



November 2008

HORIZONS

Congratulations to the 2008 Nurse Leader of the Year *Lynn Frank, BSN, MEd, NEA-BC*



Lynn Frank and Peggy Ose

Congratulations to Lynn Frank, Vice President and Chief Nursing Officer at Luther Midelfort Mayo Health System in Eau Claire on being selected as W-ONE's 2008 Nurse Leader of the Year.

Lynn has been a member of W-ONE for more than 25 years, participating as a member of the Finance Committee, the Marketing

Committee, and a member of the W-ONE Board of Directors. She is also a member of the American Organization of Nurse Executives.

Lynn provides leadership to improve the quality of nursing services while integrating nursing across her health system and across the continuum of care. She values continued education and has weaved it into the culture at Luther Midelfort. She has fostered an environment where time and money are available for nurses to take advantage of staff development opportunities through the Luther Midelfort Leadership Academy and partnerships with area educational facilities.

She serves as mentor and peer to other vice presidents, graduate students and facility advisory committees with local schools of nursing. She has acted as a preceptor for the University of Wisconsin-Eau Claire School of Nursing since 1990, has taught a variety of customer service and leadership classes within her health system, and has participated on a variety of advisory councils for the Chippewa Valley Technical College.

Lynn received many wonderful letters of support for her nomination. One specific letter described her well: "As CNO, Lynn inspires creativity and motivation among department directors and nursing staff. She accomplishes this by being supportive of ideas and suggestions, by functioning as a 'guide' rather than an 'answer provider.' Ms. Frank is one of the most dedicated nursing professionals found within health care. She works tirelessly toward promoting high-quality care for patients, families and our community."

Our most sincere congratulations go out to Lynn on the attainment of this most significant honor and achievement.



President's Message

My first year as the W-ONE President is already drawing to a close. It is both an honor and a pleasure to serve in this capacity. Our next Board meeting is on Friday, November 21 at WHA Headquarters in Madison. Please know that all members are welcome to attend.

Peg Haggerty and I will attend the Chapter Leaders Meeting in Boston on December 4-5, 2008. The Board is also preparing for our Strategic Planning which occurs each January. After our meetings in November and January, I will be able to provide a comprehensive update about progress in accomplishing our Strategic goals for 2008. In the meantime, I am including the WONE Annual Report to AONE. This covers some of the highlights from this year.



Annual Chapter Leaders Meeting
Information Sharing Report 2008
Chapter Name: Wisconsin Organization of Nurse Executives Region
Number of Members - 257
State RN Vacancy and Turnover Rate – unavailable

Hospital RN vacancy rate is 8.9% (Source: WHA Vacancy Survey from October, 2007 with 100% participation of WI Hospitals)

Hospital RN Voluntary Turnover rate is 11.4% (Source: WSHHRA Survey from calendar year 2007 with 50% participation rate)

Major Chapter Initiatives

**W-ONE continues to work towards “evidence based practice” principles for structuring hours of work in the practice environment. A white paper on “Nurse Scheduling and Fatigue in The Acute Care Setting” was developed in 2007 which has been disseminated to our members for use in their practice environments.

**There was an attempt within the state to introduce legislation to ban mandatory overtime; however, the legislative session closed before it was able to be introduced. W-ONE submitted a position paper in opposition.

**A major initiative is work being done in collaboration with the Wisconsin Center for Nursing to develop a Leadership Academy. A curriculum proposal has been developed and involves commitment by an organization’s aspiring nurse leader with support of the nurse executive for pre-work, a two day workshop and two follow-up application clinics.

**A dialogue has begun with Academia in the State to develop and address a list of priority issues of joint concern (enrollment in schools of nursing, curriculum content, etc.). The intent is to meet on an ongoing basis, up to four times each year.

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Horizons is published quarterly as the newsletter of the Wisconsin Organization of Nurse Executives. Articles on nursing, management and health care issues, and letters to the editor are welcome. Display and classified advertising are accepted. For information, contact the editor.

2008 W-ONE Board of Directors: President, Peggy Ose; Past President: Carol Winegarden; Treasurer, Betsy Benz; Secretary, Peg Haggerty
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Editor: Paula Hafeman

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**The BLOG we noted last year as on the horizon is nearing completion and will serve to enhance networking and information sharing among our members.

**We held our annual Board/Officer/Nominations Committee elections this year using an on-line process which went very well. It was efficient and saved postage costs.

Practice Trends

There continues to be a large emphasis on productivity and lean six sigma initiatives. All hospitals are working diligently on improving performance in the quality indicators related to SCIP, Pneumonia, CHF and MI. A number of hospitals have building projects in progress or recently completed. Many are implementing a decentralized approach to nursing with an eye towards efficiency and placing as much patient care equipment and supplies at the point of care as possible.

Respectfully,
Peg Ose
W-ONE President

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EOE

AONE's Guiding Principles and Future Care Delivery

Peggy Haggerty, EdD, RN

Health care has become very complex. Increased technology, regulations, reimbursement, and a health care shortage continue to challenge us in how care is delivered today and into the future. The American Association for Nurse Executives (AONE) has identified the need for defining and developing care delivery models for the future. Our involvement in this process is imperative.

