



All Aboard

Tracking Our Magnet® Journey

Vol. 2 April 1, 2019

Shared decision making is an important hallmark of our department, and we rely on the work of councils to influence our nursing practice. We unveil this graphic to provide an at-a-glance education about our councils, how they communicate and what kinds of decisions they make.

Nursing Shared Decision-Making Communication Structure

Johns Hopkins Bayview nurses practice within shared decision-making structures, a model of governance in which nurses are formally empowered to make decisions related to:

- Clinical Practice
- Resource Management
- Nursing Education
- Nursing Inquiry

Innovation starts with YOU, not I



Chief Nursing Officer Maria Koszalka, Ed.D., RN with President Richard Bennett, M.D.

Recently, our nursing leadership team spent an afternoon in an orientation class, led by our Magnet coordinator, **Blanka McClammer, MS, MA, RN, NEA-BC**. Blanka did a great job translating the requirements of the lengthy Magnet application into a request for evidence or supporting documentation. She also explained how some of the quality metrics come into play for safety, patient satisfaction and RN satisfaction.

What is ANCC *really* looking for, and how do we prove that we have advanced practices in place to ensure these quality outcomes?

The most enlightening part of that orientation was the lively discussion about ongoing initiatives already underway on inpatient units and in outpatient clinics all across our campus. Many leaders were able to point to current

practices or projects that met or exceeded the certification criteria. Others had great new initiatives in the planning stages. Listening to our nurses brainstorming about how to share their stories was the best possible reflection of Magnet culture at Johns Hopkins Bayview, and it was tremendously gratifying to hear.

This indicates to me that our nurses already practice at the highest level of professional nursing each day. We don't have to create all new practices, policies and protocols; they are standard work on our units today. But, we need to document our work to share our stories of success, and the growing presence of unit-based councils will support this process well.

Groundswell projects in patient safety on the BICU; celebrations of organ donation on the MICU; the embrace of research; increased access to education and advancement at all levels of a nursing career. You will read stories about each of these - all of which share a common theme of unit-born innovation.

The Magnet journey is about more than just data. It's about the way we work as a team to bring the best in patient care to our campus. Thank you for your support of our Magnet journey and for your commitment to patients, families and each other.

Gratefully,

Maria V. Koszalka, Ed.D., RN
 Chief Nursing Officer
 Vice President, Patient Care Services



JOHNS HOPKINS
 MEDICINE
 JOHNS HOPKINS
 BAYVIEW MEDICAL CENTER

Speak Up & Speak Out Isn't All We Need

7 Ways to Engage in Safety on Your Unit

- 1 Staff meetings
- 2 BaSIC: Bayview Safety Improvement Council
- 3 Huddles
- 4 Patient Safety Rounds
- 5 CUSP teams
- 6 Unit-Based Councils
- 7 HERO

These avenues to communicate about patient safety need your voice. Employee engagement is the key to increasing nurse satisfaction. Join us!

Next Stop:
Nurse Appreciation
Week
May 6 to 12, 2019

Magnet Minute

Journal Club Comes to Campus

New Knowledge, Innovations, and Improvement (NK)



Trish Davidson, Ph.D. and Yvette Wilson, DNP launch scientific inquiry.

The Nursing Inquiry Council (NIC), a council charged with promoting nurse-led research on campus, was thrilled to welcome School of Nursing Dean **Patricia Davidson, Ph.D., MED, RN, FAAN**, to a Lunch and Learn presentation about launching a journal club. The purpose of a journal club is to review research studies and discuss the implications on evidence-based clinical practice. Rather than forcing nurses into a classroom, journal clubs provide a forum for a collective effort to keep up with scientific literature.

Journal clubs vary widely in structure, substance and style: no one format is required. They inspire positive change for staff as well as: teaching staff to think critically about new information and building teams while forging new relationships. They encourage a great diversity of opinions, and improve professionalism in clinical practice.

Dr. Davidson led her guests through a spirited brainstorming activity to define what a successful journal club might look like on our campus. She will be providing her recommendations to our nurses as they form a journal club. The biggest thing, says Davidson, “Don’t make statistics scary!”

