VASLCHCS

NIGHTINGALE NEWS

Summer 2013

Message from Shella

Associate Director for Patient Care Services

We recently celebrated National Nurses Week May 6-12, 2013 and I am still reeling from hearing about all of the amazing accomplishments of our VASLCHCS and CBOC nursing staff. Nursing requires expertise, ingenuity, and a deep sense of compassion that is demonstrated by innovative programs, many that are created by our own VA nursing staff. Only by recognizing and supporting your work can we hope to continue to provide excellent care to our Veterans. I want to thank you for your dedication and commitment to serving the brave men and women who have given so much for our country. I feel privileged to work with so many dynamic nurses who demonstrate passion in serving our Veterans each and every day!

-Shella Stovall

We Want to Hear From You!

We encourage you to contribute to the Nightingale Newsletter. We want to hear about you, your co-workers, or your department. Tell us about an outstanding staff member, a unique experience, or whatever you want to share with your fellow nursing staff.

E-mail Ismael.Quiroz@va.gov or call ext.

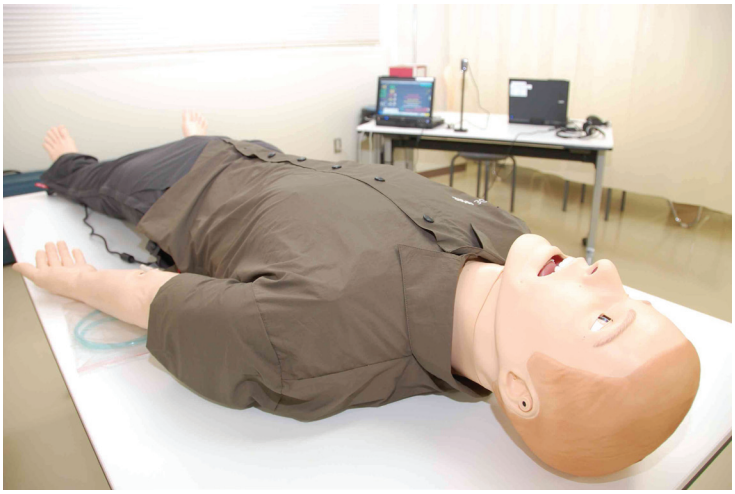
Congratulations to our Secretary's Award for Nursing Excellence Recipients

Allen Anderson, LPN
Shelly Granger, RN
Donelle Bowser, HT
Janine Feil, RN

EXCELLENCE IN NURSING

Name Our Sim Man!

Our VA Nursing Academy has new Sim Man and we want you to name him! Please submit your suggestions to Ismael.Quiroz@va.gov by June 7, 2013. If your suggested name is chosen, you will receive a gift card to the Corner Bakery from your friends at VANA.



VASLCHCS's 2nd Annual Nurses Week Quilt

Laura Swain, MSN, RN

The Nurses Week Quilt is the brain child of Nina Morris MSN, RN. She thought it would be nice to have VASLCHCS nursing staff write a message on fabric squares to be sewn into a quilt for Nurses Week 2012. The nurses were encouraged to write what they love about being a nurse or why they love working at our VA. The quilt squares were available at January and April skills fair. She collected the fabric and made the first Nurses Week quilt. It was given out as a present during our Nurses Week celebration, and was sponsored by the Center for Learning

Many individuals were involved in making the quilt project a success. Nurses Week 2013 quilt project was sponsored by the Nursing Education Council to be used as one of this year's Nurses Week gifts. From January to March, project manager Laura Swain MSN, RN Chair of the Nursing Education Council handed out fabric squares everywhere she went. Participation was great among the staff nurses. Laura's mom Wilna Swain donated the colored fabric and sewed the fabric pieces together. Sean McChesney, RN Chair of the Professional Clinical Practice Council arranged for LeAnn Haws to do the professional quilting. The Nursing Education Council is currently sponsoring the 2014 Nurses Week Quilt project and is looking for volunteers for next year's quilt. Quilt squares will be available in the MPC during September 2013 and January 2014 Skills Fair and available at the CBOC's during their Skills Fair. If you are unable to design a quilt square during Skills Fair and are interested in participating please contact Laura Swain Monday – Thursday at Ext: 6718.

2013 Nurses Week Quilt

She will be able to provide fabric pens and quilt squares for to you.

A great big shout out of thanks to all of the nurses that participated in this year's Nurses Week Quilt project. Without your participation the completion of the quilt would have been difficult.

