



Collaborative Governance Annual Report 2006

Institute for Patient Care
Patient Care Services Department
January 2007



MASSACHUSETTS
GENERAL HOSPITAL

**Collaborative Governance 2006
Annual Report
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Introduction

The mission of Collaborative Governance is to stimulate, facilitate and generate knowledge that will improve patient care and enhance the environment in which clinicians shape their practice (Mission Statement). As one of the nine structures within Patient Care Services' (PCS) Professional Practice Model, Collaborative Governance places the authority, responsibility and accountability for patient care with practicing clinicians thus integrating clinical staff into the formal decision-making process within Patient Care Services. Grounded in the concept of empowerment, collaborative governance gives professionals an opportunity to both influence the strategic direction of Patient Care Services and participates in achieving the goals established by the PCS Executive Committee.

The ability to see possibilities is one of the core leadership skills that allow Collaborative Governance members the opportunity to come together and make a difference in practice. As one participant in the 2006 evaluation put it, "from concept to institutional change." This report is a story about the commitment, time, and collaborative efforts of busy clinicians who accomplished many worthy goals.

In 2006, we again formally evaluated the Collaborative Governance structure based upon an evidence-based management model, Kanter's Theory of Structural Power in Organizations. As in the past, we surveyed Collaborative Governance clinicians along with a random sample of PCS clinicians. Measures of empowerment between both samples of clinicians continue to show positive trends that reflect a vibrant, evolving professional practice environment. Both samples perceived a high degree of meaning, competence, and autonomy in their work at MGH. The Collaborative Governance respondents scored significantly higher on the impact scale, suggesting that they can initiate actions and have an impact on the organization.

We presented the findings of the evaluation to Patient Care Services Executive Committee, Nurse Managers, Collaborative Governance leaders, and the entire MGH community. We believe that organizational research is iterative in nature and requires both dissemination of the findings along with meaningful feedback from multiple perspectives. The findings identified areas for future growth and change such as better visibility and communication surrounding Collaborative Governance and its work as well as more interdisciplinary participation in research and education forums.

At the ten-year mark, Collaborative Governance continues to make positive contributions to the professional practice environment by providing clinicians many opportunities to make hospital-wide decisions that will enhance the practice environment for themselves and other clinicians. In so doing, these decisions will ultimately improve our care environment, making MGH a safer and better place for our patients and their families.

Please take a moment to read the report of each committee along with the goals outlined for 2007. If you are not already involved in Collaborative Governance, please visit our website http://pcs.mgh.harvard.edu/ccpd/cpd_govern.asp for more information.

Respectfully submitted,

Susan Lee, RN, PhD, Clinical Nurse Specialist, Institute for Patient Care
Taryn J. Pittman, RN, MSN, BC, Patient Education Specialist/Manager
Blum Patient and Family Learning Center
Karla Valentin, Staff Assistant, Institute for Patient Care

**Collaborative Governance
2006 Leadership**

Diversity Steering Committee

Co-Chairs: Carly Jean Francois, RN, Staff Nurse, Ellison 18, Pediatrics
 Lourdes "Lulu" Sánchez, Manager, Interpreter Services
Coach: Judy Newell, RN, BS, Nurse Manager, Ellison 17 & 18, Pediatrics
Advisor: Deborah Washington, RN, PhDc, Director, PCS Diversity Program

Ethics in Clinical Practice Committee

Co-Chairs: Regina Holdstock, RPh, Pharmacist, Ambulatory Oncology
 Gayle Peterson, RNC, Staff Nurse, PH 21, General Medicine
Coach: Ellen Robinson, RN, PhD, Clinical Nurse Specialist in Ethics, Institute for Patient Care

Nursing Practice Committee

Co-Chairs: Catherine Mackinaw, RN Staff Nurse, Ellison 12, Neuroscience
 Edna Riley, RN, Staff Nurse, IV Therapy
Coach: Joanne Empoliti, RN, MSN, Clinical Nurse Specialist, PH 22, Surgery & WH 6, Orthopedics

Nursing Research Committee

Co-Chairs: Catherine Griffith, RN, MSN, Clinical Nurse Specialist, Blake 8, Cardiac Surgery ICU
 Mary Larkin, RN, BSN, CDE, Manager of Clinical Research, MGH Diabetes Center
Coach: Virginia Capasso, APRN-BC, PhD, Clinical Nurse Specialist, Norman Knight Nursing Center

Patient Education Committee

Co-Chairs: Audrey Cohen, SLP, Speech Language Pathologist
 Kathleen Reilly Lopez, RN, Staff Nurse, Ellison 7 & White 7, Surgery
Coach: Taryn Pittman, RN, MS, Patient Education Specialist/Manager, Blum Patient and Family Learning Center

