>Sherman, R. O. (2021). Keeping an Eye on Generation Z Nurses. Nurse Leader, 19(1), 6–7. <a href="https://doi.org/10.1016/j.mnl.2020.11.001">https://doi.org/10.1016/j.mnl.2020.11.001</a>

<sup>8</sup>Seibert, S. A. (2021). Problem-based learning: A strategy to foster generation Z's critical thinking and perseverance. *Teaching & Learning in Nursing*, *16*(1), 85–88. <a href="https://doi.org/10.1016/j.teln.2020.09.002">https://doi.org/10.1016/j.teln.2020.09.002</a>



<sup>&</sup>lt;sup>1</sup> Billings, D. M., & Halstead, J. A. (2020). *Teaching in nursing – A guide for faculty* (6th ed). Elsevier.

<sup>&</sup>lt;sup>3</sup>Chicca, J., & Shellenbarger, T. (2018). Connecting with Generation Z: Approaches in Nursing Education. *Teaching & Learning in Nursing*, *13*(3), 180–184.

<sup>&</sup>lt;sup>4</sup>Chicca, J., & Shellenbarger, T. (2019). A new generation of nurses is here: Strategies for working with Generation Z. *American Nurse Today*, *14*(2), 48–50.



# Impact of Structured Check-in Labs on EBP Projects

Jeanette Palermo, DNP, RN, NPD-BC, PCCN-K Director of Professional Practice & Research Thomas Jefferson University Hospitals-Jefferson Health May 2022



#### **Disclosure Information**

**Absence of Relevant Financial Relationships** 

The following planners, faculty, and others in control of educational content have no relevant financial relationships with ineligible companies.

## **Learning Objectives**

Following participation in this Power Session the participant will be able to:



Identify strategies to continue support of EBP projects during the pandemic



Discuss institutional outcomes of supporting an NRP

# **Key Features of NRP**



## **Nurse Residency Structure**

NRP started in 2007, CCNE accreditation 2018 Academic-Practice partnership 3-6 cohorts per year 30-100 residents per cohort Meet for seven 8 hour seminars over the first year



### **EBP Process**



WORK IN SMALL GROUPS (2-5)



SELF-SELECT TOPIC



USE JOHNS HOPKINS MODEL



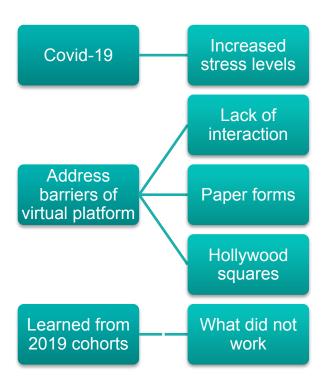
EACH SEMINAR 45-90 MINUTES FOR GROUPS TO MEET

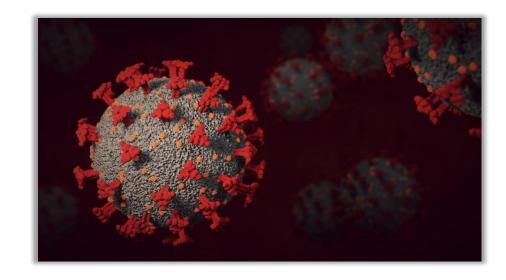


GOAL-TEACH RESIDENTS HOW TO INCORPORATE EBP



# **Elephant in the Room**



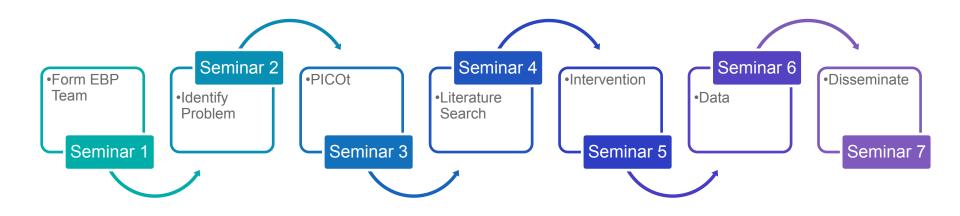


#### Intervention

#### **Structured EBP Labs- (keep it simple)**

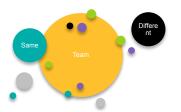
- No paper forms
- Utilized breakout rooms
- Shared spreadsheet
- 1-2 EBP experts (Coordinator & Lead Facilitator)
- Each seminar provide time for an EBP step
- Dissemination: Move to virtual presentation only
  - Breakout rooms for large resident groups