To stimulate discussion and planning for our future work, AONE has developed guiding principles. These principles were grounded in various assumptions that are driving forces for new and creative models of care in the future. Following is a brief discussion of the assumptions.

The health care shortage is a major factor that will require us to rethink what models of care will work in the future. What roles and educational preparation will be required to care for patients and patient populations in the future? Collaboration and multidisciplinary teams will be essential to carry out the work in the future.

Technology has become a major part of our world and plays an important role in health care. How will technology be used in the future? Patients have become more adept at using computers for communication. Technology also has been instrumental in patient safety and in measuring quality.

Linear thinking will no longer be effective due to the complexity of health care. Complex adaptive and systems thinking will be required in planning new care delivery models. These models must be based on evidence-based practice and research. According to AONE, it is imperative we act now and not wait until we have all the answers. It will require experimentation and revolutionary change.

These assumptions have led to AONE's guiding principles. According to AONE, our core values of knowledge and caring will not change, however, the work nurses do in the future will change. Care and care decisions will be based on relationships and partnerships with the patient and various disciplines. Technology will alter relationships with patients. It will be necessary to determine when the relationship may be virtual, physical or both.

Nurses will use "critical synthesis" rather than "critical thinking" as knowledge is accessed across various disciplines and from various sources. There will be a change from what the nurse knows to how to access and integrate the ever-changing world of knowledge as part of care delivery.

It is AONE's hope these guiding principles will stimulate discussion, planning, and development of care delivery models that will move us forward and define our work in the future. As stated previously in the assumptions, it is imperative we cannot wait until we have all the answers to get started. We must do so now.

Professional Development and Research Committee Report

The committee is pleased to announce that two recipients have been selected for the 2008 W-ONE Scholarship Grants. Jena Casper, RN, is pursuing her MSN from Viterbo University and Kelly Westberg, RN, is attending Viterbo's BSN completion program. Jena and Kelly will each be awarded \$1,000 toward their educational expenses. Congratulations to these scholarship winners.

The application deadline has been extended to December 31, 2008 for the 2008 W-ONE Research Grant. The application process for the grant will be conducted online this year. Please go to the W-ONE web site (<http://www.w-one.org>) for more information and to access the online application forms. The research grant is funded to \$1,000.

All applications should be e-mailed by December 31, 2008.

Please contact Kathryn Olson, chair, for more information if needed.
(kathryn.olson@ministryhealth.org)

Update on WHA Quality Measures Team And CheckPoint

The WHA Quality Measures Team met on September 26. Bob Beaverson from WHA noted that the AHRQ Inpatient Quality Indicators were now publicly posted on CheckPoint. A few hospitals have asked about the mortality rankings and how they are calculated. Since this is an AHRQ formula and not a CheckPoint calculation, WHA will add some FAQs and a link to explain.

The next data to be posted on CheckPoint will be the HCAHPS information. This should appear by the end of October. The HCAHPS categories will be displayed and not the individual questions other than the two regarding likelihood to recommend and the overall rating. There was some discussion left open on how to post combined response categories for the likelihood to recommend question.

A question had come from a hospital using a CPOE product that eliminates all dangerous abbreviations. The question centered on how to audit for CheckPoint. The work group agreed that hospitals using technology to eliminate dangerous abbreviations should still use the CheckPoint audit methodology and be subject to random validation just as non-CPOE hospitals are.

In October the patient safety measure for concentrated electrolytes will be retired from CheckPoint as all Wisconsin hospitals are at 100% compliance for the past couple of years. In addition, the pneumonia measure for antibiotic timing will be updated to the new 6 hour interval from the past use of 4 hours. Metastar will be able to run historic data using the 6 hour requirement so that data and graphical displays are consistent with the new measure. It was noted that the composite and state benchmarks will need to be updated at the same time.

There was discussion about the future plan to post PeriData. Some hospitals have not historically used this birth record data for internal improvement initiatives and are just now evaluating the usefulness of this data knowing it will soon be public. A member reported that there are some questions at the state level on the future role of PeriData. It was decided to table this initiative until questions can be answered.

A template for evaluating the merits and resources needed to begin a new data reporting project was shared by a member of the team. There was discussion about how and why some state hospitals decided to not contribute to the 2008 Leapfrog Survey. Many express concerns about the validity of the survey, the usefulness for internal improvement initiatives, the resources required to complete the survey, and the pressure from some payer sources to participate. In looking at the web posting of the survey results, it was felt by some that the language used by Leapfrog could be misleading to the public. One example is that Leapfrog titles the display for the CPOE safe practice as "Prevents Medication Errors." The committee recommended bringing these concerns to the leaders of WHA to determine whether there is interest in problem-solving these issues.

