



Nursing Newsletter

Department of Nursing

Fall/Winter 2009

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Exemplary Professional Nursing Practice is a hallmark of the care delivered at Hospital for Special Surgery. As the year is quickly coming to end, I am proud to know that the nursing staff at Hospital for Special Surgery has embodied the statement "Exemplary Professional Nursing Practice".

In 2009, the nursing staff has demonstrated an increased interest in professional certification and formal education. Many of our nurses are currently returning to school for advanced degrees and have achieved national certification. Nursing throughout our organization continues to demonstrate outstanding leadership in so many ways – on their units, in councils and in their professional organizations at the local, state and national levels.

Our delivery of care model "Redesign of Care at the Bedside" continues to evolve. So many things have been accomplished in terms of the delivery of care model:

- Reorganization of Councils
- Redesign of Clinical Ladder
- CNIII and CNII Education
- Point of Care Nursing Education

Positive outcomes are demonstrated as evidenced in our 2009 patient satisfaction scores.

The NDNQI Nurse Satisfaction Survey has just been completed with overwhelming response. I will review the results by the beginning of January and share them with you at "open staff" meetings. Your feedback and comments are helpful to me in formulating our 2010 Nursing Strategic Plan.

As the New Year approaches, I look forward to working with all of you as we continue our "Magnet Journey" and celebrate the excellence in nursing that is so evident throughout our organization.

Sincerely,

A handwritten signature in cursive script that reads "Stephanie Goldberg".

Stephanie J. Goldberg, RN, MSN, NEA-BC
Vice President, Patient Care Services and Chief Nursing Officer



Magnet Conference Mania

Louisville, Kentucky



Ten nurses from HSS traveled down to Louisville, Kentucky for the ANCC National Magnet Conference October 1st thru 3rd. The lucky “Magnets” were Peggy O’Donahue, CNI from the Infusion Room, Amelou Ivory, CNII from the 4th floor OR, Virginia Forbes, Director of Ambulatory Care Services, Mary Phelan, Nurse Manager of the Ambulatory Care Center, Janice Minucci, Manager of Nurse Recruitment and Retention, Jennifer Sutherland, CNII from the 9th floor OR, Ron Monteron, CNII from the main PACU, Nordis Brijmohan, CNI from 5 East, Myungsook Kwon, CNIII from 7 East and Cynthia Reid, CNIII from Private Ambulatory Care.

The theme of this year’s Symposium was “Inspiring Innovation, Achieving Outcomes.” The Magnet nursing community was out in force—over 5,000 nurses from around the world joined in the sharing of best practices with a significant emphasis on evidence based practice and the

achievement of positive patient outcomes. The ANCC continues to work towards effecting positive changes in healthcare despite current global challenges. Achieving excellence is not as easy as it looks and requires tall vision and strong commitment across the board.

In the opening general session on day one, Tom Kelly, the noted general manager of IDEO, addressed the crowd of 5000 plus nurses on how to manage innovation in our everyday lives, especially when we want to get something accomplished in our respective healthcare settings.

Another keynote speaker was Margaret McClure, one of the four original Magnet researchers. She co-authored the book Magnet Hospitals: Attraction and Retention of Professional Nurses. Peter Buerhaus closed the conference with a presentation about current and future trends in the nursing workforce.

There were hundreds of breakout sessions to choose from. The seminar themes covered all of the topics you would imagine that fall under the nursing continuum of exciting and innovative work and patient outcome driven efforts that are achieved in Magnet hospital settings. Some of the comprehensive offerings throughout the three days included:

- Evolution and implementation of Human Caring Theory with Science of the Heart (presented by Jean Watson herself)
- Discharge by Appointment: A Throughput Project
- Storytelling: An Essential Tool in Developing A Culture of Excellence
- Retention of New Graduate Nurses: A Preliminary Survival Analysis
- Collaborative Partnerships Promote Excellence in Practice and Education
- Nurse Manager Stress in Magnet and non-Magnet designated Hospitals
- Ready, Set, Grow: Interactive Strategies for Advancing Graduate Nurse Critical Thinking
- Launching and Managing a Successful Hospital-based Nursing Research Program