Coordinator & Resident Support



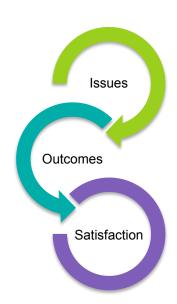


- EBP team formation
- Virtual vs In-person
- Ice breakers help
- Teams 2-5 members

### Let's form our Teams

## Quick Ice Breaker

- Give your name
- Where you are from (institution & location)
- Fun fact
- Take 3 minutes



- Identify problem on their unit
  - Patient focus
    - NSI
    - New process or how to improve a process
  - Staff focus
    - Re-education
    - Stress/Unit Morale/Unit Environment
- Find something they are passionate about
- Reach out to their manager, educator, or facilitator

## Let's identify our problem

### **Directions**

- As a team, reflect back to your bedside nursing days
- Take 5 minutes to discuss issues that occured on your unit
- Agree on one issue/problem you would like to know more about



- Drives the literature search
- Properly created PICOt provides the key words for your literature search
- Interactive session
  - Residents dialogue question
- Is question direction
  - How does the influence your search
- Provide PICOt template

## Let's develop a PICOT

#### **Directions**

- From your identified problem develop a PICOt
- Work as a team to edit
- When you have one raise your hand

## **PICOt templates**

For an intervention/therapy:
In(P), what is the effect of(I) on(O) compared with(C) within(T)?
For etiology:
Are (P) who have (I) at (Increased/decreased) risk for/of (O) compared with (P) with/without (C) over (T)?
Diagnosis or diagnostic test:
Are (is) (I) more accurate in diagnosing (P) compared with (C) for (O)?
Prevention:
For (P) does the use of (I) reduce the future risk of (O) compared with (C)?
Prognosis/Predictions:
Does (I) influence (O) in patients who have (P) over (T)?
Meaning:
How do (P) diagnosed with (I) perceive (O) during (T)?

Melnyk B., & Fineout-Overholt E. (2010). Evidence-based practice in nursing & healthcare. New York: Lippincott Williams & Wilkins



## Let's Work through the PICOt Process

**Problem:** CHG baths are not performed each day to 100% of patients with central lines on the medical-oncology unit.

**PICOt:** Inpatient oncology patients with central lines at an academic medical center (P) who receive daily CHG baths (I) compared to those who do not receive daily CHG baths or refuse the intervention (C) will have a decreased rate of CLABSI (O) during their admission on onoclogy unit (T).

**PICOt rewrite:** For oncology patients with central lines (P) does CHG bath scripting (I) compared no CHG scripting (C) effect rate of CHG compliance (O) over a 4-week period(T).



- Rapid critical appraisal
- Level of Evidence
- Interactive session
- Establish deliverables
  - 5 articles
  - Only 1 can be level V-expert opinion

- Implementation Process
  - Manger approval of process is verbal
- Surveys
  - Surveys are approved by coordinator, manager & educator
  - Use of electronic survey system
  - Restrictions
    - Involve patients need IRB
    - Assessing staff pay/retention need HR approval
- Timelines

- How to gather the data
  - Qualitative vs Quantitative
- Looking at the data
  - What does it tell us
- Creating graphs
  - Using a spreadsheet

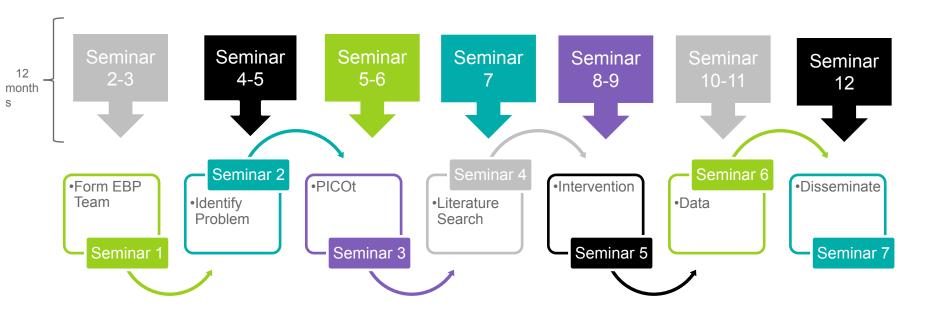


### EBP 7

#### Goals:

- EBP Teams must present
- Virtual slides
  - Breakout rooms by unit/specialty
  - Well attended by leadership
- In-Person Poster
  - Conference style
  - Increase engagement
- Disseminate out of residency
  - Unit
  - Local, state, or national conferences/meetings