**Respectfully submitted by
Susan Peterson
W-ONE Board Representative**

Aligning Forces for Quality (AF4Q)

The mission of the Robert Wood Johnson Foundation (RWJF) is to improve the health and health care of all Americans. The RWJF goal is clear: To help Americans lead healthier lives and get the care they need. To this end, RWJF launched the first phase of "Aligning Forces for Quality" in 2006 as an effort to help communities build health care systems where none existed. This phase provided selected community leadership teams with grants and expert assistance to help them work with physicians to improve quality of care, to measure and publicly report on the quality of ambulatory care, and to engage consumers to make informed choices about their own health and health care.

The AF4Q program expanded to phase 2 in June 2008 to include inpatient care, as well as a focus on reducing racial and ethnic gaps in care and enhancing the central role that nursing plays in quality health care. Specifically, the program will include these areas of focus:

- Helping health care providers in hospitals and other inpatient facilities improve the quality of care
- Focusing and strengthening the role of nurse leaders and frontline nurses in quality improvement initiatives
- Developing, implementing, and using performance measures to better capture patient care experiences and reduce racial and ethnic gaps in quality

The AF4Q program is now operating in 14 communities across the United States. There are cities, regions and states represented, Wisconsin being one of these. The Wisconsin Collaborative for Healthcare Quality (WCHQ) wrote for the grant and was successful in receiving funding. This is where W-ONE comes into play. Our organization was invited to have a seat on the AF4Q leadership team. W-ONE joins a group of organizations comprised of consumers, registered nurses, physicians, academic faculty, and hospital administrators from all across the state, all committed to improving health and health care in Wisconsin. With such representation, many promising quality practices and strategies which have been found to be effective can be aligned within targeted communities which hopefully will result in transformation of health care.

The AF4Q leadership team held a retreat this past August to roll out the expansion of the grant and to develop the vision and prioritize the top initiatives in the following areas. The results generated from the retreat are summarized below:

- 1) Public reporting and/or measurement
 - Measure the patient experience of care
 - Link ambulatory and acute care
 - Identify nurse sensitive topic areas for reporting
 - Identify perinatal measures that relate to disparities
 - Standardize definitions of race, ethnicity and language
 - Develop episodic efficiency measures
- 2) Quality improvement
 - Propose a quality component be added to nursing degree programs
 - Disseminate evidence based practice protocols for hospitals
 - Provide education and training for staff RNs related to quality improvement processes and tools
 - Move entire nursing units to a higher functioning level of quality activities and outcomes
 - Showcase "best practices" in quality strategies
 - Support nurse leaders to develop a focus on quality
 - Develop networks and connections for nurse leaders on quality
 - Focus on physician/clinician partnering
- 3) Consumer engagement
 - Create provider buy-in/culture change to support activated consumers
 - Create program and structure change for practice redesign
 - Change the consumer's role to engaged and activated

Please keep an eye out for ongoing updates on this exciting initiative. I will be asking for your input and feedback as nurse leaders to the AF4Q leadership group while we continue our work.

Article submitted by
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WHA Report

At the most recent Board of Nursing meeting, NCLEX passing scores for Wisconsin nursing programs were reviewed and action was taken. Here is a summary of programs under the attention of the Board:

Programs Currently on Probation:

- Alverno College
- Cardinal Stritch University

Programs currently being monitored by the Board:

- Bryant and Stratton
- Carroll College
- Gateway Technical College
- Madison Area Technical College
- Milwaukee Area Technical College
- Milwaukee School of Engineering
- Moraine Park Technical College
- Viterbo University

Programs removed from monitoring this quarter:

- Columbia/Mt Mary
- Wisconsin Indianhead Technical College

The next WHA webinar for nurse leaders will be about NCLEX, pass rates and the impact on employers. Save December 4 for that one-hour program. More information soon. The Board of Nursing has also been discussing the administration of Propofol by registered nurses. Posted on the Board's website is a question and answer document about this issue. It can be found at <http://drl.wi.gov/prof/rn/pfaq.htm>

The American Nurses Association has a draft statement on the Rights of Registered Nurses when Considering a Patient Care Assignment. This statement advises nurse actions when given an unsafe patient care assignment. Nurse leaders should be familiar with this document. If you are an ANA member, you may wish to make comments.

<http://www.nursingworld.org/DocumentVault/CNPE/PositionStatement.aspx>

The Wisconsin Nurses Association annual convention was held October 16-18 in Eau Claire. The agenda included several sessions on nurse fatigue. The Wisconsin Safety Partnership is also working on the issue of worker fatigue. Fatigue will be an agenda item on the WHA Workforce Council meeting on November 6, 2008. With this level of interest in the topic, W-ONE members should be familiar with the white paper on this topic posted on your website.

The next legislative session promises to be interesting and exciting. WHA will be working on issues with careful attention to election outcomes. Vote and be heard.

Requests for nominations for the Nurse Leader Succession programs will come out to nurse executives in November. Please consider nominating a staff nurse with great potential to attend one of the programs.

Questions or comments, please feel free to contact me.

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- Please contact Pam Aud whenever you have a change in either employment or residential address to guarantee timely mailings. E-mail paud@wha.org or 608/268-1806.
- Submit articles for publication in the next issue of Horizons to Paula Hafeman, 920/433-8204, phafeman@stvgb.org.
- If you are interested in being a part of a specific committee, contact the committee chair.

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