Each year, during National Nurses Week, Brigham and Women’s Faulkner Hospital celebrates its nurses with awards recognizing excellence in critical thinking, commitment to patient teaching, continuing education and outstanding delivery of patient- and family-centered care with compassion and dignity. This year’s winners are just a few examples of the work being done each and every day within the Department of Nursing.

On hand at the Nurse Recognition Awards ceremony was Vice President of Patient Care Services and Chief Nursing Officer Judy Hayes, MSN, RN, NEA-BC, who spoke of the accomplishments the Department of Nursing has achieved in the last year. She pointed out the record number of poster and podium presentations given by BWFH nurses at both national and local conferences. She also recognized the five BWFH nurses who were nominated for the Boston Globe’s Salute to Nurses 2016. Finally, she acknowledged the department’s continued commitment to excellence and the quest for Magnet Designation which are evidenced by the partnership with a nurse scientist, Unit Based Council Summit meetings and the publishing of the first ever Department of Nursing Annual Report, all of this while the hospital was transitioning to our new electronic medical record system, Partners eCare. “I couldn’t be prouder,” she said of the department. “It’s been a great year.”

BWFH President Michael Gustafson, MD, MBA, also spoke, thanking the families who so generously support the Nurse Recognition Awards each year. “I also want to congratulate our six honorees on behalf

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I am excited to share our summer issue of BWFH Nurse. In this issue, we celebrate the recipients of our annual Nursing Awards. These nurses and staff represent the best of our work. Sharing the news of the good work being done around the Department of Nursing is so inspiring to me.

I’d also like to thank those of you who took the National Database of Nursing Quality Indicators (NDNQI) RN Job Satisfaction Survey. The survey provides nurses with an opportunity to voice their opinion about a number of topics related to job satisfaction such as nurse-to-nurse interaction, decision-making, autonomy and opportunities for professional advancement. I am thrilled to announce we had an 83 percent participation rate! In the coming months, survey results will be available for all of us to review and as always celebrate areas we excel in and plan for improvement in others.

I’d also like to congratulate our nursing staff at all levels on the first year with Partners eCare. In October we look forward to our first major upgrade. There will be roughly 2,000 changes, some as small as fixing a typo and some that are much larger. If you’re to be impacted, we’ll have information available in HealthStream and on tip sheets.

As always, thank you for making Brigham and Women’s Faulkner Hospital a great place to work and receive care!

Judy Hayes, MSN, RN, NEA-BC
Vice President Patient Care Services
Chief Nursing Officer

Nurse Recognition Awards honor BWFH’s finest, continued from P1

of the senior leadership team, our medical leadership and the entire Leadership Council. You represent a really amazing group of providers, doing incredible work day after day,” he said.

Larissa Alves, BSN, RN, from 6 North, Gail Nuzzi, BSN, RN, from Pre-Op Holding, and Jill O’Brien, RN, from the PACU, all received Mrachek Awards. The Mrachek Award was established in 1995 and is given to three members of BWFH’s Department of Nursing in recognition of their clinical skills and to support their continuing education in the nursing profession. William J. Mrachek, a former Board Member, was on hand to present the awards to the winners.

The Mary Devane Award was established in 1998 to be given to any member of BWFH’s Department of Nursing (RN, PCA, UST, MHW, Secretary) in recognition of their commitment to delivering patient care with compassion, kindness and humor. This year, the Devane Award went to Yomi Buraimoh, a Mental Health Worker on 2 South. The award was accepted in Buraimoh’s absence by Psychiatric Nurse Director Paula Knotts, MSN, RN, NE-BC, and 2 South Staff Nurse Doug Spalding, RN.

Members of the McAlarney family were on hand to present their award to 6 South’s Meaghan McCarthy, BSN, RN. The Angela McAlarney Award was established in 2003 to be given to a member of BWFH’s Department of Nursing in recognition of excellence in patient and family education.

Finally, Lindsey McDermott, BSN, RN, from 6 South received the Elaine Hazeltin Memorial Scholarship Award. Elaine Hazeltin’s family established this award in 2009 to be given to a nurse who demonstrates a dedication to BWFH within the practice and advance of nursing. This recipient should be continuing his or her nursing education.
NEW LEADERSHIP ROLES

Bowen-Brady named Associate Chief Nurse for Practice and Innovation

In May of 2016, former Program Manager for Professional Practice/Magnet Designation Helene Bowen-Brady, MEd, BSN, RN-BC, assumed the role of Associate Chief Nurse for Practice and Innovation at BWFH. In her new role, Bowen-Brady will be responsible for Nursing Professional Development, Quality, Informatics and Practice.