Nurses Week Highlights!

Updates from the NPSB

by Cindy Sutter, APRN

The Nurse Professional Standards Board is going to be providing a series of information pieces to help you better understand the Board process. One of the hallmarks of Title 38 is the "Rank in Person" concept. That means you can be promoted to a higher grade in the same job if you are doing, and are expected to continue doing at a higher level. Here is a simple outline of what is expected at the Nurse I, II and III grade levels.

Nurse I is all about mastery of personal practice. This includes self-directed activities to improve knowledge, contribute to unit activities, develop working relationships with others, and seek feedback to evaluate performance against established standards.

Nurse II is all about leadership at the unit or work group level. This includes mastery of more complex patient management skills, being able to mentor and direct others in their professional development, taking responsibility for management of unit level activities such as quality assurance activities or education related to specific unit needs. It also includes role modeling professional relationships and providing input for evaluation of the performance of others in your work group.

Nurse III is all about leadership at the system wide or facility level. This includes management of a program or programs that have broad impact in multiple areas of the hospital or throughout the facility. It includes establishing practices to accomplish goals, systematically evaluating the impact of the activities and providing ongoing feedback and education as needed. At this level the nurse is seen as a leader and resource by staff form multiple areas and frequently by individuals in the larger health care community.

In order to be promoted, a nurse must meet all of the Qualification Standards for the next grade. The Standards are the same for all grades and all positions, but the performance expectations increase for each grade level. The NPSB will be providing additional updates about specific Standards in the future so you can better understand your role in the promotion process. NPSB members are also available for Unit/Work Group In-services as well as individual consultations.

Identifying the Decision Maker When the Patient Can't Participate

by Cindy Sutter, APRN, Health Care Ethicist

A basic premise for patient centered care in the VA is that providers and patients act as partners in making health care decisions. The patient is expected to bring their values and beliefs while the provider brings medical expertise for diagnosis and treatment options. With the combined expertise for the patient and provider, a plan of treatment is developed. If a patient is unable to participate in making health care decisions, do you know how to identify the proper person to represent the patient's interests?

The priority for surrogates (alternate decision makers) is defined in Medical Center Memorandum 11.24-Patient Consent for Clinical Treatments and Procedures. If a guardian or Power of Attorney for Health Care has been designated, the note detailing the information links to the postings section of the CPRS face sheet. In some cases, the link will identify a scanned document so Vista Imaging Display will have to be used to read the specific documents. The demographic sheet which designates next of kin is NOT the authoritative document.

The role of the surrogate is to represent the patient's values when known (substituted judgment) or to make decisions on what would best for the patient (best interest judgment). The surrogate may also be asked to interpret what the patient may have intended by statements made in any Advance Directive documents.

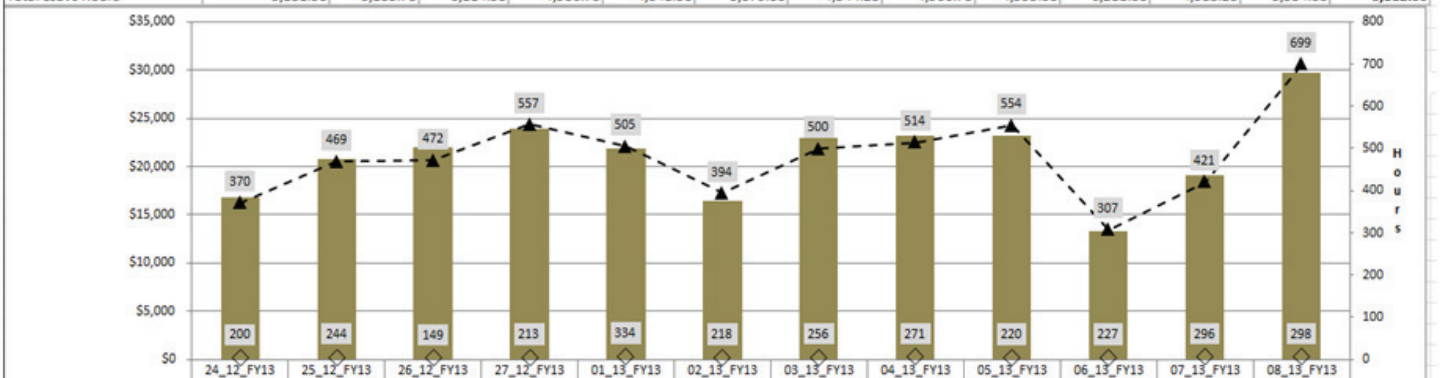
A surrogate may decline to participate in decision making for a patient for any reason. If the surrogate in the first position declines, then the priority list is used to identify an alternate. Remember, Federal Law, not State Law governs the priority of surrogates within the VA. The Ethics Consultation Service is available for additional support when requested.