- Sustaining a Culture of Excellence: Pearls from a Twice Re-designated Organization
- The Link Between Nurse Staffing and Patient Outcomes
- Evidence Based Practice: Building the infrastructure for Beside Nurses
- Tipping the Culture for Recruitment: Empowering Clinical Nurses
- Empowered Nursing Teamwork Results in Reducing Hospital Acquired Pressure Ulcers

Everything down to the transportation was well organized. Shuttle buses took attendees back and forth from the convention center to the hotels. The conference was held in the “downtown” district of Louisville and southern charm was everywhere—from the hotel employees and bus drivers to the host Kentucky Magnet hospital nurses who volunteered their time to help it all run smoothly.

On the first night of the conference, buses took attendees from the convention center to Slugger Field, an old Kentucky staple of a baseball museum where we enjoyed old fashioned ball park foods. Spirited blue-grass music filled parts of the stadium walkway. In one section of the field, hundreds were enjoying line dancing to a live country music band, kicking up their heels to a banjo, mandolin and violin hoe down.

All good things must come to an end. The ten “Magnets” came back to HSS energized and ready to produce a Nursing Ground Rounds on their experiences. The next ANCC National Magnet Convention is going to be held in sunny Phoenix, Arizona, Oct 13th thru 15th in 2010.



The New Faces in Nursing

Since publishing the Annual Report in May, we have welcomed many new staff members to the HSS Nursing family. This includes another generation of OR, PACU and In-Patient Nurse Residents.

In **May** we welcomed into the PACU Residency Program: **Jamila Wright RN**, **Nateesha Silverman RN**, **Rebecca Schori RN**, **Laushonda McLawhorn RN**, and **Maryanne Fraser RN**. **Joanna Solis RN**, joined the Main OR team.

June was a busy month with the hiring of our student Nurse Externs. Included in the extern group were **June Chang (6E)**, **Elena Dempsey (7E)**, **John Gao (7E)**, **Jinah Kim (5E)**, **Kelly Kusactay (8E)**, **Nancy Lee (6E)**, **Brittany McCauley** and **Shanita Reynolds (5E)**.

John and Elena, who were assigned to 7 East and did a comprehensive poster presentation on Pressure Ulcers. Many nurses came to their seminar and learned about the staging protocols and the latest treatment modalities.



John Gao (7E) and Elena Dempsey (7E) with their poster presentation on Pressure Ulcers

Jeremy Parroco connected with the CSP team as a per diem CST. **Heidi Warnecke RN** joined the Main PACU as an experienced nurse and **Irina Kapelnik** was hired for the Main OR as a STI. Several new per diem Registrars joined our family: **Stacy Kilroe**, **Adrijana Petrov**, **Kellyann Byrne** (who went back to college but we hope to see over school break) and

Ciara Umgelter. Thank you for filling in and doing such a great job you guys!

Kimberly Allen (6E) and **Sean Graves (7E)** came on board as PCAs in **July**. We welcomed **Abby Corden Cort RN**, **Luciano DeBellis RN**, **Lyndia Holly RN**, **Tiffany Peterson RN**, and **Melissa Waxman RN**, into the July OR Residency Program. **Sun Jung (Sunnie) Park RN** came all the way from Australia to join the Main OR crew. **Jennifer Girkesh RN** started in the 9th floor ORs, **Marjorie Tapoc RN** was hired for nights on 7 East and **Sarabjit Brar RN** joined the Rheumatology team. **Rinku Christian** became a full-time Registrar on evenings in the Main PACU and **Sean Freeman** joined the per diem in-patient Registrar squad.