Reed named Operating Room Nurse Director

In January of 2016, Natascha Reed, MSN, RN, assumed the role of Operating Room Nurse Director at BWFH. She began her nursing career as an OR scrub tech in Labor and Delivery at the Naval Medical Center in Portsmouth, Virginia. Before coming to BWFH, she held the position of Clinical Manager in the OR at Paradise Valley Hospital in Arizona.

PEER REVIEW HELPS BWFH NURSES DEVELOP ANNUAL GOALS THAT SUPPORT PROFESSIONAL DEVELOPMENT

Late last year, BWFH’s Department of Nursing implemented a formal annual peer review process for all registered nurses. Peer review is a form of self-regulation that is required by professionals in diverse professions across the world. For nurses, peer review is the process by which registered nurses are held accountable for their professional actions, not only to themselves, but also to their colleagues, consumers of healthcare and society. As members of the most trusted profession, nurses have an obligation to ensure the quality of care provided to patients and to ensure that colleagues adhere to acceptable standards of practice. Participating in nursing peer review increases accountability among individuals and team members, thereby enhancing the professional practice environment and improving quality outcomes for patient care.

The process implemented at BWFH aligns with the contemporary principles of peer review that are based on the American Nurses Association peer review guidelines. At BWFH, nurses at all levels used an evidence-based practice tool to provide feedback to peers in groups of two to three nurses. Trained peer review facilitators were present at every session to guide and support staff in this new process.

“Participation rates were excellent for nurses at every level of practice,” says Associate Chief Nurse for Practice and Innovation Helene Bowen-Brady, MEd, BSN, RN-BC. “Peer review is part of a three-step process used by nurses to develop annual goals that support professional development. In the first step, nurses participate in peer review and receive feedback on nursing practice using an evidence-based tool. The nurse then uses peer feedback to develop annual goals. In the final step, the nurse shares annual goals with the Nurse Director to develop a plan to address professional development needs in the upcoming year.”

The process can be empowering for nurses. Director of Perioperative Services Kathy Merrigan, MSN, RN, points to the PACU where the nurses fully embraced the process. “The PACU took the ball with this and got it done,” she says. “They arranged the groups, made up the schedule and supported each other to go to a quiet place and complete this new initiative. It was so nice to have proactive staff that wanted to be peer facilitators. One of the nurses said, ‘I want to get out of my comfort zone.’ This to me states she is on board with change! This was a big undertaking to do something very different. I think staff learned something from the experience and will be better prepared next year.”

The staff on 6 South also fully embraced the process of peer review. “It was a successful process made possible by coordinating schedules, by staff stepping up to the facilitator roles and by the participation of each individual nurse,” says Staff Nurse Colleen Raab, BSN, RN. “Each nurse reflected on qualities that she celebrates in her peers, as well as areas that she believes her peers could improve or add to their daily nursing practice. It was beneficial to hear both sides of the spectrum. The rollout of the peer review process was an achievement towards improving the overall quality of nursing practice. It will be exciting to see how the process develops over time and how it works itself into the yearly reflection of each nurse and each comprehensive unit.”

SAVE THE DATE!
In 2016, peer review sessions will be conducted between October 1 and November 20.

Nursing Peer Review
Accountability in the pursuit of excellence
Partners’ Clinical Process Improvement Leadership Program (CPIP) is designed to engage clinical teams in the use of process improvement tools to reduce variations in care and improve outcomes for patients. This fast-paced, immersion program gives participants the tools they need to evaluate and improve a process at their own institution, within the span of four months. Recently, two teams from BWFH took part in the program.

From the ICU, Nurse Director Pat Marinelli, MSN, RN, NP, and Clinical Leader Ellen McCarthy, MSN, RN, CC, RN, focused on early mobilization of ventilated patients. Nurse Practitioner Julie Vosit-Steller, DNP, FNP-BC, AOCN, and 6 South Staff Nurse Lindsey McDermott, BSN, RN, focused on improving awareness of and access to the Palliative Care Consult Service. Both teams found the work on their specific projects to be productive, but more importantly, learned to use tools that can be implemented in future quality improvement projects.

“It was a fascinating process,” says McCarthy of the program. “You start with this big dream of what you want to do, but then you whittle it down to a smaller project that’s more manageable.” Ultimately, the ICU decided on a plan that involved an interdisciplinary approach. Each morning the ICU nurses huddle to determine if any of their ventilated patients require mobilization that day. They then coordinate with Physical Therapy and Respiratory Therapy in the morning to determine a time when all parties can be present rather than trying to get everyone together at the last minute.