We look forward to expanding scientific inquiry under the leadership of IPPS professional development specialists **Cathy Lindauer, DNP, RN, CEN** and **Kathie Guth, MS, RN**. Their hope for the Nursing Inquiry Council is that the group will inspire clinical nurses to conduct research, producing new evidence-based practices and quality improvement. We value the positive impact our nurses have on patients through activities such as research, and appreciate their role in advancing professional nursing practice at Johns Hopkins Bayview Medical Center.

You can learn more about journal clubs and nurse-led research at insidehopkinsbayview.org/nursing/research.

“Don’t make statistics scary!”

- Dean Patricia Davidson, Ph.D., MED, RN, FAAN

Rewards and Recognitions

An important feature of Magnet hospitals is a robust culture of celebrating staff achievements. Learn more about these at Johns Hopkins Bayview at insidehopkinsbayview.org/nursing/awards

Moments of Nursing Excellence

This award recognizes nursing excellence based on demonstrated change in practice in an area of specialty or patient population.

DAISY Award

This national award was established to celebrate the extraordinary compassion nurses provide their patients and families every day. It is a merit-based award that honors great clinical skill, leadership and especially compassionate care.

Nurse of the Year Award

The Nurse of the Year award rewards excellence in nursing practice at Johns Hopkins Bayview Medical Center. Many candidates are widely recognized as role models on our campus.

Patient Safety Star

The Patient Safety Star award recognizes staff members that have prevented harm or hazard to patients through extraordinary action at Johns Hopkins Bayview Medical Center.



What on Earth is a Nursing Sensitive Indicator?

NICU Leads the Way to Patient Safety

Empirical Quality Results



The NICU staff celebrates safety

Nursing Sensitive Indicators (NSI) are metrics of **structure, process and outcomes** that are specifically seen as a reflection of nursing care. They are used to determine the quality of care provided in hospitals, and are important to validate patient outcomes and the financial health of the Medical Center.

The Johns Hopkins Bayview NICU has a long history of organically infusing Magnet recommendations into everyday practice; their approach to tackling infections on the unit is a great showcase of this mindset. Recently celebrating three years of zero CLABSI infections, the staff took time to toast their achievements with a special team breakfast.

According to **PCM Vicki Minor, MSN, RN**, NICU patients are the most vulnerable of all populations. The protocols and materials used to treat adults either don't exist or are much more complicated to use in tiny patients. It is also incredibly complex to place and maintain a central line, and there are no

nursing resources with this expertise dedicated specifically to this population, such as the PICC team that works with adult patients.

Kelly Baca, MSN, RN, clinical nurse specialist for the NICU, describes the process they use as “sticking to the basics”. The nurses developed their central line placement protocol as part of a collaborative with Maryland Patient Safety Center several years ago. They subsequently researched and built a maintenance bundle of care, which had no CDC guidelines to follow for NICU patients. Diligence, careful attention to hygiene practices and collaboration through huddles, checklists and rounding are hallmarks of these bundles. Baca credits the NICU nursing staff as the driving force behind the unit's CLABSI-free success.

“Three years CLABSI-free is a massive big deal. I could not be more proud of this staff than I am today.”

-NICU Medical Director Maureen Gilmore, M.D.

“Three years CLABSI-free is a massive big deal”, says **NICU Medical Director Maureen Gilmore, M.D.** “In the face of a continuously high census, incredibly challenging acuity and the configuration of bed space on our NICU, this achievement is even more remarkable. I could not be more proud of this staff than I am today. They were the first ICU on our campus to introduce a maintenance bundle of care, and it's their initiative and dedication that keep these littlest patients safe. “

Nurse-led innovation is a hallmark of all Magnet hospitals, and the NICU is a shining example of this, both in practice and in outcome.

Tackling NSIs

Preventing patient falls is an issue at the top of every nurse's list when it comes to safety. Our nurses use a combination of strategies to keep those at risk of falling out of harm's way.

Because the incidence of falls remains high and does not meet the Magnet standard, dedicated resources from every specialty are working to find a solution.

Who does what?

- The Falls Restraint Committee offers every unit a voice. They provide audits, education and guidance, especially related to the post-fall huddle and documentation.
- The Professional Practice Council shares the perspective of the bedside nurse on documentation tools and best practices of both **prevention** and **intervention** that have worked on their units.
- A Nursing Quality Clinical Community meets across Johns Hopkins Health System, using a data-driven process to develop tools to address the falls rate.