PSS gained **Catherine Shelef** as a per diem PCA and **Sergey Gofstein RN**, **Jubilee Po RN**, and **Bianca Gonzalez, RN** joined the Ambulatory PACUs as per diem nurses. **Myongsook Kwon RN** was promoted to CNIII on 7 East—congratulations, Kwon! Way to go!

In **August**, we welcomed **Ralph Amurao RN** and **Ann Marie Tracy RN** to 6 East, **Meaghan Roberts** as a PCA on 8 East, **Laura Rubel RN** in the 9th floor ORs, and **Mary Ann Carroll RN** in the pediatric and adult Ambulatory Care areas. **Laurence Norwood RN** returned to HSS and now works per diem in PSS, **Lola Edelman RN** and **Josephine Galang RN** came on board as per diems in the Ambulatory PACUs. Lola will be full time as of 10/19—congratulations Lola! **Jackie Owusu STI** returned to the 9th floor ORs per diem and **Adriana Washington**, Registrar, and **Gentiana Quni**, Registrar, started working per diem in the Hand and Foot Center.

We welcomed **Cortney Mahoney RN** back in **September** to the CN III role on nights on 7 East after almost working a year in Ireland. She missed us and are very glad to have her back because we missed her! **Edgar Sosa RN** and **Karen Griffith RN** were hired to work nights in the Main PACU. **Jennifer Payne RN** took a night position on 6 East. **Greg**

Armstrong, Carol Franco and **Edward Rivera** were hired to work as PCAs. **Alexandria Gordon** was hired full time to work as a PCA on 7 East.

Stacy Taylor joined the Ambulatory PACUs as a per diem PCA, and **Ann Alonso RN** and **Vanessa Dias RN** joined the Ambulatory PACUs as per diem nurses.

23 CNI nurses were promoted to CNIIs on September 6th. They were: **Jillian Coleman (Hand and Foot Center)**, **Patricia Spergl (Hand and Foot Center)**, **Melissa Bourne (6E)**, **Kristin Kenny (7E)**, **Maria Delores Limbog (7E)**, **Jessica Gonzalez (8E)**, **Nefer Tirol (8E)**, **Victoria Torres (Hand and Foot Center)**, **Alroy Teves (Main OR)**, **Paulette Masilungan (Main OR)**, **Rowena Almendral (Main OR)**, **Elizabeth Donahue (Main OR)**, **Monyne Bowman (Main OR)**, **Marilou Mendia (Main OR)**, **Shawna Nesbitt (5E)**, **Jennifer Sutherland (9th floor OR)**, **Augustine Brown (9th floor OR)**, **Aileen Escobinas (9th floor PACU)**, **Erin Elder (Main PACU)**, **Emilia Veloso (Main PACU)**, **Ron Monteron (Main PACU)**, **Geri Cassidy (SDS/Holding)** and **Jennifer Feiler (9th floor PACU)**. Hearty congratulations to you all!

New additions in the **October** new hire group brings us **Minnie Hendrickson**, our new Assistant Nurse Manager hired for nights in the Main PACU and **Rachel Feitelson** who will be working as a PCA on 7 East. A new group of In-Patient and PACU Residents began on October 5th, hailing from many different Schools of Nursing around the country. The new PACU Residents are: **Vanessa Lewinger RN**, **Gina**

Rommel RN, **Judy Tran RN**, **Keesha Holmes RN**, **Vaughn Hansen RN**, **Rita Stathis RN**, **Brittany Boehm RN** and **Ashley French RN**. The new In-Patient Residents are: **Erica Pally (5E)**, **Kathleen O'Connor (5E)**, **Kaitlin Clark (6E)**, **Christine McMorrow (6E)**, **Christine Zdeb (7E)**, who work on 7E as a PCA for a year, **Joelle Gary (7E)** and **Diana Mak (8E)**, who worked on 8E as a PCA since working an extern two summers ago. Welcome new graduate nurses—we are all here to support you.