“We had five all-day sessions where they taught us different ways to think about collecting data, doing surveys and how to present the information and make certain charts,” says Marinelli. At each session, the teams worked within a template on a new set of slides, resulting in a full presentation that even included a final slide that could also be used later for a poster presentation. The template can be applied to any project going forward. “Since the Nursing Department has a lot of projects going on right now, I’m sure some of the information will come in handy,” says Marinelli.

For the Palliative Care team, working through the process helped Vosit-Steller and McDermott see their workflow through a different lens. “High visibility of gaps in care, that most think are automatically being addressed, are often the focus. This program develops a natural sense to look for such identifiers in practice,” says Vosit-Steller.

To address the issue of awareness of and access to the Palliative Care Consult Service, the team decided to focus on education of both nurses and residents. They wanted to make sure the Palliative Care Consult Service is called in time. And, because the residents rotate on and off 6 South so frequently, they are often unaware that the program is even available when they first start. The team’s goal is to make sure the residents are aware of the Palliative Care Consult Service when they first begin their rotation on the floor. “The program taught us the tools we need to be successful on this project and other projects going forward as well,” says McDermott.

Part of what made the CPIP program so impactful for both teams was seeing and critiquing the work of the various other teams from across the Partners network and getting their feedback on their own projects. “There were a lot of ideas. And it was interesting to see that all the other Partners entities have similar problems that we have,” says McCarthy.
MAGNET CONSULTANT OFFERS ADVICE TO MEMBERS OF BWFH’S DEPARTMENT OF NURSING

At a two-day workshop held at BWFH, nurses from both inpatient and ambulatory areas gathered to discuss their journey toward Magnet Designation. Special guest Magnet Consultant Lori Carson was there to offer encouragement and advice on preparing to apply for Magnet status.

Pre-Op Holding nurse and Magnet Committee member Phyllis Gar, RN, summarized the events of the workshop saying, “We are learning how to document the process and outcomes of all the good work we are accomplishing. We have learned how important it is to work collaboratively. And we are learning what the five components of Magnetism are for the beginning of our Magnet journey. After working with Lori, we feel confident that the work and elements of the journey are already in progress. Now we just need to organize, data collect and get all our nurses on board and realize all the great work we have been doing.”

In addition to members of the Magnet Committee and nursing leadership, the workshop was also attended by many frontline staff nurses who found the experience to be inspiring. Gail Nuzzi, BSN, RN, said, “I felt the workshop was nothing short of amazing. It was so good to be in a room filled with so many inspiring coworkers, managers and directors! My biggest take-away would have to be getting more familiar with what Magnet means.”

Lilian Go, RN, was mostly unaware of the on-going work being done around Magnet until she attended the workshop. “I was so overwhelmed at the meeting,” she said. “The amount of work that is being done by everybody in the hospital is amazing. There has been talk about going for Magnet status for years and to think that it’s really happening now is so exciting.”

Kathy Glennon, RN, also found learning more about Magnet to be beneficial. She said, “I thought the workshop was great. I didn’t realize there was so much that has to go into the Magnet application process. I also didn’t know about all the great things that are going on here at BWFH. When I first heard we were applying for Magnet I thought it was crazy, but after attending the workshop I think it is an attainable goal.”

For members of nursing leadership, the two-day workshop proved just how dedicated BWFH’s nurses are to furthering their practice. “There is a lot of great work in progress that is nurse-driven. I am so proud,” said Kitty Rafferty, MSN, RN, NEA-BC, Associate Chief Nurse of Ambulatory and Perioperative Services.

OR STAFF NURSE WINS PATIENT SAFETY AWARD

At BWFH, delivering safe care remains at the very top of the priority list. The Patient Safety Award is given to staff members who exhibit exceptional care in regards to patient safety. The OR’s Maura Lauenstein, RN, CNOR, was recently honored with a Patient Safety Award.

Lauenstein was recognized for her work in identifying a near miss that could have resulted in a medication error. The Pharmacy delivered two medication mixtures to the OR in similar packaging, one that was intended to be hung as an IV and one that wasn’t intended to be hung as an IV. While Lauenstein was away from the desk where the medication is delivered, Anesthesia picked up the wrong bag by mistake. Lauenstein recognized the error and immediately looked into the situation. Luckily, Lauenstein discovered that Anesthesia had a bag of each mixture and had hung the correct IV solution for the start of the case.

Knowing that the potential possibility for error existed, Lauenstein reported the event in our patient safety reporting system, RL Solutions, and suggested either new packaging or an improved delivery system to prevent similar errors in the future.