The JHFRAT tool was recommended by our clinical community and has been implemented on the Neuroscience Unit (NSU) with impressive results. In addition, NSU has implemented purposeful rounding, specialized hand-off processes and other workflows that have sharply reduced their falls rate.

Nursing leadership is committed to working as one with the entire health system to eradicate patient falls, and we look forward to sharing success stories on this key NSI during our Magnet journey.





Shari Wilkerson, RN, pictured at right with lantern and MICU colleagues

Somber Celebration

Honor Walk Tradition Comes from the MICU

Structural Empowerment (SE)

In the middle of the January 12 night shift, the Nurse Staffing Office placed a few calls. There was a patient on the MICU who had died and had chosen to share the gift of life through organ donation. Would the staff on our units please take a moment to celebrate the gift of this patient by lining the halls of the Medical Center as the patient was transported to the operating room one last time?

Yes, resounded the answer from across the Medical Center.

So began the second ever honor walk, as this new tradition is known on our campus. The observance included physicians and staff from the emergency department and patient care services staff from every other inpatient unit, who stood in silent tribute along our corridors, using a special lantern in remembrance of this donor. Says **Laurel Gaffney**, manager of hospital services from the Living Legacy Foundation, “based on the practice of Honor Guards, the Honor Walks evoke many feelings: pride, sadness, joy, loss, and reverence, to name a few. The specific meaning of an Honor Guard varies in military and law enforcement circles, with the intent to pay tribute to heroes lost.”

MICU nurse **Shari Wilkerson, RN**, introduced the concept of a donor Honor Walk to Johns Hopkins Bayview after attending an annual conference at the Living Legacy Foundation. She saw practices used in other hospitals across Maryland to recognize the importance of organ donation, and felt that the Honor Walk would provide a thoughtful tribute that can help foster healing for families and also demonstrate and how much we, as caregivers, appreciate this sacrifice of these heroes that so greatly improve life for countless other patients.

Shari worked with colleagues to develop a quote that appears on the lantern that is housed on the MICU, “There are some who bring a light so great to the world that even after they have gone, their light remains.”

Patient- and family-centered care takes many forms in all stages of medical treatment. We are grateful for this new nurse-fostered tradition on our intensive care units, which reflects the core mission of nursing at Johns Hopkins Bayview and showcases the best in professional practice on our campus.



Burn Center nurses Emily Werthman, BSN, RN, Adam Brady, RN & Craig Shoemaker, BSN, RN.

Magnet in Action

Case Conference is a New Best Practice in the Burn Center

New Knowledge, Innovation and Improvements (NK)

M&Ms are not just a candy! Once a month, physicians and hospital administrators meet to review critical clinical events at the Morbidity and Mortality Conference, sometimes called M&M. This recurring conference is focused entirely on safety outcomes and patient care.

Common practice at academic medical centers such as ours, M&M conferences provide physicians a formal way to examine adverse outcomes, review possible medical errors, and prevent the repetition of experiences that have led to complications.

However, there was no comparable nurse-led initiative on campus. M&M is a presentation by physicians for physicians.

Program Nurse Coordinator Emily Werthman, BSN, RN, concluded that such a forum would support the demands of an upcoming American Burn Association survey as well as encourage greater teamwork and interdisciplinary collaboration at the Johns Hopkins Bayview Burn Center, metrics of concern on its 2017 Safety Culture Assessment results.

The unit hosted its first case conference in January 2019, where all members of the care team came together to debrief about a recent patient case. All staff from the Burn Center – comprised of the Burn ICU and the Burn-Wound Unit – were encouraged to attend this informal, multidisciplinary meeting. Says Werthman, “the case conference allows us to do a deep dive on one specific case, using the staff’s common language and shared experiences to give a voice to every person on our unit.”

Nearly 40 clinicians of every specialty attended the hour-long conference in the Carroll Auditorium. RNs, physicians and fellows, PAs, PCTs, PTs, OTs, respiratory therapists, pharmacists and hospital administrators: every role involved in patient care on the unit was represented. Nurses and fellows presented the case in detail as the entire team debated potential root causes, failures or practices that may have impacted the outcome in a complex case.

The case conference has an important impact on not only teamwork across units, but also on resilience, trust and staff training. It reinforces the “Speak Up and Speak Out” culture that is building at the Medical Center. The conference also provided “great peace of mind to the staff that they had done their absolute best on this particular case. It was cathartic for many people, who were relieved to confirm the causes for this patient’s outcome. The case conference produced exactly the benefit we were hoping to achieve with communication,” shared **Clinical Nurse Specialist Yvette Wilson, DNP, APRN-CNS, CCRN**.