How Are We Doing?

(660) HCS SALT LAKE CITYUT BI-Weekly PAID & VANOD Data T and L All T and L Unit, Cost Center (Multiple Items)

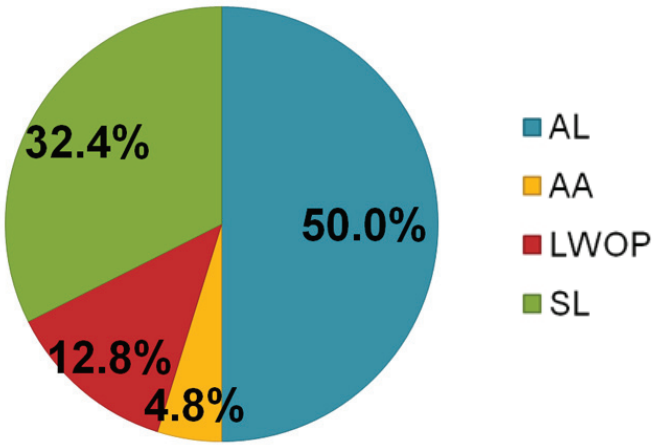
BOC (Multiple Items) The default Budget Object Codes: 1001, 1002, 1031, 1037, 1061, 1064, 1065, 1066, 1067

	Pay_Period 24_12_FY13	Pay_Period 25_12_FY13	Pay_Period 26_12_FY13	Pay_Period 27_12_FY13	Pay_Period 01_13_FY13	Pay_Period 02_13_FY13	Pay_Period 03_13_FY13	Pay_Period 04_13_FY13	Pay_Period 05_13_FY13	Pay_Period 06_13_FY13	Pay_Period 07_13_FY13	Pay_Period- 08_13_FY13	**Average of Pay Periods**
FTE	471.81	469.28	471.17	470.18	472.01	472.14	476.35	473.33	469.80	471.78	469.40	469.53	**471.40**
Admin Leave Hours Used	247.00	279.25	177.50	282.00	214.75	345.50	383.75	189.75	150.50	225.50	130.50	362.75	**249.06**
Annual Leave Hours	3,014.25	2,225.75	3,841.75	2,460.25	1,787.00	2,161.50	2,015.25	2,523.50	2,234.25	3,419.75	2,318.50	2,727.50	**2,560.77**
Comp Time Hours Used	268.75	331.00	246.00	186.00	199.50	263.25	227.75	192.25	285.00	433.50	250.75	350.50	**269.52**
LWOP Hours Used	519.75	654.50	520.00	582.50	543.75	688.25	771.25	651.75	695.00	775.75	710.25	711.50	**652.02**
Military Leave Used	116.00	156.00	64.00	78.00	88.00	184.00	166.00	102.00	24.00	.00	.00	96.00	**89.50**
Normal Hours	37,748	37,514	37,714	37,594	37,738	37,802	38,242	37,910	37,602	37,878	37,780	37,612	**37,761.17**
Sick Leave Care	182.25	221.75	333.50	182.00	173.75	572.00	237.50	386.25	301.50	267.00	286.50	387.75	**294.31**
Sick Leave Hours	1,329.00	1,835.50	1,410.25	1,557.50	1,434.25	1,913.50	1,394.50	1,518.25	1,724.75	1,616.25	1,257.75	1,700.25	**1,557.65**
Total Leave Hours	5,181.50	5,103.75	6,114.50	4,906.75	4,048.50	5,079.00	4,544.25	4,966.75	4,999.00	6,288.00	4,585.25	5,534.00	**5,112.60**

