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at Lahey

January/February 2002

Changing for the Better

◆ Judith Evans, RN, EdD

"We become what we believe we will become."

Change your beliefs, change your mind, and you will change your outcomes for the better," wrote Melissa Fitzpatrick, editor of *Nursing Management*. Certainly these are words that give credibility to the adage "easier said than done." How very hard it is to believe that we have the inner power to change our own outcomes as we deal with the difficulties of healthcare combined with the tragic events of the past year. In fact, it seems that some of the things that have occupied our time in the past now seem almost irrelevant. But perhaps it is in the midst of what we think is irrelevant that we achieve the most impact.

At the start of this next year, let us take time to reflect on the impact that nurses make each day. Every action you take influences those around you, regardless of how insignificant it may seem. Think about the student nurse who looks to you for guidance; the patient whose life is entrusted into your care; the family you helped when a loved

one passed away. Make this the year to change your beliefs, knowing that when you do so, you can change your outcomes. Learn something new, join a task force on your unit, write and implement a new standard of practice, take an inventory of your skills and acquire a new area of practice, call a school to learn about furthering your education, find a new spirit in your care giving. Collectively, we have the inner power to make the year 2002 the year of creativity and change.

SPOTLIGHT

Judith Evans

Judith A. Evans, RN, EdD, joined Lahey in 2000 as director of education and clinical guidelines.

Judy received her BSN from the University of Rochester, her MSN from Catholic University of America, and her doctorate from Teachers College, Columbia University. Prior to joining Lahey, Judy was assistant professor of nursing administration at the University of New Hampshire. She has also been director of professional development and research at Cooper Hospital University Medical Center; director, Critical Care, Emergency Services and Trauma Program, at Temple University Hospital; associate director of Bellevue Hospital in New York; and acting chief of nursing education at the National Institutes of Health.

Lahey continues to be enriched by Judy's presence. Her accessibility, knowledge, and encouragement provide us with the opportunity to grow as professionals, increase our self-efficacy, and meet the demands of a challenging nursing environment.



COUNCIL REPORTS

Patient Care Leadership Council

The Patient Care Leadership Council is working diligently to address documentation and charting issues in preparation for the JCAHO visit in 2002. Kathie Jose, chief nursing officer, held "strategic planning days" in October and November for nursing leaders.

In addition to preparing for the visit by the joint commission, the attendees developed a set of focused goals and plans that aim to increase satisfaction for both patients and nurses at Lahey.

—K. Deleskey, RN

Policy Coordination and Development Council

The Policy Coordination and Development Council has reviewed several proposed policies, including the CPR Record, the Code Cart Maintenance Policy (as recommended by the Code Committee), and the revised policy for nursing students practicing under the Department of Nursing. The new form for documenting influenza and pneumococcal

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Lahey
CLINIC

CNO Corner

◆ Kathie Jose, RN, MSN, Chief Nursing Officer

This is the time of year when our nursing colleagues are completing their annual evaluation process. This is the time for you to work with your nurse manager to review your achievements, share your accomplishments, and establish your goals for the coming year.

It is important to me that staff nurses have their voices heard. I encourage your participation in the nursing governance structure. The councils are the forum to determine professional nursing practice at Lahey Clinic, but they can be effective only if they reflect your values and high standards. Please talk with your nurse manager about how you can become involved in making the decisions that affect your practice.

This year will bring exciting changes. Many of our colleagues have decided to learn a new clinical specialty and will be opening the new telemetry unit. Congratulations to those who are already working hard to develop new skills in order to provide excellent care to patients on this unit.

This is a challenging as well as a difficult time to be a nurse. Please join me on January 24 for the All Nursing Assembly to share our nursing vision for 2002. I wish you all the very best for the New Year.

Kathleen S. Jose, RN, MSN

COUNCIL REPORTS

Continued from page 1

adult vaccine was presented. Tracy Malone is developing a policy for the transcription of medication orders (inpatient) based on the guidelines she has written for staff. However, a policy for transcription of all orders, in both inpatient and outpatient settings, must be developed. A draft job description was circulated for feedback from staff.

The larger task at hand is a complete review and possible revamping of the entire documentation system. The Senior Leadership Council has requested this review based on JCAHO standards. A subcommittee is tackling this project, starting with the

assessment tools. Karen Toland is focusing on specialty areas, Tracy Malone on critical care areas, Sue Aubert on the medical/surgical units, and Sheila Baxter on the ED. This is a formidable but important task. Co-chairs of this very active council are Debbie O'Donnell, ext. 8898, and Sheila Cunniff, ext. 2737.

—C. Horlitz, RN

Professional and Education Council

The P&E Council sends out a weekly calendar for the nursing community that is posted in every nursing area. If you haven't seen it, please ask your manager. The council has also organized a task force to develop a nursing practice model to encourage profes-

sional growth and provide a clinical path for recognition.

