



# Message from Shella

## Associate Director for Patient Care Services

Here we are nearing the end of FY12. We have much to celebrate in nursing at VA Salt Lake City Health Care System – our commitment to excellence in Veteran centered care; our enhancement of nursing knowledge through evidence-based practice; education of students, new staff and our peers; and the leadership we are providing locally and nationally through our nursing initiatives, innovations and the contributions we are making to nursing organizations and our community affiliations.

I want to offer a special thank you to the Charge Nurses, Nurse Managers

and Clinical Nurse Officers who must make resource decisions that ensure safe and quality patient care while being fiscally responsible. Making decisions in situations where scarce resources must be allocated is inherently difficult, and may challenge us to do what is right. I appreciate the conscious efforts to make fundamentally sound decisions every day. I have heard increased stories about nurses floating to other areas to help out. I want you to know that these actions are greatly appreciated.

Thank you for providing exceptional customer service to our Veterans. These Veterans are so deserving of



Nikkie Chambers and Shella Stovall | photo by Mico Quince

of the kind and nurturing manner in which you serve them each day. When I hear the many stories about our nurses who go above and beyond, I feel proud to be part of this amazing team of nurses.

-Shella Stovall

### Upcoming Events

- September 6-16**  
-Utah State Fair VA Outreach
- September 11**  
-Patriots Day Celebration at the Gem Court Garden
- November 2**  
-Homeless Vets Stand Down
- November 11 - Veterans Day**  
-VA Info-thon on Channel 2  
-Veterans Day Parade

### Numbers You Need To Know

- Cardiac Arrest Building 1 & 14 .....#6666**  
(Press #6 key then 666)
- Police Emergency .....4444**
- Poison Control Center.....1-800-222-2122**
- Utility and Equipment Failure .....1005 or 1043**
- Hazardous Material Incident 1043 and cell 801-330-1390**
- Safety/IH Concern .....1226/4533**
- Disruptive Behavior .....2265 or 4444**

# RN Spotlight

**VA Nurses are top-notch health care providers, many of whom have an interesting backstory story that lead them to their career at VA.**

VA Nurses are a unique breed of healthcare providers. It takes a special kind of dedication to care for those who have borne the battle. Those who take on the challenge find the job remarkably rewarding, and the Veterans who receive the care are grateful for their commitment.

When walking through the halls of the George E. Wahlen VA Medical Center, it's great to meet so many individuals with fascinating stories; some dating back to WWII and others as recent as the conflict in Afghanistan. It's incredible to think that you could be standing next to someone who has an amazing story to tell, yet they are very humble and refrain from boasting about their accomplishments. Many staff members also have amazing stories to tell.

After asking several nurses and many nurse managers to help me find a nurse with an interesting story, all signs pointed to "P.J." (Pamela Jennings).

Though originally from Annapolis, Maryland, PJ grew up in a military family, which meant home was everywhere, but she spent most of her adolescent years in Columbus, Ohio. She continued the family tradition of military service and joined the U.S. Army, where she served in various



P.J. Jennings photo by Milo Quiroz

capacities including being cook, communications specialist, supply clerk, paratrooper, and Army nurse.

After her first child was born, PJ worked in a pediatric unit and became increasingly interested in nursing in a hospital environment. She used her G.I. Bill benefits to complete her education at Weber State and the University of Phoenix where she earned an a BSN and CHPN (Certified Hospice and Palliative Care)

Military service has helped PJ work with Veterans in a healthcare environment. Because of her experience, she has a sense of what patients are going through. "Taking care of each other, soldiers taking care of other soldiers" is PJ's motto. Her dedication to providing exceptional care to Veterans was recognized by her peers and she was recently awarded the "Secretary Award for Excellence in Nursing".

**"Go with your gut. Have a passion for what you do" – P.J.**

# Unit Happenings

With over 500 clinical and administrative nursing staff, it's difficult to keep up with the latest and greatest in every unit. Here is the inside scoop.

## 2 East

Acute Medicine nurses continue to develop processes to improve patient care. Though there are quite a few ongoing QA projects, there is a new project that has proven to be extremely beneficial. Jen Ringel and Nicole Bishop are pushing to have each room stocked with a suction canister and all necessary suction equipment (including an Ambu Bag) ready for use with each patient. This process proven to be very effective as the equipment was ready for use during recent critical and emergent situations.

This equipment hasn't always been stocked and these two nurses are improving care greatly. It is exciting to see their efforts as well as the excitement when these changes make a difference.

## Primary Care

Primary Care RN Care Managers throughout the area, SLC, WV, Southern and Northern CBOC's are working diligently to contact each patient assigned to a PACT team discharging from an inpatient stay within two business days. Ensuring that visits are captured and recorded has been a significant undertaking. We have worked in close collaboration with Patient Services and the coders, Kathy Meeks and Lynn Norton. This is a significant customer service effort that our Veterans are responding to with positive feedback; a "wow, you really care" moment.