Quality Committee

Co-Chairs: Karen Lipshires, RN, Chemo Order Set Coordinator, Yawkey 8, Oncology
 Patricia Wright, RN, Staff Nurse, Main Operating Room
Coach: Lynda Tyer-Viola, RN, PhD, Clinical Nurse Specialist, Obstetrics
Advisor: Joan Fitzmaurice, RN, PhD, Director, PCS Quality & Safety

Staff Nurse Advisory Committee

Chair: Jeanette Ives Erickson, RN, MS,
 Senior Vice President for Patient Care and Chief Nurse

Committee Leaders Meetings:

Leadership: Marianne Ditomassi, RN, MSN, MBA, Executive Director, Patient Care Services Operations
 Dorothy Jones, RNC, EdD, FAAN, Senior Nurse Scientist, Munn Center for Nursing Research
 Susan Lee, RN, PhD, Clinical Nurse Specialist, Institute for Patient Care
 Taryn Pittman, RN, MS, Patient Education Specialist/Manager, Blum Patient and Family Learning Center
Staff Assistants: Kimberly Chelf
 Nichole Forrester

**Collaborative Governance
2007 Leadership**

Diversity Steering Committee

Co-Chairs: Carly Jean Francois, RN, Staff Nurse, Ellison 18, Pediatrics
 Lourdes "Lulu" Sánchez, Manager, Interpreter Services
Coach: Judy Newell, RN, BS, Nurse Manager, Ellison 17 & 18, Pediatrics
Advisor: Deborah Washington, RN, PhDc, Director, PCS Diversity Program

Ethics in Clinical Practice Committee

Co-Chairs: Susan Warchal, RN, Staff Nurse, Emergency Department
 Gayle Peterson, RNC, Staff Nurse, PH 21, General Medicine
Coach: Ellen Robinson, RN, PhD, Clinical Nurse Specialist in Ethics, Norman Knight
 Nursing Center

Nursing Practice Committee

Co-Chairs: Maureen Beaulieu, RN, Staff Nurse, Emergency Department
 Edna Riley, RN, Staff Nurse, IV Therapy
Coach: Joanne Empoliti, RN, MSN, Clinical Nurse Specialist, PH 22, Surgery &
 WH 6, Orthopedics

Nursing Research Committee

Co-Chairs: Catherine Griffith, RN, MSN, Clinical Nurse Specialist, Blake 8, Cardiac
 Surgery ICU
 Mary Larkin, RN, BSN, CDE, Manager of Clinical Research, MGH Diabetes
 Center
Coach: Virginia Capasso, APRN-BC, PhD, Clinical Nurse Specialist, Norman Knight
 Nursing Center

Patient Education Committee

Co-Chairs: Janet King, RN, Staff Nurse, Endoscopy Unit
 Kathleen Reilly Lopez, RN, Staff Nurse, Ellison 7 & White 7, Surgery
Coach: Taryn Pittman, RN, MS, Patient Education Specialist/Manager
 Blum Patient and Family Learning Center

Quality Committee

Co-Chairs: Karen Lipshires, RN, Chemo Order Set Coordinator, Yawkey 8, Oncology
 Andrea Bonanno, RPT, Clinical Specialist, Physical Therapy
Coach: Carol Camooso Markus, RN, MS, Staff Specialist, PCS Office of Quality &
 Safety
Advisor: Joan Fitzmaurice, RN, PhD, Director, PCS Office of Quality & Safety

Staff Nurse Advisory Committee

Chair: Jeanette Ives Erickson, RN, MS,
 Senior Vice President for Patient Care and Chief Nurse

Committee Leaders Meetings

Co-Chairs: Marianne Ditomassi, RN, MSN, MBA, Executive Director, Patient
 Care Services Operations
 Dorothy Jones, RNC, EdD, FAAN, Senior Nurse Scientist, Munn
 Center for Nursing Research
 Susan Lee, RN, PhD, Clinical Nurse Specialist, Institute for Patient
 Care
 Taryn Pittman, RN, MS, Patient Education Specialist/Manager,
 Blum Patient and Family Learning Center
Staff Assistant: Karla Valentin