Nurses' Week 2002 is in the planning stage. If you have any comments or suggestions please let the council know. Contact Judy Evans, ext. 8515.

Notes on Nursing is now on line at www.lahey.org under "publications." Our thanks to Darena Rainsdon of IT for her help.

—N. Rainier, RN

Nursing Quality and Safety Council

At the October meeting, a new CQI project developed in SICU was presented. The project deals with improving the problems involved with the transcription of medical orders. The problem is seen hospital wide. The pilot study involves putting a triple check system in place. Data will be forthcoming in the next few weeks.

The committee is considering a system whereby patients at risk for falling will be given yellow wrist bands for quick identification.

—M. Catman, RN

Clinical Practice Council

The Clinical Practice Council is entrenched in policies and procedures. Members have been reviewing, reorganizing, revamping, and creating an entire set of written nursing policies and procedures. If you can help in any way, if you want to write a policy, or if you want a procedure written, please contact the council co-chairs (Janet Habeshian, ext. 8536, or Jean Brown, ext. 2542). They would be grateful for your help. The first three Clinical Pathways are on line and in use, and the response has been enthusiastic. The council is reviewing the format for the pathways and is interested in suggestions from the staff.

—N. Rainier, RN



NEWSFLASH

◆ New Infection Control Policy:

To reduce the risk of MRSA/VRE transmission, patients with a history of MRSA or VRE will be flagged on the admission face sheet with a "Y" next to the notation CONTACT ISOLATION (top right corner of the admission face sheet, under the social security number). Nursing staff will initiate contact isolation for these patients upon admission.

◆ Please do not use tape over the insertion site of an IV. The semipermeable dressing must "breathe."

◆ Before applying any restraint device, please read "Check First before You Restrain." Developed by Marie Catman, RN, these guidelines may help decrease our use of restraints.

◆ Medication cards should be distributed to all patients discharged from the hospital (ID number 12919).

Notes on NURSING at Lahey

January/February 2002

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Notes on Nursing at Lahey Clinic is a newsletter for and by nurses at Lahey. We hope to improve communication among nurses and bring you information you need. Let us know how it can serve you. Call us, send e-mail to Notes.on.Nursing@Lahey.org, or write to us care of Notes on Nursing, Nursing Administration, Lahey Clinic, 41 Mall Rd., Burlington, MA 01805.

January	M	T	W	TH	F
		1	PCL 2	3	4
	PC&D 7 P&E	Journal Club 8 CPC	9	BCLS 10	11
	14	15	PCL 16	+Nursing CE: All Walks Q&S 17	18
	PC&D 21 P&E	+ Basic Dysrhythmias 22 CPC	+ Preceptor Workshop 23	ALL NURSING ASSEMBLY 24	25
	+ Basic Dysrhythmias 28	29	30	31	

February	M	T	W	TH	F
					1
	PC&D 4 P&E	Journal Club / CPC 5 + Basic Dysrhythmias	+Critical Care PGL 6	Nursing Research BCLS 7	8
	+ Critical Care 11	12	+Critical Care 13	14	15
	+ Critical Care PC&D /P&E 18	CPC 19	+ Critical Care PGL 20	Q&S 21	22
	25	26	27	+ Nursing CE: Heartbeats 28	

January

8 Leadership Journal Club
Time: 12 noon
Place: Nursing Conference Room
◆ Open to all. A copy of the article to be discussed is available in Nursing Administration.

10 BCLS (CPR)
Time: 1:15-3:15 pm
Place: Auditorium
◆ Recertification only. Preregistration is required. Call ext. 8725 or 8552. Also offered February 7.

17 Nursing Continuing Education: All Walks of Life +
Time: 7:45 am-3:30 pm
Place: Auditorium
◆ Open to all. Preregistration is requested. Please call ext. 8725. Speakers will present information about very diverse topics that affect us throughout life.

22, 28, and Feb 5 Basic Dysrhythmias, Parts I, II & III +
Time: 9:30 am-12:30 pm
Place: 31 Mall Rd, Room 185
◆ Intended to help beginning critical care/telemetry nurses develop an understanding of basic dysrhythmias. Open to all RNs.

23 Preceptor Workshop +
Time: 8:00 am-4 pm
◆ Open to all. Preregistration is required. Call ext. 8725 for information and location. Designed to help nurses develop the skills needed to be effective preceptors.

24 ALL NURSING ASSEMBLY
◆ See below.

February

5 Basic Dysrhythmias, Part III +
Time: 9:30 am-2:30 pm
Place: 31 Mall Rd., Room 185
◆ See January 22 for summary.

5 Leadership Journal Club
Time: 12 noon
Place: Nursing Conference Room
◆ Open to all. A copy of the article to be discussed is available in Nursing Administration.