In November, **Jane Scher RN** and **Roxanne Roscoe**, Registrar joined the 9th floor OR team, **Cathleen Finnegan RN** and **Monica Sixton RN** joined the 8 East crew along with our new PCAs **Marnelli Saulog (7E)**, **Michael Monteil**, **Ramon Pesigan** and **Kofi Nyantaki**. **Branly Jiminian** and **Joseph Wukovits** are new additions to the ORs as Unit Assistants and **Theodora Koutsothanasis RN** joined the Infusion Room team per diem.

We are happy to announce the arrival of **Ingrid Herrera-Capoziello's** son William Gabriel and **Lillian Turano's** son Daniel William in June. **Rita Rubinic** welcomed baby girl Micaela in July. In October, **Kim Weiss** welcomed Aiden Joseph and **Kara Naus** was delighted with the birth of her twin boys, Jack and Casey. Congratulations to all!



Unit Redesign Equals Improved Patient Care

Several physical changes occurred on 7 East over the last six months to optimize nursing care delivery. Both nursing staff and patients seem very happy with the results and the next unit set for the same construction changes is 6 East.

The addition of two “mini” nurses stations at the north and south ends of the unit allow for the nurses and patient care assistants to be closer to their patients when assigned to particular districts. Each station is equipped with two computers, telephone and a call bell unit. The staff is now able to chart and make phone calls conveniently. The new stations have cut down on the time it takes for the staff to go back and forth, to and from the central nurses station in the middle of the unit.

A second medication room was created and a major reorganization of the “clean” utility rooms has made daily operations run smoother. Each side of the unit

mirrors the other so that the majority of supplies are available on either side of the unit. By decreasing the frequency of having to run and get supplies in a far sided location, the nursing staff can now spend more time with the patients.

The nourishment room was also redesigned. The colors of the cabinets, walls and counter tops were selected with calm and serenity in mind. The area is now very welcoming to our patients and their family members.

A very large ice machine was added to another location—far away from patient rooms so that the patients could receive a better night’s rest.

With all these positive, helpful design changes, the staff is better able to deliver safe and convenient care to their patients.

CliniCIS Update

Many of you may be curious to know what the latest project is that we have been working on now that we have gone live with Sunrise Medication Manager. The answer is: Medication Reconciliation!

The outpatient medication profile (OMP) allows for electronic capturing of home medications which facilitates the medication reconciliation process in addition to enhancing patient safety.

Although the medication reconciliation core group still has to determine the scope of the

initial roll-out, Deysi and Nicole, your CIS Resource Nurses, have completed the initial testing phase. They have started training a number of nurses in the pre-surgical screening area already!

We will keep you posted on our progress in the CliniCIS newsletter! As always, Deysi and Nicole welcome your suggestions and comments. Feel free to email them or call with any questions or concerns!

Residency Program NEWS

We welcome new graduate nurses to HSS and give them opportunity to transition smoothly from student to practicing RN. Our OR, PACU and In-Patient programs offer new grads a structured orientation process which includes didactic, simulation, and clinical practice. It is a progressive learning experience and supports them in acclimating to their professional role as well. Nursing Professional Development has become more flexible with programming and curriculum content. Individualized approaches are applied as they learn their respective role responsibilities.

For the In-Patient and PACU residency programs, the residents are given approximately 12 to 16 weeks of orientation to their new role. After this phase, there is a monthly “Resident Meeting” and the CNS, Ingrid Herrera-Capoziello, along with Myrna Radi, the PACU Clinical Instructor, meets with them to discuss their experiences. The meetings help to support and mentor them in their novice to advanced beginner stages. The peer group experience allows them to share and learn from one another, and it also gives

them opportunity to continue their professional relationships with one another. In addition, the monthly meetings offer the opportunity to review skills, conduct in-services and provide feedback. They’re held off campus so that the residents can focus on the goals set for each meeting.