This effort is a work in progress

with more good things to come as we work to reach our goal of contacting over 50% of the patients discharging (it is a lot harder than it sounds).

Anticoagulation is in the process of mailing the attached summer newsletter out to the 1,350 enrolled ACC patients.

## Specialty Clinics

There are several great happenings in our Specialty Clinics. Laurie Stoneburner received her national certification in April 2012 (Certified Registered Nurse Infusion). We now have a fully integrated full time RN Care Coordinator position in the Women's Clinic to focus on OB/Gyn patients. Recently, we had the opportunity to highlight different Specialty Clinics in the Wahlen Weekly (Dermatology, Surgical Clinics, Medicine Clinics, AMU, Women's Clinic and Podiatry). Lastly, we want to spotlight our Nurse "Stars"- Brenda Nelson (AMU/Medicine Clinics), Michelle Richens (Women's Clinic) and Laura Swain (Surgical Clinics).

## MICU

MICU is bursting with accomplishments. We recently welcomed the return of Sarah Iribarren RN after a sabbatical in Argentina for her doctoral thesis. Shane Cater RN & Karen Risch RN both recently graduated with Masters of Nursing Education from Westminster. We are fortunate to have a unit packed with an all-star staff.

## Who Are You and What Do You Do?

Becky Kemp is a Jane of all trades. She is the administrative know-all and powerhouse in Patient Care Services and the Nursing Professional Office. Here is a Q&A that will explain who she is and what she can do for you.



### What is your job title and what do you do in the NPO?

Administrative Officer, Patient Care Services – Provide administrative support to Nursing Leadership, and Nursing Staff.

### What kind of interaction do you have with nurses and what services do you provide for them?

I Order and Inventory Nursing Equipment, and manage Patient Care Services contracts, Maintain Nursing SharePoint's, monitor licensure and certification requirements for Nurses timekeeping, work closely with Human Resources, Nurse Recruiter, and NPSB. Track Title 5 evaluations, monitor performance standards, and Functional Statements.

I also Supervise the NPO clerical staff who; track proficiencies, order supplies, deliver mail, process personnel actions, timekeeping, and new employee orientation. But most importantly provide help and quality customer service so that Nurses can focus on our mission, patient care

### How long have you worked at VA and what is the most rewarding part of your job is?

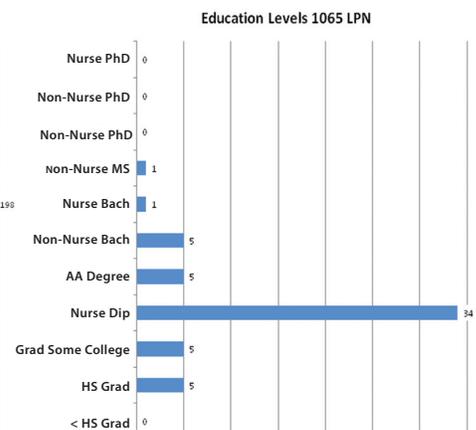
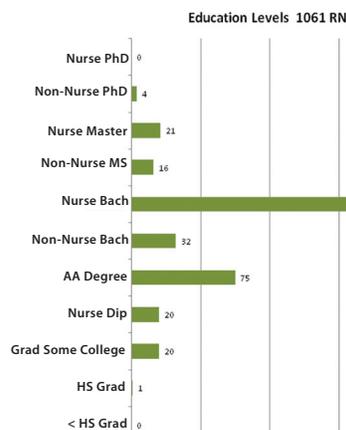
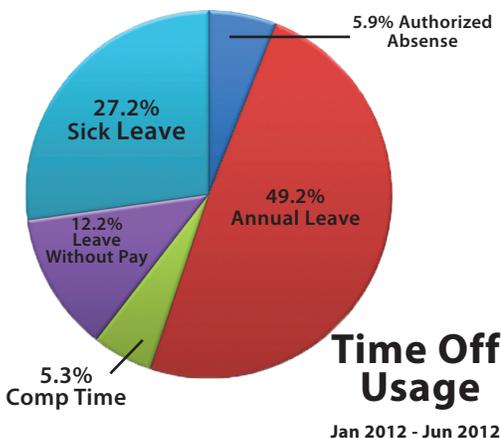
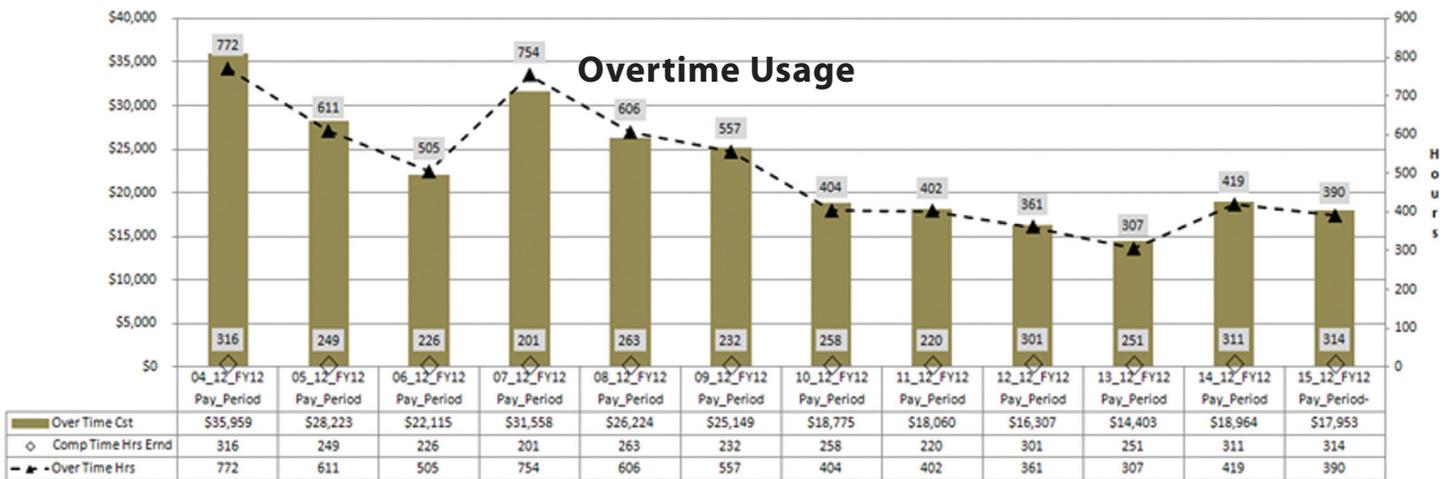
I have been with the VA for 12 years, 9 years in the Clinical Laboratory, and the last 3 have been in my current role.