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#### References

Chan, E., Glass, G. F., & Ni Phang, K. (2020). Evaluation of a hospital-based nursing research and evidence-based practice mentorship program on improving nurses' knowledge, attitudes, and evidence-based practice. *The Journal of Continuing Education in Nursing; J Contin Educ Nurs, 51*(1), 46-52. <a href="https://doi.org/10.3928/00220124-20191217-09">https://doi.org/10.3928/00220124-20191217-09</a>

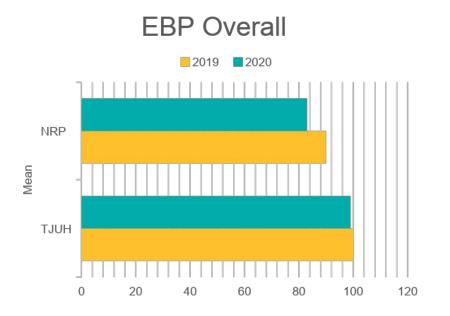
Gallagher Ford, & Melnyk, B. M. (2019). The Underappreciated and Misunderstood PICOT Question: A Critical Step in the EBP Process. *Worldviews on Evidence-Based Nursing*, *16*(6), 422–423. https://doi.org/10.1111/wvn.12408

Melnyk B., & Fineout-Overholt E. (2010). Evidence-based practice in nursing & healthcare. New York: Lippincott Williams & Wilkins

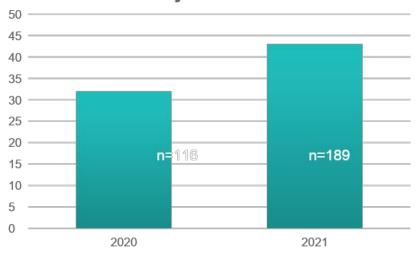
Melnyk, B. M., Tan, A., Hsieh, A. P., & Gallagher-Ford, L. (2021). Evidence-Based practice culture and mentorship predict EBP implementation, nurse job satisfaction, and intent to stay: Support for the ARCC© model. *Worldviews on Evidence-Based Nursing*, 18(4), 272-281. <a href="https://doi.org/10.1111/wvn.12524">https://doi.org/10.1111/wvn.12524</a>

Smith, A. L. (2021). Evidence-based practice training in nurse residency programs: Enhancing confidence for practice implementation. *Teaching and Learning in Nursing, 16*(4), 315-320. <a href="https://doi.org/10.1016/j.teln.2021.05.005">https://doi.org/10.1016/j.teln.2021.05.005</a>

### Does it Work?



## EBP Projects 2020 & 2021



### Jefferson Health

#### **18 Hospitals**

- Einstein Medical Center Elkins Park\*
- Einstein Medical Center Montgomery
- Einstein Medical Center Philadelphia\*
- Jefferson Abington Hospital\*
- Jefferson Bucks Hospital
- Jefferson Cherry Hill Hospital\*
- Jefferson Frankford Hospital
- Jefferson Hospital for Neuroscience\*
- Vickie and Jack Farber Institute for Neuroscience
- Jefferson Lansdale Hospital\*\*
- Jefferson Methodist Hospital\*

- Jefferson Stratford Hospital\*
- Jefferson Torresdale Hospital
- Jefferson Washington Township Hospital\*
- Magee Rehabilitation Hospital
- MossRehab\*
- Physicians Care Surgical Hospital
- Rothman Orthopaedic Specialty Hospital
- Thomas Jefferson University Hospital\*
  - Sidney Kimmel Cancer Center (NCI-designated)

3,500 physicians/practitioners (employed)

9,600 nurses (full/part time)

50+ outpatient and urgent care locations

6.2 million outpatient visits

<sup>\*</sup> Magnet® designation from the American Nurses Credentialing Center for nursing excellence

<sup>\*\*</sup> Pathway to Excellence® designation from the American Nurses Credentialing Center for sustaining a positive practice environment

# **Questions?**



# Let's work together



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Lisa Iozzo, BSN, RN, MEDSURG-BC Michelle Keller-Oglesby, MSN, RN, NPD-BC Karen Ulmer, MSN, RN, RN-BC, NPD-BC

#### **Disclosure information**

Lisa lozzo, Michelle Keller-Oglesby, and Karen Ulmer have no relevant financial relationships to disclose.