The OR residency program lasts for approximately six months and new graduate nurses are slowly introduced to the world of our three operating room areas which are the Main OR, Ambulatory Surgery and the Hand and Foot Center. Ms. Cristina Uy, the Perioperative Nurse Educator, offers similar support and mentoring to each new group. We have established that OR candidates can apply for January or July start dates.



HSS Nurses Use Their Creative Talents

HSS participated in the seventh annual NDNQI Nursing Satisfaction Survey. To encourage participation, Survey Coordinator Tina Bailey invited each nursing unit to participate in a box decorating competition. The boxes were used to collect certificates of completion for all nurses who participated in the survey. The deposited certificates were then entered into a drawing for raffle prizes at the end of the survey period.

There were 15 entries to the contest, representing all nursing areas: Inpatient, Ambulatory Surgery, Peri-operative, and Ambulatory Care. Entries included beautifully decorated gift boxes, holiday theme boxes including Halloween and Christmas, and boxes with a theme of Teamwork, which included photos and names of RNs on the unit(s). One unit even created a new male team member for their theme of RNs “Working Hand-in-Hand”.

And the winner is.....

All HSS staff, visitors and volunteers were invited to vote on the boxes which were displayed in the Richard A. Menschel Conference Center on October 22, 2009. A total of two-hundred seventy votes were cast. The unit earning the highest number of votes was the 4th floor PACU for their “Fishing For Feedback” box. The 9th Floor OR won second prize with 47 votes for their spooky skeleton themed entry. Coming in a close third place was 7 East, who gained 46 votes for the very creative “Pipe it Up” theme, featuring everyone’s favorite, the Sesame Street Count!



1st Place Winner, 4th floor PACU



*2nd Place Winner
9th Floor O.R.*



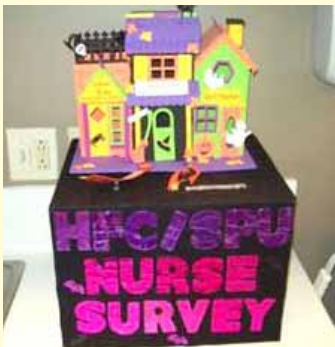
*3rd Place Winner
7 East*

One Final Note....

HSS achieved an overall response rate of 92% during the 3-week survey period. Congratulations to the following nursing units, which achieved 100% nurse participation in the survey: 6 East, 7 East, Hand & Foot Center, Pre-op Holding, Rheumatology & Infusion Therapy, 4th Floor PACU, and Special Procedures Unit/Pain Management.

A Word of Thanks...

A sincere thank-you is extended to everyone who participated in this event, from those who decorated the boxes, those who cast a vote for their favorite, Nurse Managers who kept their staff motivated and encouraged participation, to RNs who simply took the time to complete the survey. Your participation was very much appreciated.



Delivery of Care: Best Practices Falls Prevention 8East

Tina Bailey, our Process Improvement Specialist has spearheaded data collection and monitoring of patient falls across the institution. The Falls Prevention program is initiated prior to hospitalization and is reinforced throughout patient encounters on the inpatient units. The Falls Team meets routinely to discuss falls program effectiveness by examining fall trends and identify root causes.

The 8 East staff members were recognized for their improved outcomes as they had no (0) falls in five of the past 6 months (April through September). The 8 East RN staff was invited to the Falls Team Meeting to provide their strategies for best practices.

The Falls Team acknowledged that knee patients make up the highest percentage of falls at HSS. 8 East routinely has high percentage of knee surgery patients making these results even more impressive.