The most rewarding part of my job is being part of something big. As a veteran, it's knowing that I don't have to be on the battle field, or overseas to continue to serve my country. I can make a HUGE impact caring for my military family. I am proud to be part of the Nursing Service, I feel that it is the heart of our organization, and it's why our patients (me included) love to call this place home.

# How Are We Doing?

## Know About Your Nursing Department

Age of Work Force								
Force	<24	25~29	30~34	35~44	45~54	55~64	65+	Total
1001 Admin Pers		3	5	3	6	1	2	20
1002 Clerk Pers						1		1
1031 Health Techs	2	6	7	9	6	8	2	40
1037 Med Techs					1			1
1061 RN	3	18	41	82	129	100	15	388
1064 NP				4	4	1		9
1065 LPN		2	1	12	18	21	2	56
1066 NA	1	3	2	1				7
1067 CNS								0



# Ten Ways to Reduce Incivility in your Work Environment

By Rose O. Sherman

“An eye for an eye makes the whole world blind”. Mahatma Gandhi

If you watch the nightly news or observe what goes on in our political environments today, you may sometimes wonder if we live in a civilized society. There is a rash of discourteous, disrespectful and rude behavior that is strangely tolerated, and even accepted as a new norm. With increasing pressure to get their work done, some staff may feel that there is no time to be polite, to say please or thank you or to think about how their behavior is affecting others on the team. The issue of incivility has become an important topic of concern in all workplaces, but especially healthcare where it has the potential to impact patient safety. The interesting problem with incivility is that if it is not dealt with, it can exponentially increase over time and become an accepted part of a work culture.

## What is Civility?

Civility in the workplace can be defined as behaviors that show respect toward another person, makes them feel valued, and contributes to mutual respect, effective communication and team collaboration. Conversely, workplace incivility can be defined as “low-intensity deviant behavior with ambiguous intent to harm the target, in violation of workplace norms for mutual respect; uncivil behaviors are characteristically rude and discourteous, displaying a lack of regard for others. In a Civility in America 2011 poll of 1,000 adults, 43% of Americans say they’ve experienced incivility at work, and 38% believe the workplace is increasingly disrespectful. It does not have to be this way. We know from research that if a staff member develops an awareness of respectful behaviors and necessary skills and is held accountable, these behaviors will spread in the workplace and beyond.

## The Costs of Incivility

Disrespectful and uncivil behaviors drain productivity and negatively influence staff satisfaction and patient outcomes. Incivility has been found to contribute to the following:

- Staff Sick Leave Use
- Loss of Productivity
- Staff Turnover
- Staff Disengagement
- Medical Errors

With our changing US healthcare reimbursement structures that will soon be tied to patient satisfaction with care, incivility in clinical environments may also have a significant negative impact on the economic bottom line of organizations.