Pharmacy set to work establishing a new labeling system that makes the two medications look very different. The mixture that is not hung as an IV now has a bright yellow label that’s color is visible even if the bag is placed with label face down.
BWFH’s Department of Nursing recently honored Case Manager Kathleen Lang, BSN, RN, with a DAISY Award. The DAISY Award, established by the DAISY Foundation, is named in memory of J. Patrick Barnes who died at the age of 33 from Idiopathic Thrombocytopenic Purpura (ITP), an auto-immune disease. The Barnes Family was inspired by the care that Patrick received and established this unique program to recognize and thank the nurses who make a profound difference in the lives of their patients and families.

Lang was nominated for the kindness, calmness and patience she displays in her interactions with patients and their families. Having recently taken on the role of Case Manager, she was applauded for her use of her bedside skills in her new role. Her nomination read in part, “She will walk patients, forming a bond with them, while helping calm them down. She is often found sitting at the bedside making eye contact with the patient and truly making them felt heard. She is an excellent resource for staff, advocating for not only her patients and their families, but also the nurses.”

Lang’s nomination went on to recount a recent interaction with an agitated patient. “Without hesitation, Kathy was at the bedside with her gentle tone speaking with the patient to determine what she could do to help in the situation. She stayed with the patient for a long time, comforting her and getting her to take her medications and participate in her care.”

Gesturing to her gathered coworkers as she accepted her DAISY Award, Lang said, “These are all phenomenal Case Managers. I don’t think people see Case Managers as bedside nurses, but I see everyday how wonderful and powerful this staff is at changing so many lives. It’s not just about discharges, it’s about all the hard work that they do making a difference and supporting families. I’m just so proud to be part of their group.”

To learn more about the DAISY Foundation, visit daisyfoundation.org.
At BWFH, the Department of Nursing values the clinical outcomes of our patients and patient and family satisfaction. We also value the professional development of our nursing staff. One way in which our nurses are encouraged to grow is through evidence-based practice and quality improvement projects. Nurses are also encouraged to share the new knowledge and best practices that come from these projects through poster and podium presentations at nursing conferences. In the spring of 2016, three evidence-based practice projects were presented at various professional conferences throughout New England.

The projects were “Critical Care Nurses Boning Up on Intraosseous Insertions” (Patricia Marinelli, MSN, RN, NP; Ellen McCarthy, MSN, RN, CCRN; Ross Stratton, BSN, RN, CCRN; Hollis Solorzano, BSN, RN, CCRN; Patricia Connolly, BSN, RN; Kristyn Shields, BSN, RN; Ryan Boyd, BSN, RN, CCRN; Claire Hamrock, BSN, RN, CCRN, and Alicia Ciulla, BSN, RN), “Back to Basics: Nurse-Led Evidence-Based Infusion Practices” (Patricia Hanley, BSN, RN; Denise Amato, RN; Annemarie Bosse, RN; Christine Canavan, BSN, RN; Sheila Derby, RN; Minda Getagno, MS, RN; Jin Lian Ping, RN; Noreen Connolly, PhD (c), RN, ANP-BC, PCCN; and Lynne Morrison, MS, RN) and “A Unit within a Unit: Caring for Patients with Chemical Dependencies on a Medical Unit” (Suzelle Saint-Eloi, MS, RN; Theresa Roche, MSN, RN; Kathleen Lang, BSN, RN; Barbara Peary, MS, RN; and Phyllis Cotter, RN).

At the Organization for Nurse Leaders for Massachusetts, New Hampshire, Rhode Island and Connecticut Spring Quarterly Meeting, ICU Nurse Director Patricia Marinelli, MSN, RN, NP, and ICU Staff Nurse Kristyn Shields, BSN, RN, presented “Critical Care Nurses Boning Up on Intraosseous Insertions” and IV Team Staff Nurse Patricia Hanley, BSN, RN, shared “Back to Basics: Nurse-Led Evidence-Based Infusion Practices.”

At the Horizons 2016 three-day biennial critical care symposium, Nurse Educator Theresa Roche, MSN, RN, and 6 North Staff Nurse Ellen O’Connor, BSN, RN, provided an oral presentation to attendees as well as a poster presentation. ICU Clinical Leader Ellen McCarthy, MSN, RN, CCRN, also provided a podium and oral presentation titled “Critical Care Nurses Boning Up on Intraosseous Insertions” and Hanley again shared “Back to Basics: Nurse-Led Evidence-Based Infusion Practices.”

At the North Eastern Organization of Nurse Educators Annual Symposium, Roche, McCarthy and Hanley again presented.