- The 8E unit is divided into patient districts
 - Each RN is accountable for their assigned district
- Assessment upon arrival to 8E
 - Patients cues: age, medication, prior history and mental status are assessed to determine falls risk potential
- Frequent rounding – hourly assessments
 - Confused patients are never left unsupervised
- Environment
 - Due to the horseshoe configuration of 8E, patients assessed at high risk for falls are placed closest to the nursing station
 - Patient rooms are reassigned if necessary when patients appear confused
- Heightened awareness
 - Falls are a standing item on the agenda for staff meetings.
- Shared Responsibility
 - Housekeeping staff and auxiliary assistants are provided with minutes of staff meetings to communicate unit activities regarding falls and fall rates

On-Site Orthopedic Nursing Certification Review Course Was a BIG HIT

A total of eighty nurses filled the HSS second floor Conference Center to take part in the Orthopedic Nursing Certification (ONC) review course taught by one of NAON's noted Nurse Leaders, Nancy Hiltz. Forty three were from HSS and nineteen participants were students from Adelphi University. A comprehensive review of orthopedic core curriculum topics was covered from 8:30AM to 4:30PM.

Good luck to all of the HSS nurses who took the exam this fall. Special thanks to Doreen Johnson and Georgia McIntosh who did a superb job at organization and facilitating the day's events. Look for a Spring 2010 offering of this "Must-Not-Miss" review course.

Evidenced Based Practice at HSS

The modifications to the career ladder associated with the Delivery of Care Model in 2008, have led to a renewed energy to demonstrate Evidence Based Practice (EBP). The clinical ladder program has transformed the work environment through explicit definition of roles and accountabilities of the CNII and CNIII. Accountabilities emphasized include participation in projects that evaluate and demonstrate the delivery of evidence-based nursing care.

The Nursing Research Council provides a self-governance structure that coordinates and guides teams of CNIIIs to design and develop evidence-based projects. Members of the Nursing Research Council serve as mentors to each of the assigned projects.

Jack Davis, MSN, RN and Hope McLeod, MSN, RN serving as mentors to the in-patient CNIII group. Their project is a review of best practices surrounding methods and devices to measure patient temperature in a surgical hospital. A summary of the team progress is as follows.

- Eight CNIIIs from 8E and 7E (Nicole Haynes, Kathleen Horan, Mikhail Kolomoytsev, Myungsook Kwon, Courtney Mahony, Carmen Remata, Sara Sklar and Jennifer Tam) met periodically to review literature and critically analyze multiple manuscripts.
- A summary of the findings were grouped based on study design, level of evidence, sample size, statistical analysis, research findings, strengths, limitations and implications.
- Preliminary assessment includes a review of oral, tympanic and temporal artery devices.
- This project is very timely as HSS is evaluating new thermometer technology to replace the existing tympanic device.
- Members of the in-patient EBP team will provide evidence to support and ultimately decide the new product purchase.

Carolyn Burgess, MSN, RN has been mentoring the perioperative CNIII group. The principal purpose of this project is to review and summarize best practice regarding the use and effectiveness of providone-iodine versus chlorhexidine in reducing the risk of surgical site infections.

- Tashma Watson, RN, MSNc and Jason Feldman, RN have been meeting every two weeks following a literature search to review and critique selected articles.
- Of the sixteen studies identified, six met criteria for review of which three of the studies examined pertained to the orthopedic surgical setting.
- After a review and summary of selected articles the EBP team will present result to the Perioperative Council and the Infection Control Committee.
- If recommended for practice a procedure and policy will be written by other CN IIIs in the group followed by education and quality monitoring of the practice by other CNIIIs.



Coming Soon: A Plan to Charter a New “NAON at HSS” Local Chapter

Purpose

To further the mission and vision of HSS Department of Nursing by building a stronger alliance with the National Association of Orthopaedic Nurses (NAON) and to create an environment that fosters increased professionalism. The new chapter could serve as the conduit to professional growth through specialty organizational membership, certification and provision of multiple CEU approved programs.