A key feature of Magnet organizations is the presence of nurse autonomy and empowerment, which were on full display in this nurse-led conference. The Burn Center plans to hold a case conference quarterly, making a standard practice out of this new nursing experience.

Floating Bridges

Staffing Innovations Come From the Front Line

Structural Empowerment (SE)



The Float Pool and NSO Build Bridges at JHBMC

Before sunrise, RNs in our Nurse Staffing Office (NSO) arrive on campus, ready to tackle their busiest time of day. This hard-working team ensures that every nursing shift is safely covered. From there, they attend the bed board meeting and move into a capacity management role, spending most of their time on the phone coordinating the movement of patients between units – a nonstop tightrope walk in a hospital that is often at 95% capacity. This group responds to crises and codes around the clock, oversees the management of alerts and supports patient transport after hours – mission-critical responsibilities that are held by other departments in most hospitals.

The NSO is also a groundswell source of innovation at Johns Hopkins Bayview, fostering the development of a talented float pool of nurses and ancillary staff.

In many hospitals, float pools are small and used only in emergencies. Our growing float pool has developed its own unique identity over its 20 years of service, and its staff of 130 is held in high regard as a model across the Johns Hopkins Health System. **Sue Lurz, BSN, RN** oversees a team of floor nurses and specialty resource nurses who support Med-Surg, Intensive Care, Maternal/Child Health, Psychiatry and the Emergency Department. In 2017, the float pool launched a new nursing role: the Advanced Team, newly licensed RNs who are cross-trained by floats and unit staff throughout their specialty to decrease the need for agency staff.

Says **Director of Nursing Andy Magalee, MS, RN**, “These teams are great connectors! Because they see every single unit, they bridge a lot of gaps, using an expanded knowledge base to share insights and observations with every other unit across campus. Our float pool nurses are flexible and versatile, and are constantly thinking of a better way to do things, and the specialized resource nurses are in great demand.”

These teams use relationships to organically spread great ideas. The gap-bridging work of this unique staff reflects their dedication to sharing best practices and finding structural solutions to problems- a reflection of the SE Magnet Model Component.

Floating to the Top

We are thrilled to celebrate the 2019 Patient Safety Star winners from Johns Hopkins Bayview: **Guy Dickens, BSN, RN** and **Kristin Tubbs, BSN, RN**, both of the Float Pool.

Dickens and Tubbs were recognized for their dedication to improving patient safety, their focus on educating and mentoring teams, and their calm, stabilizing influence in complex situations.

Congratulations to these shining stars of safety at Johns Hopkins Bayview!

Education Station

Magnet Model Components Defined

Transformational Leadership

Transformational Leadership

Transformational leaders change the world. They are visionary and inspiring leaders who know how to encourage and engage others. They understand the need for proactive, strategic planning and how to use influence and advocacy within the organization to acquire resources to operationalize their goals.

They genuinely engage and respect others with whom they work and cultivate a culture of trust.

Structural Empowerment

Structural Empowerment

It is the role of leadership to create structures and processes that ensure that all nurses, at all levels, have access to the information, resources, and support needed to support exemplary professional practice, new knowledge, and outcomes.

Exemplary Professional Practice

Exemplary Professional Practice

This model component examines the professional practice model, care delivery system, and interdisciplinary care. It requires a comprehensive understanding of the role of the professional nurse. The professional practice model depicts how nurses practice, collaborate, communicate, and develop professionally.

New Knowledge, Innovations & Improvements

New Knowledge, Innovations and Improvements

To practice safely and achieve optimal outcomes in a challenging and increasingly diverse healthcare environment requires increased rigor in the art and science of nursing. Nursing is a practice discipline supported by standards, research, and the application of evidence.

Magnet organizations are expected to innovate, redesign, transform, and expand knowledge to develop next-generation applications to ensure safe, effective, efficient, patient-centered care.

Empirical Quality Results

Empirical Quality Results

A question for the future of nursing is not “What do you do?” or “How do you do it?” but rather, “What difference have you made?”

To further describe the elements of exemplary professional practice, it is necessary to look at autonomy, accountability and peer review, supporting competence and ethical practice, ensuring workplace advocacy and diversity, building a culture of safety, interdisciplinary collaboration and nurse involvement in budgeting, staffing and scheduling.