#### **Learning Objectives**

Following participation in this learning session the participant will be able to:

- Describe how virtual rounding sessions are used to support nurse residents both professionally and psychosocially
- List two strategies Nurse Residency Leaders can implement to create sustainable virtual rounding

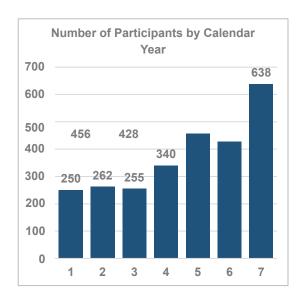
#### **Penn Medicine Health System**

- Located in Pennsylvania and New Jersey:
  - Chester County Hospital
  - Good Shepherd Penn Partners
  - Hospital of the University of Pennsylvania
  - Lancaster General Hospital
  - Penn Medicine Princeton Health
  - Penn Presbyterian Medical Center
  - Pennsylvania Hospital

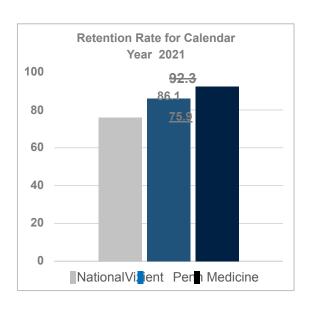




#### Penn Medicine Nurse Residency Program







# **Virtual Rounding**

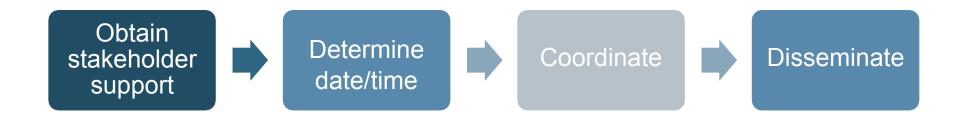
#### **Background**

- Providing in-person support to nurse residents can be challenging
- Nurse residency program leaders:
  - Identified a need for an alternative to in-person support
  - Developed an innovative approach to remain visible
  - Created weekly optional "virtual rounding" sessions
- Purpose of virtual rounding
  - Connect with nurse residency leaders
  - Engage with other nurse residents
  - Provide professional and psychosocial support

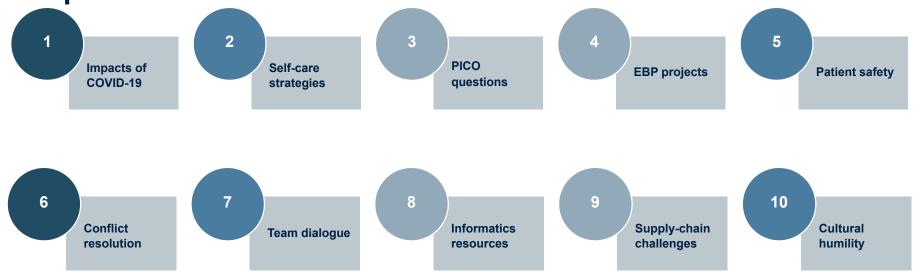
#### **Supporting Evidence**

- Nelson (2017)
  - Virtual synchronous classrooms = real-time capability
  - Geographical benefit
  - Prioritize three key elements
- Reinholz, D. L., et al, (2020) shared
  - Teaching online = new challenges and new opportunities
  - Implement strategies to encourage participation virtually
- CCNE Standards
  - III-D = Evidence-based Practice and Quality Improvement
  - III-E = Personal, Professional, and Leadership Development

#### Implementation of Virtual Rounding



### **Nurse Resident-Driven Topics**



### **Nurse Resident-Driven Topics: Psychosocial**

- Impact of COVID-19
- Conflict resolution
- Team dialogue: inter-professional and preceptor communication
- Cultural competency/humility
- Self-care/stress management strategies



### **Nurse Resident-Driven Topics: Professional**

- Patient safety/adverse events
- Informatics/technology resources
- Supply-chain challenges



- Creation of PICO questions
- Evidence-based practice (EBP) assistance



# Sustainable Virtual Rounding

### **Strategies for Sustainability**

- Email weekly to solicit participation
- Schedule consistent meetings
  - Same time/same place
  - 52 times a year
- Rotate two NRP leaders
- Communicate
  - Managers
  - NRP team

Good afternoon,

Attached is our attendance sheet for Nurse Residency Virtual Rounding for March 9 and 16, 2022.