Goals/Objectives

1. Increase professional organizational membership
2. Provide a framework for leadership and mentoring
3. Increase percentage of certified nurses
4. Contribute positively to HSS recruitment & retention cause
5. Provide framework to provide more CEU offerings
6. Improve nursing morale and corporate spirit
7. Exceed Magnet goals for certified staff
8. Increase HSS Nursing visibility and participation at professional meetings

Projections

1. Largest NAON chapter membership if recruitment exceeds 130
2. Host of a semi-annual Orthopaedic Comprehensive review course
3. Host of monthly CEU offerings
4. Increased participation in NAON leadership

Next steps

1. Seek out interested nurses for Chapter leadership team
2. Complete NAON Chapter Charter Application
3. Integrate into the HSS Nursing governance structure

Interested nurses should contact Jack Davis at davisj@hss.edu

Congratulations!

for being awarded the Retention and Recruitment Council's Nursing Staff Appreciation award for their outstanding contributions to their respective nursing care teams.



Lidia Orbegoso, PCA on 6 East



Eler Villanueva, PCA on 5 East

The next patient care area to have a winner will be 7 East. Look out for the nomination forms!

Nursing Journal Club

The Nursing Journal Club has provided interesting reviews and topics in recent months:

Patricia Donohue, RN, ACNP-c (Orthopedic Trauma Nurse Practitioner) presented a review of the literature article evaluating “Acute Compartment Syndrome in Lower Extremity Musculoskeletal Trauma”. Olson, S. and Glasgow, R. (2005). Acute compartment syndrome in lower extremity musculoskeletal trauma. *Journal of American Academy of Orthopaedic Surgery*, 13(7), 436-44. *J Am Acad Orthop Surg*. 2005 Nov;13(7):436-44.

The review and discussion began with an overview of the etiology and pathophysiology of compartment syndrome. The discussion continued with the clinical presentation of compartment syndrome as noted through a comprehensive history, physical and diagnostic evaluation. Treatment and complications were also presented along with a review of the literature and studies conducted.

Jack Davis, RN, MSN, ONC (Manager, Patient Education Programs) presented an article comparing two mechanical compression devices to prevent venous thromboembolic events (VTE). Pagella, P., Cipolla, M., Sacco, E., Matula, P., Karoly, E., and Bokovoy, J. (2007). A randomized trial to evaluate compliance in terms of patient comfort and satisfaction of two pneumatic compression devices. *Orthopaedic Nursing*, 26(3), 169-174.

The research purpose focused on whether patient comfort and satisfaction influenced compliance. Additional discussion and emphasis was placed on the HSS multimodal approach to prevent VTE in a clinical environment that features epidural pain management, early ambulation and coumadin therapy.

Doreen Johnson, RN, MSN, ONC (Nurse Educator, Professional Development) presented an article on the SBAR Communication technique. Thomas, C., Bertram, E., & Johnson, D. (2009). The SBAR communication technique: teaching nursing students professional communication skills. *Nursing Education*, 34(4), 176-80. *Nurse Educ*. 2009 Jul-Aug; 34(4):176-80.

The article focused on the barriers to communication experienced by senior nursing students and graduate nurses. Handing off and delivering a patient status update is a skill set that needs to be structured and included in orientation and staff training. Following the presentation, a discussion on noise in the environment ensued. Noise is a barrier to communication and a deterrent to the patient healing process. Efforts to reduce noise levels are ongoing.

Information

The Journal Club is organized by members of the Nursing Research Council. A scheduling change has recently been announced. The Nursing Journal Club will meet the 3rd Monday of every month at 11AM in the 5E conference room. All nurses are encouraged to attend. An e-mail reminder with the chosen article and flyer will be generated 2 weeks in advance of each planned session.

For additional Nursing Journal Club information access the HSS intranet home page/[Kim Barrett library link/journal clubs/journal club reading lists/nursing journal club](#)

For suggestions and topics of interest, please contact Kwanza Price, MPH Nursing Research Assistant at pricek@hss.edu

From an In-Patient Resident's Point of View

The journey from days to nights was bitter sweet. From leaving friends and colleagues who I worked with on the day shift to entering a new world of night people who I had very little contact with before taking the plunge. I really did not know what was in store for me. I had to bite the bullet and work with all new people. It was a little intimidating at first but I quickly got the hang of and fit right in with the best of them.