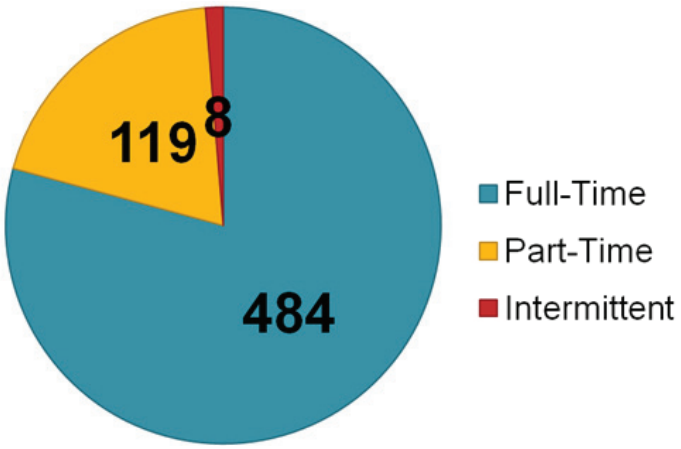


	24_12_FY13 Pay_Period	25_12_FY13 Pay_Period	26_12_FY13 Pay_Period	27_12_FY13 Pay_Period	01_13_FY13 Pay_Period	02_13_FY13 Pay_Period	03_13_FY13 Pay_Period	04_13_FY13 Pay_Period	05_13_FY13 Pay_Period	06_13_FY13 Pay_Period	07_13_FY13 Pay_Period	08_13_FY13 Pay_Period-
Over Time Cst	$16,750	$20,756	$22,040	$23,913	$21,820	$16,431	$22,903	$23,213	$23,156	$13,276	$19,071	$29,717
Comp Time Hrs Ernd	200	244	149	213	334	218	256	271	220	227	296	298
Over Time Hrs	370	469	472	557	505	394	500	514	554	307	421	699

Nursing Staff Time Off Break Down



Nursing Resources



The Importance of Nursing Speciality Certification

Certification is a popular topic in the nursing world. You have no doubt noticed the professional credentials adorning the name tags and resumes of your colleagues. As prevalent as specialty certification is, it surprises me when a nurse asks me, "Why should I get certified?"

The American Board of Nursing Specialties (ABNS), an association of organizations that certify nurses in a specialty, has a membership that represents nearly 500,000 certified nurses. The message we hear is clear—nurses value certification.

How do we know this? ABNS, and other certifying agencies, have examined the value of certification through research and we continue to see the same results. Nurses feel that earning a certification fulfills both their professional and personal goals. Earning a credential in a specialty offers a nurse a professional challenge. It enhances their credibility among colleagues, patients and other members of the health care team and provides an avenue to validate their specialized knowledge.

We have also noticed employers encouraging their nursing staff to earn and maintain professional credentials now more than ever before. One reason might be that certification is one of several factors the American Nurses Credentialing Center (ANCC) considers when awarding Magnet®, a highly sought after honor among health care institutions.

On a personal level, certification has played an important role in the care I provide my patients and has opened up new career opportunities for me. I think a better question to ask is, "why wouldn't a nurse get certified?"

The ABNS Web site includes information that can help you learn more about certification and link you to the organization that provides a credential in the specialty area you suits your interest. Visit ABNS online.

Jacqueline Stewart
RN,MSN, CEN, CCRN, FAEN
President, ABNS
Assistant Professor of Nursing
Wilkes University
Wilkes Barre, PA

We congratulate and commend the nurses who have obtained a speciality certification

Gerry Bennett, RN, CACP
Mary Youtsey, RN,CDE
Penny Nichols, RN, CRRN
Faye Anderson, RN, CACP
Jan Marie Peterson, RN, CDE CPT
Linda Reinkoester, RN, CDE
Kathy Moore, RN, CDE
Chris Hammond, RN, RCIS
Cristine Tuttle, NP, CVNC
Paul Kingston, LPN- Geriatrics
Kiko Vielstich, RN- Psychiatric
Tom Raymond, RN- Psychiatric
Rui Andrade, RN- Psychiatric
Michelle Bird, RN, NE-BC
Ewa Izydorczyk, LPN, CHPN
Alan Durtschi, RN, OCN
Janice Morgan, RN, CMSRN
Lydia Rosenthal, RN, CGRN
Amy Nicole Bishop, RN, AMSN
Jana Pace, RN, CEN
Carolyn Yela, RN, ANCC
Laurie Stoneburner, RN, NCC, CRNI
Eileen Foti – RN, NOCN

"As a nurse, we have the opportunity to heal the heart, mind ,soul and body of our patients, their families and ourselves. They may forget your name, but they will never forget how you made them feel."

- Maya Angelou