## Reducing Incivility in the Work Environment

One interesting find in the Civility in America poll described above is that 65% of US Workers surveyed felt that the leadership in their organizations were accountable for the growth in workplace incivility. Many leaders might disagree with this finding, but it is true that leaders are highly influential in establishing work cultures that either tolerate or don’t tolerate incivility. Ski Lower in a recent article in the American Nurse Today provides some good strategies that leaders can use to promote civility in their environments.



1. Examine your own behavior and how you contribute to civility or incivility.
2. Take a temperature check in your unit to see how staff treat one another.
3. Don’t listen to or tolerate rumors and gossip.
4. Encourage staff not to jump to conclusions about the intent or motives of other staff, patients or families.
5. Stop the blame game and encourage a solutions orientation to problems.
6. Encourage acts of kindness among staff.
7. Go out of your way to say thank you and promote this behavior in staff.
8. Look for common ground in dealing with conflict.
9. Encourage the practice of forgiveness.
10. Make it safe for staff to ask questions and discuss problems.

Anne Frank once wisely observed that, “How wonderful it is that nobody need wait a single moment before starting to improve the world.” This is good advice for nurse leaders to consider. Small changes in behavior to promote civility can produce powerful results.

Lower, J. (2012). Civility starts with you. *American Nurse Today*. 7(5). 21-22.

Sutton, R.I. (2007). *The No-Asshole Rule: Building a Civilized Workplace and Surviving One that Isn't*. New York: Business Plus

# Working On Teams

By Rose O. Sherman.

Casey Stengel, the beloved manager of many major league baseball teams, once noted that "Finding good players is easy. Getting them to play as a team is another story". The same could be said of teams in health care settings. Guiding team members to get past their day to day problems, conflicts and communication issues toward a goal of working as a high performance work team is a significant leadership challenge. Nowhere are the stakes higher than in the health care, where team synergy and interdependence are required for high quality patient outcomes.

## Key Ingredients for Effective Teamwork

If you have worked on a highly effective and smooth running team, it is an experience you are not likely to forget. Effective teams have the following 10 key characteristics:

1. Clear Goals that everyone on the team works towards
2. Clarity about the role and contributions of each team member
3. Open and clear communication
4. Effective decision making
5. Engaged team members in the work of the team
6. Appreciation of diversity – generational, cultural and diversity in thinking
7. Effective management of conflicts
8. Trust among team members
9. Cooperative relationships
10. Participative leadership

## Why Things Go Wrong On Teams

Communication breakdowns and conflict are inevitable on teams. If managed effectively, they can be viewed as an opportunity for team growth but often, this does not occur. The most common behaviors that create obstacles to effective team work include blaming others, turf protection, mistrust and an inability to directly confront issues. In the absence of complete trust, people are more likely to withhold their ideas, observations and questions. Professionals are also more likely to leave teams with trust issues. It is not surprising that in our health care system, ineffective teamwork is now recognized as a

potential patient safety issue. Trust begins with communication. Teams must be taught that relationships live within the context of conversations that teams have, or don't have with one another. When open and frank communication is not present, things can and do go wrong on teams.

## Team Building

High performance work teams in any setting rarely occur naturally. They must be created and managed. Leaders play a key role in helping a team to develop the ability to collaborate effectively, build relationships and trust, innovate and achieve results at a consistently high level. It all begins with setting the stage for quality communication among team members.

Attention must be paid to establishing venues in which these conversations can take place whether they occur in team briefings, meetings or at social events. There needs to be a zone of safety created at meetings where team members can constructively challenge current processes, procedures or how the team is functioning. Team ground rules are critical to developing strong relationships and trust. Understanding that team members are expected to respect one another, listen to each other, care for each other, accept responsibility for their behavior and learn from each other helps to foster a sense of commitment. A good exercise for leaders to use with teams is to ask team members to assess how well the team is doing. Members can be asked to rate how true statements such as the following are for



their team:

- The goals of our team are clearly stated and known by members.
- The members of our team are committed to accomplishing our shared team goals.
- Our team accomplishes its goals.
- The talents of each of our team members are fully utilized.
- Each member of the team fulfills the role he or she is expected to play.
- Our team deals with conflict in an effective manner.

The collective answers to a team assessment can be a powerful way to introduce team building initiatives that build on a team's strengths and addresses weaknesses. Team building is journey that never ends. As new members join the team, they need to be encouraged to participate in building the team culture. Current team members may need to be encouraged to be nurturing of novices and see their development as part of a professional legacy. To instill effective teamwork into health care, there needs to be more recognition of its importance. To create high performance work teams, reward and recognition programs need to include awards for team achievement. Team recognition programs help to build team esteem and send a strong message that effective teamwork matters.

Sherman, R.O. & McClean, G. (2009). Developing a high-performance OR team. *OR Nurse* 2009, 3(1), 10-12.