It was a mental and physical adjustment and it did not come easy for me. There's really no way to describe to someone what it's like to have your whole comfy orientation world turn upside down and expect to function at a high level! I appreciated all of the support that I received from my colleagues. Working with the patients was a big comfort to me too when I was going through the transition.

The evening routines were different from the day shift. For example, who had to be contacted was completely different from what I was used to on days. The RNs, PCAs, Nurse Coordinators, and even Pharmacists—all of them, was a whole new group to get to know. It was daunting to get to know everyone and see how they functioned. Before I knew it, I felt like I was a part of an extended family once again. The night crew is not such a large bunch compared to days, and it quickly became more personal and familial.

I received a lot of support from my nurse colleagues during this trying transition. I had been oblivious to how it all worked on nights. I quickly

learned the rhythms and routines. During the day, patients are engaged in activities that are focused on physical progress and getting ready for discharge. On nights, besides spending time with my patients during their awake hours, we have to review charts, update care plans and complete forms that were not completed during the day. Hourly rounding helps us keep our patients safe, especially when the rooms are darkened and they are in unfamiliar surroundings.

It is a myth when you hear that the night shift is easier than days. This is absolutely NOT true—especially in an orthopedic hospital! While nights might seem to be easier because patients are supposedly sleeping, what you don't realize is that there is lots of work that has to get done in a relatively short time frame. During the day, nurses review discharge instructions with patients and receive admissions. On nights, I was surprised to find out that nurses can receive up to twice as many admissions!

I enjoy working nights now for selfish reasons. I get to have my patient's undivided attention (unless *Dancing with the Stars* is on). I get to have hearty conversations with them. I love to hear about their families and their progress after surgery. Being an attentive listener and showing that I am truly interested in their care and well being helps them feel comforted and puts a smile on my face.

Re-Design of Care Model Patient Education

The Patient Education staff have been involved in many exciting changes in recent months. The changes targeted multiple services and addressed the delivery of:

- New interactive classroom instruction
- Revised written education materials
- Improved utilization and access to information on the HSS website

The Hip, Knee and Spine preoperative class instructions and lectures are now supplemented via a computer aided multimedia presentation on the newly outfitted classroom. The state of the art audio-video equipment and projection screen should enhance the teaching and learning environment.

The staff collaborated with members of the Foot and Ankle Service to unveil the brochure entitled, *Your Pathway to Recovery: A Patient's Guide to Foot and Ankle Surgery*. The brochure is available in print and online through the following link. <http://www.hss.edu/orthopedic-foot-ankle-service.asp>

An overview of hip and knee arthritis facts was developed as an educational tool for patients who seek basic information before they consult one of the Adult Reconstruction Joint Replacement surgeons.

The hip pre-visit info is available through [hss.edu](http://www.hss.edu) or the following link. http://www.hss.edu/conditions_hip-arthritis-overview.asp

A smaller spiraled booklet is scheduled to replace *Your Pathway to Recovery: A Patient's Guide to Total Knee Replacement Surgery* and *Your Pathway to Recovery: A Patient's Guide to Total Hip Replacement Surgery* binders traditionally provided in the classroom. The new versions are planned to be distributed through the office practices to afford patients earlier access to information about preparing for elective surgery. In addition, patient educators are providing pre and post-operative support through telephone consultations and more routine in-patient visits.

Future projects currently in development are focusing on patient education video segments, Microsoft PowerPoint presentations and animation technology to support the ambulatory care and the ambulatory surgery population. Follow the link below to review a sample of animation technology already available online. http://www.hss.edu/condition-list_hip-replacement.asp



HOSPITAL
FOR
**SPECIAL
SURGERY**



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