Please update your nurse resident's timecards to reflect the time on the attached PDF, 1 hour of paid time per session.

Thank you for your support.

Kelly and the Nurse Residency team

Kelly A. Gallagher, MSN, RN, NPD-BC, NEA-BC

Director, Nurse Residency Program

Penn Medicine

Celt 215-847-5214

Email: kelly callagher (20pennmedicine.upenn.edu)

We had two join us for virtual rounding. Both just wanted to join for the support and camaraderie. Neither had specific concerns and both sound like they are doing very well:

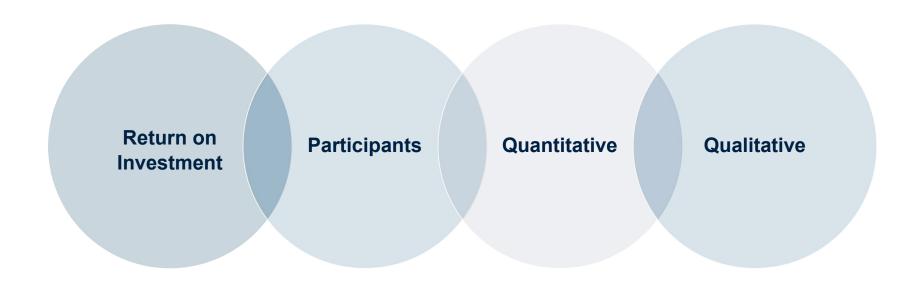
- Nurse A shared some of the challenges starting in the Pavilion, feeling isolated sometimes when she is there and flipping back and forth between the old hospital and the Pavilion. She is off orientation and sounds like she feels very supported and is doing well with time management.
- Nurse B just finished her Peri-Op class and is starting to rotate through the specialties. She feels supported and no real concerns. Feels she is getting feedback and if the preceptor doesn't provide, then she asks.

#### **Lessons Learned**

- Inform nurse residents of expectations
  - RSVP to obtain link
  - Professional behavior
- Structure of virtual rounding
  - Invite all nurse residents regardless of cohort
  - Establish nurse residents' goals
- •Communicate with nurse residency leaders
  - Include nurse residency leaders on RSVP
  - Summary of rounding session



### **Outcomes**



#### **Outcomes**

"Discussing EBP during this meeting was helpful in preplanning my project and developing expectations..."

"Continued discussion of the transition from being a student nurse to a practicing nurse has been extremely helpful..."

"Communicating with and having moral support from my nurse residency peers helped me...emotionally and mentally..."

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- Professionals

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Pandemic Crash Course: Learning to Teach Equitably in Synchronous Online
Classes. CBE life sciences education, 19(4), ar60. https://doi.org/10.1187/cbe.20-06-0126



NurseResidencyProgram@pennmedicine.upenn.edu



# **Quality and Value Analysis... Come on Down!**

Robin George, BSN, RN Amanda McCauslin, MSN, RN May 2022



## Let's Play the Price is....Correct!

For every dollar spent in the U.S., how many cents are spent on healthcare?

Approximately how many nurses are employed within the U.S.?

Wasteful use of the U.S. healthcare resources accounts for how many billion dollars annually?

Shrank et al., 2019; Yakusheva et al., 2022

## Why Teach Value Analysis and Quality?

- Patient Protection and Affordable Care Act
- Value-informed Nursing Practice
- Quality and Safety
   Education for Nurses
- Nursing Code of Ethics
- Nurse Empowerment



Altmiller & Hopkins-Pepe, 2019; ANA, 2015; CMS, 2021; Izon & Pardini, 2018; QSEN, n. d.; Roman & Major, 2022

## **Identifying Need For Change**

#### Learner Evaluations

- Material not engaging
- Disconnect between information and practice

### Suggestions from Evaluations

- More interaction
- Less PowerPoint
- More discussion
- More engagement



## **Andragogy**

#### **Malcolm Knowles**

- Self-directed learning
- Problem centered
- Immediacy of application
- Build on previous experience

#### **ARCS**

- Attention
- Relevance
- Confidence
- Satisfaction

### 4 C's

- Caring
- Comedy
- Creativity
- Challenge

Billings & Halstead, 2016; Keller, 1987; Story & Butts, 2009



## **Knowledge Check**

Name two things that are important to adult learners.