6, 11, 13, 18, 20 Critical Care Course +
Time: 7:30 am - 4:00 pm
◆ Open to all. Preregistration is required. Call ext. 8725 for information and location. Covers basic theories fundamental to critical care nursing. Each day may be taken as a single module or the series may be taken in its entirety.

7 BCLS (CPR)
Time: 1:15-3:15 pm
Place: Auditorium
◆ Recertification only. Preregistration is required. Call ext. 8725 or 8552.

7 Nursing Research Series
Time: 4 pm - 5:30 pm
Place: Alumni Conference Room
◆ Open to all. Presentation of a nursing research project.

28 Nursing Continuing Education: Heartbeats +
Time: 7:45 am-3:30 pm
Place: Auditorium
◆ Open to all. Preregistration is requested. Please call ext. 8725. This program is devoted to current cardiac issues, including women and heart disease.

Key to Nursing Council Meeting Schedule

PCL: Patient Care Leadership Council meets 1/2, 1/16, 2/6, 2/20 at 1:30 in the Lobby Conference Room

PC&D: Policy Coordination & Development Council meets 1/7, 1/21, 2/4, 2/18 at 2 pm in the Alumni Conference Room

P&E: Professional & Education Council meets 1/7, 1/21, 2/4, 2/18 at 8:30 am in the Lobby Conference Room

Q&S: Nursing Quality & Safety Council meets 1/17, 2/21 at 11:30 am in the ED Conference Room

CPC: Clinical Practice Council meets 1/8, 1/22, 2/5, 2/19 at noon in the ED Conference Room.

SAVE THE DATE

You're invited to join Kathie Jose, RN, CNO, at the All Nursing Assembly on January 24.

- 12:30-1:30 pm Alumni Auditorium, LCMC
- 2:30-3:30 pm Lahey Clinic Northshore
- 6:30-7:30 pm Alumni Auditorium, LCMC

COMMITTEE ROUNDUP

Research Committee

The 2001 research series closed with an excellent presentation by Rita Florio, RN, on patient satisfaction with surgical services. The series continues on the first Thursday of the months of February through May and September through November 2002. The committee is seeking nursing colleagues who have completed research and are willing to share their findings.

Toni Hayes, PhD, nursing professor at Regis College, has joined the Research Committee. We are working to establish Lahey as a primary sight for Regis students to complete their research projects. It

will be a tremendous advantage to our nursing community to have research conducted here. In addition to introducing nurses to research methods and findings, the experience will augment our practice by presenting the scientific evidence on which we base our actions.

Have you developed practice behaviors that you know work for your patients? Do you question the value of any nursing activities in your department? Practice questions you have can lead to research projects that provide data to support your actions. Please contact Judy or any of the research committee members with ideas for study.

Pharmacy and Therapeutics

Because similar product names may create confusion and lead to medication errors, the Pharmacy has been presenting in-service training sessions for nurses on the newest diabetic medications: Humalog/Humulin and Lantis/Lente. Though the names of the products are similar, they are different drugs requiring distinct dosages. Please use caution when dispensing these preparations.

The new IV grid has been approved and should be available on your unit. Contact John Atkisson, ext. 5428, for copies.

The Nursing Department frequently uses standing orders in patient care. Before these orders can be sent to medical records, they require approval by the Standing Order Committee. If the orders include medications or any medication references or abbreviations, they must also be approved by the Pharmacy and Therapeutics Committee. Contact Marty Goldberg in the Pharmacy if you have questions about the medications on a standing order. Policies or guidelines that include medications or references to medications must also be approved by this committee.

—K. Deleskey, RN

BOARD OF REGISTRATION IN NURSING

The Board of Nursing requires that Massachusetts nurses obtain 15 contact hours of continuing education (CE) credits to renew their licenses. All contact hours need to be completed within the two years immediately preceding the renewal of registration.

The registration period is birth date to birth date in the even numbered years for registered

nurses and birth date to birth date in the odd numbered years for practical nurses. New licensees are not required to submit evidence of continuing education for the current registration period (first renewal). Fifteen (15) contact hours will be required thereafter.

This column will address frequently asked questions regarding CE.

What is the difference between contact hours and continuing education units (CEUs)?

A contact hour is equal to one 50-minute hour of attendance at or participation in a program that meets the board's requirements for CE credits. A CEU consists of 10 contact hours. Nurses need 15 contact hours of CE (or 1.5 CEUs) in order to meet the requirements

for license renewal. One contact hour is equal to 50 consecutive clock minutes. Ten contact hours equal one (CEU).

One semester hour of credit equals 15 contact hours for CE programs that have a clinical component. Two clinical hours equal one contact hour.

—M. Flynn, LPN
Member, Board of Registration
in Nursing

Notes on NURSING

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