**Collaborative Governance
2007 Meeting Schedule**

Diversity Steering Committee

1st and 3rd Tuesday of each month, 12-1pm
Bigelow 1030 Conference Room

Ethics in Clinical Practice Committee

1st Wednesday of each month, 1-3pm
O'Keeffe Auditorium

Nursing Practice Committee

2nd and 4th Tuesday of each month, 1-2:30pm
Yawkey 2210 Satter Conference Room

Nursing Research Committee

1st Friday of each month, 1-2:30pm
Blake 8 Conference Room

Patient Education Committee

2nd & 4th Wednesday of each month, 1:30-3pm
Bigelow 1030 Conference Room

Quality Committee

1st and 3rd Tuesday of each month, 1-3pm
Yawkey 2210 Satter Conference Room

Staff Nurse Advisory Committee

1st Tuesday of each month, 11:30am-12:30pm
Trustees Conference Room (Bulfinch 222)

Committee Leaders Meetings

2nd Thursday of each month, 11am-12:30pm
Bigelow 1030 Conference Room

**Patient Care Services
Diversity Steering Committee
Annual Report 2006**

Description of Committee:

The Patient Care Services Diversity Steering Committee is committed to supporting and developing strategies, which transform our work setting into a more inclusive and welcoming environment for staff and patients alike. The committee's work includes professional development, student outreach, programs centered on culturally competent care and input into the development of patient education material specifically designed for use by clinicians who care for a diverse patient population.

Charges:

- ◆ Professional development
- ◆ Culturally competent care and staff education
- ◆ Preparation of patient education materials
- ◆ Student outreach: MGH Foreign Nurses Group
- ◆ Develop a community, sensitive to each person as a human to be treated with dignity and respect
- ◆ Create a climate of inclusion in activities throughout the system

Meeting Schedule: 1st and 3rd Tuesday of each month from 12pm to 1pm

Co-Chairs:

Carly Jean Francois, RN
Lourdes "Lulu" Sánchez

Staff Nurse, Ellison 18, Pediatrics
Manager, Interpreter Services

Coach:

Judith Newell, RN

Nurse Manager, Ellison 17 & 18, Pediatrics

Advisor:

Deborah Washington, RN

Director, PCS Diversity Program

Members:

Claribell Amaya, RN

Staff Nurse, White 6, Orthopedics

Mary Cunningham

Director, Customer Service

Nancy D'Antonio, RN

Case Manager, Obstetrics

Audrey Jasey, RN

Staff Nurse, Ellison 16, General Medicine

Maria Kingston

International Patient Coordinator Int'l Office

Rabbi Benjamin Lanckton

Chaplain, Chaplaincy

Kathleen Myers, RN

Nurse Manager, Ellison 6 & White 6, Orthopedics

Ivonny Niles, RN

Staff Nurse, White 6, Orthopedics

Elizabeth Nolan

Global Health Services Liaison, Partners Int'l

Firdosh Pathan, RPh

Pharmacist, Pharmacy

Georgia Peirce

Director, Promotional Communications & Publicity

Donna Perry, RN

Professional Development Coordinator, Norman

Knight Nursing Center

Kerry Treacy, RN

Staff Nurse, Ellison 11, General Medicine

Joy Williams, RN

Staff Nurse, Radiology

Liang Yap, PhD

Administrator, Neurology

Recorders:

Kim Chelf

Nicole Forrester

Goal: Continue raising awareness about diversity issue

2006 Accomplishments:

- ◆ Monthly publications in *Caring Headlines*

- ◆ A presentation in the O’Keeffe Auditorium highlighted unique health care needs of the GBLT (Gay/Bisexual, Lesbian, Transgender) community: ***Caring for the Invisible Patient***. Speakers were Harvey J. Makadon, MD, Director of Educational & Professional Training and Judith B. Bradford, PhD, Co-Chair & Director of Lesbian Health Research, both of Fenway Institute, Fenway Community Health. The discussion improved the audience’s knowledge and sensitivity to GBLT health care issues.

Goal: Continue exploring the issue of healthcare disparities

2006 Accomplishments:

- ◆ As a group, we came up with a plain language definition of healthcare disparities and a more “user friendly” definition than the one used by the Institute of Medicine.

Goal: Continue educating the workforce about cultural competence

2006 Accomplishments:

- ◆ Continue with yearly celebrations:
 - Hajj
 - African Pinning Ceremony
 - St. Patrick’s Day
 - Passover and Easter
 - Ramadan
 - Yom Kippur
 - Holidays around the World

Goal: Collaborate with other groups in collaborative governance

2006 Accomplishments:

- ◆ We collaborated with the Patient Education Committee and the Ethics in Clinical Practice Committee on various issues.