What are the four elements of the ARCS model of instructional design?

What are the four C's of compelling teaching?

Billings & Halstead, 2016; Keller, 1987; Story & Butts, 2009

## **Evidence-based Teaching Strategies**

- Concept Mapping
- Gaming
- Problem-based learning
- Case Studies
- Discussion
- Simulation
- Role play
- Reflective journaling



Billings & Halstead, 2016; Breytenbach et al., 2017; Brull et al., 2017; Reed, 2020; Weiss, 2018

89

# Introducing Value Analysis

- Micro lecture
- Video
- Game time

Billings & Halstead, 2016; Breytenbach et al., 2017; Brull et al., 2017; Reed, 2020; Weiss, 2018



Popp, 2022

## **Addressing Immediacy of Application**

- Cost of a fall
- Discussion
- Prevention Strategies

The Joint Commission Center for Transforming Healthcare, 2022



Popp, 2022

## Addressing Immediacy of Application

- Cost of CLABSI
- Discussion
- Prevention Strategies



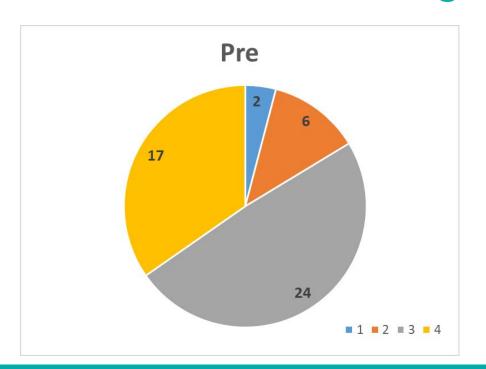
AHRQ, 2019 Popp, 2022

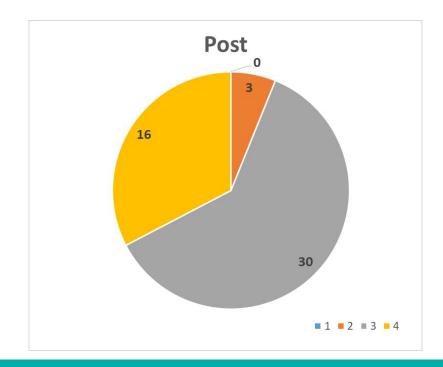
# Quality

- Lecture
- Raw number vs rate
- Problem-based learning
- Group activity

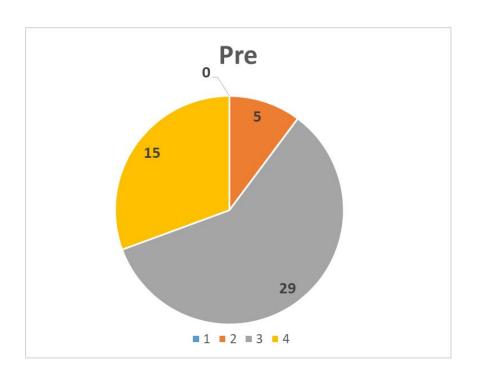
NSI	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Benchmark
Injury Falls	0.62	0	0	0.66	0.61
CAUTI	2.06	0	0	0	1.23
CLABSI	0	2.06	1.83	0	0.68
HAPI	0	0	0	6.67	1.86
VAE	3.38	7.07	0	0	2.13
VAP	2.77	0	0	0	0

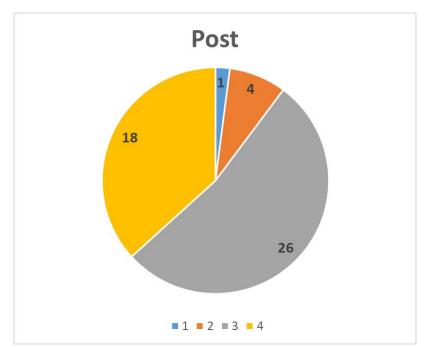
# Explain risks to patient safety and strategies for minimizing these risks