Finally, exemplary professional practice places emphasis on quality monitoring and outcomes related to patient satisfaction, nursing satisfaction, and key nursing sensitive clinical indicators such as patient falls with injuries and hospital acquired pressure injuries stage 2+ (The Big 3)



A Few Fun Facts About Erna Pollicar, MSN, RN

Favorite music: Classic Oldies

Favorite book: The Giving Tree, by Shel Silverstein

Dinner out with friends would always be at: Ikaros in Greektown

Vacation spot of choice: My hometown beach in the Philippines, Boracay and Palawan Island

Coworker I most admire: Nurses who go the extra mile to give **comfort:** their presence and special touch make a great difference in patient outcomes.

If I weren't a nurse, I would be an educator. I love to work with students. I am able to do this a bit at work, especially on committees like the Patient Education Committee, PFAC (Patient and Family Advisory Council) and when I implemented a CUSP team (Comprehensive Unit-Based Safety Program).

Proudest moment at work: Playing a lead role in the Cultural and Diversity Fair! Embracing and respecting the different skills and backgrounds of my coworkers has really shaped the way I work. I love the quote, "Diversity is being invited to the party. Inclusion is being asked to dance."

Super Power: Gratitude. I believe that thanking people in public is really important. Empathy is huge!



(l to r) Nurses Griely Persia, Annie Duremdes and Erna Pollicar at the Cultural and Diversity Fair

Magnet Champion Spotlight

Erna Pollicar, MSN, RN

Exemplary Professional Practice



Patient Care Coordinator
Erna Pollicar, MSN

Hurricane Katrina taught patient care coordinator Erna Pollicar, MSN, RN that she is at her best in chaos. She estimates that the suburban hospital where she worked during that 2005 catastrophe was operating with 40% of their typical staff as they managed a patient load greatly increased by weather refugees from downtown New Orleans. But, says Pollicar "nurses are connectors by nature. They just dig in and get it done even under pressure", and her flexible staff managed that crisis safely and professionally.

At that time in her career, Pollicar was a young mother and floor nurse; new to the U.S., she performed many roles in patient care including bedside nurse,

charge nurse, and nurse educator. As her children grew older, Pollicar was able to balance the needs of her family with the demands of her career, and found that she craved the classroom. She had been an educator for ten years in her native Philippines. Teaching and learning are deeply ingrained in her.

Pollicar made the decision to return to school with the help of the Johns Hopkins Bayview tuition support program. She completed her MSN in 2015 and transitioned to her role in the Nurse Staffing Office in 2016. Pollicar thrives in this fast-paced setting, where a great team of problem-solvers works to manage bed capacity and staffing levels for every unit in the Medical Center. It's a natural fit for a crisis-comfortable communicator with her broad knowledge of operations and policy. Pollicar believes strongly that "caring communication with each other builds a trusting relationship, which is vital in achieving excellence in the workplace." She loves unique challenges of her days in the nurse staffing office.

Now that her children are grown and her time is truly her own, Pollicar studies simpler things: Spanish language classes and jewelry-making. But, a DNP is on her horizon and she plans to head back into a classroom again soon to continue her quest for new clinical expertise. "At the end of the day, you want to feel like you've made a difference".

"Nurses are connectors by nature."

-Erna Pollicar, MSN, RN

Nurses in the Know

We are thrilled to introduce new features of our expanded professional development program at Johns Hopkins Bayview. Our degree-seeking nurses can now easily apply for tuition support right on the intranet.

A few key features of nursing professional development:

1. For staff currently working in supporting clinical capacities, we offer 100% reimbursement of tuition, books and fees in pursuit of an RN.
2. Now available to all nurses with **just one year of experience**, the RN to BSN program provides full reimbursement for tuition, books and fees.
3. Coaching and mentoring are offered to graduate level nursing students from a nurse educator here on campus.

Please consider joining us for a Professional Development Fair on June 18 to learn what comes next for your career!

Explore the Professional Development pages to develop your personal career path and become a Nurse in the Know. Visit insidehopkinsbayview.org/intheknow.

Nurses
in the
KNOW

"Innovation is the ability to see change as an opportunity – not a threat." -- Steve Jobs

insidehopkinsbayview.org/magnet