Finally, at the Emerging Trends Impacting Acute/Critical Care Leaders Symposium presented by the Greater Boston Chapter of the American Association of Critical-Care Nurses and Regis College, Roche, McCarthy and Hanley again presented along with 6 North Staff Nurse Ellen O’Connor, BSN, RN.

“Although the various presentations provided the same content, the conferences related to a wide group of nursing specialties,” says Nurse Educator Patricia Rabbett, MSN, RN. “Sharing the work and information in a variety of settings allows professional nurses to review content, share information and gain new knowledge of each topic. Presenting and attending professional meetings and conferences allows nurses to appreciate the work that they perform every day. Attendees network and share ideas, gain new information and ideas and truly appreciate the work that we often cannot separate from the everyday practice at the bedside. It’s important for us to share our work and learn from the practice of others. It allows us to work to continuously and consistently to improve the care we provide for our patients and their families.”
UNIT BASED COUNCIL SUMMIT FOCUSES ON EVIDENCE-BASED PRACTICE, QUALITY INDICATORS AND RESEARCH

BWFH’s Department of Nursing recently brought together nurses from each unit, including outpatient units, for a Unit Based Council Summit. Attended by nurse leaders and representatives from each of the 16 Unit Based Councils, the day provided the opportunity to share ideas and best practices.

The summit began with an update on BWFH’s quest for Magnet Designation by Associate Chief Nurse for Practice and Innovation Helene Bowen-Brady, MEd, BSN, RN-BC, followed by a presentation from Vice President of Professional and Clinical Services Edward Liston-Kraft, PhD, LICSW, on the intersection of clinical care, finances and change management. Later, Vice President of Patient Care Services and Chief Nursing Officer Judy Hayes, MSN, RN, NEA-BC, talked about the Department of Nursing’s strategic plan and Workforce Development Program Manager Mary Duggan presented on teambuilding.

A PATIENT’S FOOTPRINT

By 6 South Staff Nurse Colleen Raab, BSN, RN

After only working on the floor as a new nurse for a few short months, I had been blessed with meeting someone so special. She had a spark about her, someone you are lucky to come across once in a lifetime. She was diagnosed with an aggressive form of Parkinson’s about two years prior to her admission. A degenerative disease that slowly strips your central nervous system of its functions, she was already exhibiting signs of the disease that are typically seen after about eight to ten years. Although adjusting to her new physical limitations, her personality was still shining bright.

Upon meeting her, you are greeted by her sweet smile and memorable giggle. Her voice had become very quiet; you could barely hear what she was saying. I never saw her become frustrated when we asked her to repeat something or even if we could not understand her all together. One of my favorite things about her was her ability to make everyone feel loved. She had this quality that encompassed all of her interactions with others: sincerely looking at you with her gentle eyes, while listening with her heart.

When she came back to our floor in August, she was sporting her new, short and more manageable haircut. However, that wasn’t the only change. It was evident how the disease had continued to work its way through her body. She could no longer use her right hand and was unable to swallow without aspirating. Her voice had become even quieter, and she was now completely bedridden. Her fighter attitude was no match for the inevitable course of the disease and it was heartbreaking.

Two nurses I had started on the floor with, Lauren and Meaghan, had also taken to her when she first graced us with her presence back in March. The three of us would share stories with each other about our favorite patient, whether it was to find comfort in confiding in a friend while trying to comprehend her situation, or to laugh at how adorable and thoughtful she was. She had asked each of us about our lives, and when she came back in August, had picked up right where she left off with asking for updates. We thought she had some type of intuitive superpower because (without asking) she knew which one of us had a boyfriend and who did not, wanting the latter to date her son. As much as she asked about our lives, she also shared about hers. She absolutely loved the beach, telling us that she wished to take us there with her at some point. She had taught her two boys to swim at a young age at Nantasket Beach; you could see both the pain in her eyes of knowing she would never be going back and the comfort in picturing these priceless memories.

Until she peacefully passed away, she continued to share her personality with everyone she came across. Her mind had remained sharp and her smile soft until the end, a true gift to her loved ones. She never let the disease steal her love for chocolate ice cream, enjoying it without regret in her final days. Luna, one of the PCAs, would sing “Red River Valley” to her throughout her time with us. She loved it. I had the pleasure of watching her mouth the words with Luna on one of her last days. Luna was also so touched by her; she shared the lyrics of this song with her husband at the wake.

There are some people you meet in life that you will simply never forget. As nurses, we find ourselves meeting people at all different stages and situations in their lives. Some days are harder than others. In the end, it’s patients like this that make it all worth it. I will always keep a special spot in my heart and nursing career for her. What a beautiful woman, may she rest in peace.