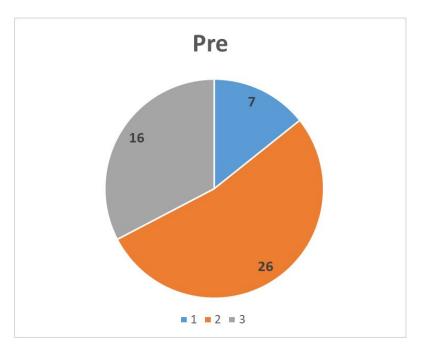


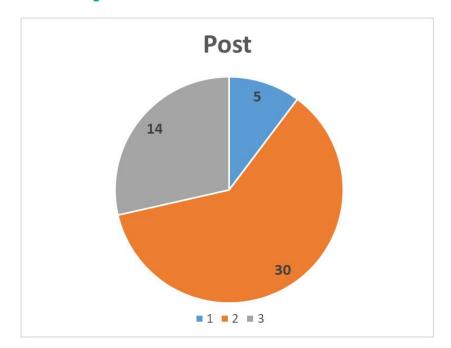
## Identify unit-specific indicators of patient safety



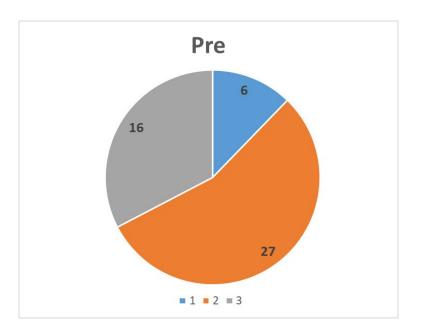


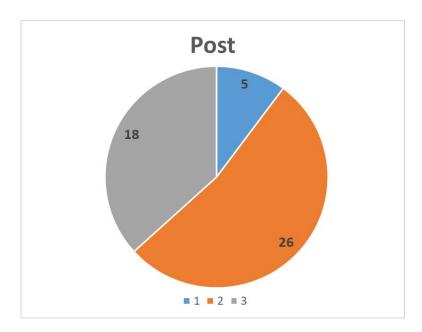
# Discuss evidence-based strategies to minimize infection risks to patients





# Evaluate the outcomes of infection prevention interventions, including institutional and unit data on health-care associated infection rates and costs





## **Engagement**

Smaller scale level helps with understanding

More aware of what I have wasted

Ways to reduce wastefulness on my unit

Enjoy getting out of my seat and having some fun

Coordinators did a great job keeping me engaged

Able to put into everyday practice and explain to other nurses on my unit

### **Lessons Learned**



- Classroom management
- Getting the ball rolling
- Connecting the dots
- Buying into the why
- Encouraging feedback for improvement

### **Questions**



Robin George, BSN, RN georgerm@UPMC.edu



Amanda McCauslin, MSN, RN mccauslinas@UPMC.edu

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## **Breaking the Silence: Virtual Rounding**

UPMC of Central PA Delancy Zeller, MSN, RN, NPD-BC Amy Popp, BSN, RN, OCN Vizient Conference- May 2022



### **Disclosure information**

Amy Popp and Delancy Zeller have no relevant financial relationships to disclose.



## **Learning Objectives**

Following participation in this Power Session the participant will be able to:

- Identify alternative rounding methods used to support nurse residents.
- 2. Distinguish traditional rounding methods to a virtual platform.

### **Picture This**



(Zeller, 2022)





### **Think About This**

## Would you be comfortable asking for help?







(Zeller, 2022)

# What do we know about the Transition to Nursing Practice?



**Factors** 

- Interpersonal
- Intrapersonal
- Organizational

# What do we know about the Transition to Nursing Practice?



**Factors** 

- Interpersonal
- Intrapersonal
- Organizational



Nurse Residency Program

- Evidence Based Curriculum
- Provide Support & Collaboration
- Build Confidence
- Reduce Turnover & Burnout

# What do we know about the Transition to Nursing Practice?



**Factors** 

- Interpersonal
- Intrapersonal
- Organizational



Nurse Residency Program

- Evidence Based Curriculum
- Provide Support & Collaboration
- Build Confidence
- Reduce Turnover & Burnout



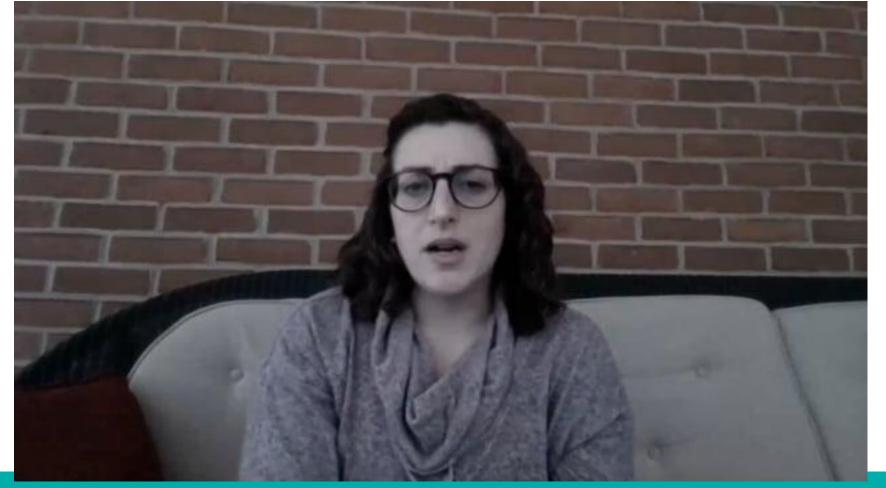
**Outcomes** 

- Engaged vs. Dissatisfied
- Empowered vs. Exhausted
- Novice vs. Competent Professional

Rush et al., 2019; Smith et al., 2021; Ulupinar et al., 2021; Wildermuth et al., 2020

### **Virtual Disconnection**





# **Translating Responses into Support**

#### Managing Additional Roles and Duties

- Additional trainings
- Communication with leadership

#### **Conflict Management**

- Self-enrolled Trainings
- Scripting
- Planning for Escalation

#### Self-Confidence and Moral Injury

- Mentorship
- Escalation to EAP Program

#### **Professional Development**

- Advancing Education
- Certification



#### **Lessons Learned**

- Less is more
- Including communication style preference is appreciated
- Maintain boundaries
- Consider privacy settings on the document
- QR code use

#### **Outcomes**

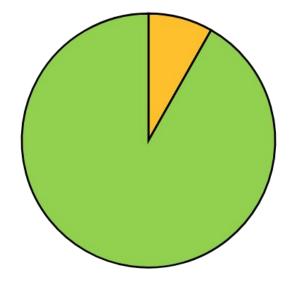
93 Virtual Rounding Responses

75 Nurses

25 total responses while virtual

68 total responses since return to in-person

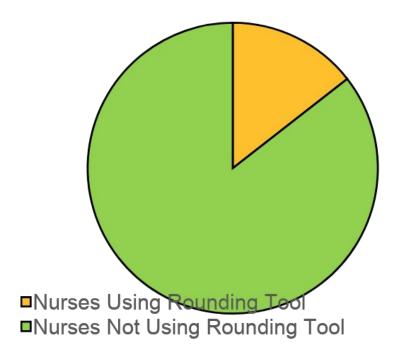
#### **Virtual Environment**



Nurses Using Rounding Tool

Nurses Not Using Rounding Tool

#### **In-Person Environment**



# Let's work together



**Amy Popp, BSN, RN, OCN** 

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#### **Evaluations**



Complete your evaluation before Friday June 17th, 2022.



Please provide any comments/quarterly content topic ideas!



Evaluation link will be emailed this afternoon.

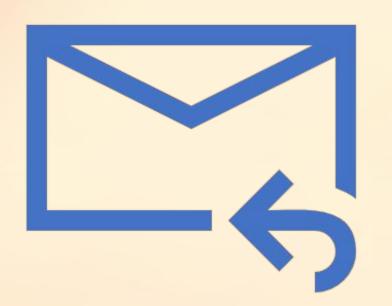


# Mark Your Calendars!

Wednesday, September 7<sup>th</sup> LIVE!

6:45am-11:00am

Lancaster Marriott



# How Can We Support You?

aricords@peakoutcomes.com

# Thank You Jeanette!



#### **PA Action Coalition Staff Contacts**

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