Goal: Continue with community outreach

2006 Accomplishments:

- ◆ Participated in the **New Bostonian**, a daylong event sponsored by Mayor Menino and the City of Boston so that new immigrants have the opportunity to learn about services and resources available to them. Again this year, committee members represented MGH, the only hospital participant.
- ◆ Participated in **Familia y Saluda**- an event dedicated to the health care of Boston Latinos.

Goal: Increase membership and encourage new members to have an active voice.

2006 Accomplishments:

- Two of our new members wrote a paper about what being on the committee means to them.

2007 GOALS

- To raise awareness about diversity-related issues by partnering with specialists and other groups with similar agendas through presentations, meetings, and other activities.
- To build a network of communication wherein employees are free to provide feedback about how we can help make the hospital a more inclusive place for both employees and patients.
- To sponsor a mentorship program for incoming nurses.
- To create a program targeted specifically towards the welcoming of new-hire minority nurses.
- To continue looking at issues of healthcare disparities and how we can educate the public.
- To revise and improve the culturally competent care agenda.
- To work with the homeless and homeless advocacy groups.

**Patient Care Services
Ethics in Clinical Practice Committee
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Description of Committee:

The Patient Care Services Ethics in Clinical Practice (EICP) Committee is a multidisciplinary committee, which was formed to develop and implement activities and programs to further clinicians' understanding of ethical aspects of patient care. The work of this committee involves identifying strategies to integrate ethical judgment into professional practice.

Charges:

- ◆ Design and implement activities and programs to support the development of staff in Patient Care Services in the area of health care ethics.
- ◆ Employ strategies to educate EICP members in the area of health care ethics.
- ◆ Identify and address ethical issues and conflicts faced by clinicians in Patient Care Services.
- ◆ Provide consultation to the organization regarding policies, procedures and programs with ethical implications.
- ◆ Expand the impact of EICP through collaboration with other Collaborative Governance Committees, links with the organizational initiatives, and professional conference participation.

Meeting Schedule: 1st Wednesday of each month from 1pm to 3pm

Co-Chairs:

Regina Holdstock, RPh

Pharmacist, Ambulatory Oncology

Gayle Peterson, RN

Staff Nurse, Phillips House 21, General Medicine

Coach:

Ellen Robinson, RN, PhD

Clinical Nurse Specialist in Ethics, Institute for Patient Care

Members:

Susan Anderson, RN

Staff Nurse, Bigelow 9, RACU

Sara Asekoff, RN

Staff Nurse, Ellison 9, CCU

Sharon Brackett, RN

Staff Nurse, SICU

Anne Brandl, RN

Staff Nurse, PACU

Kathleen Bucci, RN

Staff Nurse, Bigelow 10 Dialysis

Janice Cameron-Calef, RN

Staff Nurse, PH 21, General Medicine

Theresa Cantanno, RN

Clinical Nurse Specialist, PH 20 & 21, General Medicine

Alex FM Cist, MD

Pulmonary and Critical Care Medicine

Valerie Cleverdon, RD

Registered Dietician, Nutrition & Food Services

Regina Doherty, OTR/L

Clinical Specialist, Occupational Therapy

Carole Foxman, MS

Librarian, Treadwell Library

Charlene Gorden, RN

Staff Nurse, Bigelow 9, RACU

Linda Gorham Ryan, RN

Staff Nurse, Phillips House 22, Surgery

Audrey Jasey, RN

Staff Nurse, Ellison 16, General Medicine

Cynthia Johnson, RN

Clinical Nursing Supervisor

Karon Konner, LICSW

Social Worker, Social Services

Susan LaGambina, RT

Respiratory Therapist, Respiratory Care

Cynthia LaSala, RN

Clinical Nurse Specialist, White 9, General Medicine

Marisa Legare, RN

Staff Nurse, Blake 6, Transplant

Ann Letendre, RN

Staff Nurse, Blake 12, Neuroscience ICU

Katherine McNulty, RN

Staff Nurse, White 10, General Medicine

Jackie Michaud, RN

Staff Nurse, White 13, GCRC

Christine Mitchell, RN

Ethics Consultant

Denise Montalto, PT

Physical Therapist, Physical Therapy

Paul Montgomery, PhD

Palliative Care

Joyce Murray, RN

Staff Nurse, Ellison 10, Cardiac Telemetry

Gordon Newbert, RN	Staff Nurse, Bigelow 11, General Medicine
Monsignor Felix Ojimba, PhD	Chaplain, Chaplaincy
Patricia Olsen, NP	Nurse Practitioner, Surgery
Judy Pagliarulo, RN	Staff Nurse, SDSU
Marion Parker, RN	Staff Nurse, PH 20, General Medicine
Lois Richards, RN	Staff Nurse, Blake 14, Obstetrics
Kathleen Ryan, RN	Staff Nurse, Blake 7, MICU
Judy Sacco	Operations Coordinator, Ellison 17 & 18, Pediatrics
Shoshana Savitz, LICSW	Social Worker, Social Services
Sarah Sciretta, RN	Staff Nurse, PH 22, Surgery
Denyce Stanton, RN	Staff Nurse, White 9, General Medicine
Maureen Thomassen, RN	Staff Nurse, White 8, General Medicine
Angelica Tsoumas, LICSW	Social Worker, Social Services
Dana Villeneuve, RN	Staff Nurse, Ellison 14, Vascular Surgery
Marjorie Voltero, RN	Staff Nurse, Blake 4, Endoscopy
Susan Warchal, RN	Staff Nurse, Emergency Department
Robin Weingarten, RN	Staff Nurse
Kristen Wilson, RN	Staff Nurse, White 10, General Medicine
Mary Wilson, RN	Staff Nurse, Blake 14, Obstetrics
Marilyn Wise, LICSW	Social Worker, Social Services
Brenda Woodbury, NP	Nurse Practitioner, North End Community Health Center

Recorder:

Kimberly Chelf
Nichole Forrester

Goal: Continue to educate Ethics in Clinical Practice Committee members and members of the PCS community.

2006 Accomplishments:

- Retrospective case study analyses at meetings
- "Ethics in the News," ethical issues that are reported in general press are distributed and discussed at meetings.
- Distribute relevant articles from professional journals.
- Guest speakers on topics relevant to members:

"War and Torture: Is It Ever Ethical?" by Pathan Firdosh, RPh

"DSS as Parent: Ethical Challenges for Pediatric Clinicians" by Brenda Miller

"HIV in Africa: Ethical Issues" by Monsignor Felix Ojimba

"Organ Donation: Ethical Issues with First Consent" by John Murphy, RN

- Ethics Task Force/EICP Collaborative Programs
 - *Dancing with Porcupines: Clinicians' Interactions with Big Pharma, Regina Holdstock, facilitator
 - *Access to Health Care, Ruth Purtillo, Facilitator
- Harvard Ethics Educational Program-participation of several EICP members as participants and small group facilitators
- Partners Ethics Retreat-participation of several EICP members as participants and small group facilitators
- 3rd Annual Interdisciplinary Ethics Resource Program held at Dana Farber Cancer Institute in collaboration with MGH, BWH and DFCl hosted close to 25 MGH participants
- Unit-based Ethics Rounds on PH 20-21, General Medicine, Blake 13-14, Obstetrics, CCU, SICU, MICU, RACU, NICU, and Blake 6, Transplant.
- MGH IHP Ethics Initiative-MGH EICP Committee have received a grant from the Schwartz Center to sponsor the **Compassionate Care Conference** in February 2007, develop a teaching module for clinicians and students, and develop a handbook for families.

- B.O.A.T.I.N.G. (Before Offering Additional Treatment, Institute New Goals) This was a dramatic presentation by EICPC members to illustrate the concepts of advance care planning and end of life treatment, first seen as ASBH meeting.
- End-of-Life Nursing Education Consortium (ELNEC) Program (some instructors from EICP)
- American Society for Bioethics and Humanities (ASBH) 2005 Nursing Affinity Group- Presentation of a case (Gayle Peterson, Keith Perleberg, Ellen Robinson, Marion Parker)
- ASBH Conference 2006-participation by several EICP members
- Boston Medical Center Invitational Conference on Allocation of Resources: Ethical Implications; EICPC leaders invited and attended.

Goal: Heighten awareness of clinician's ethical obligation to address patients' pain through an interdisciplinary model. Specific strategies include utilization of data from the 2005 Staff Perceptions Survey to assist in defining practice problems and areas in need of education; collaborate with Pain Management Services and the Palliative Care Service in further measuring, defining and addressing ineffective pain management issues in patients.

2006 Accomplishments:

- Members participated in annual Burton Judith Heron Memorial Lecture, Scientific and Political Perspectives on Fetal Pain at Brigham and Women's Hospital (BWH).
- MGH Pain Skills Knowledge Day, EICP Members participated as coaches in collaboration with the Ethics Task Force, Pain and Symptom Management at End of Life Presented; Ellen Robinson- Ethics; Paul Arnstein – Pain; Connie Dahlin- Palliative Care; Gayle Peterson - Facilitator
- Presentation to the American Society of Pain Management Nurses Society; Ethical Considerations in Pain Management- Ellen Robinson PhD, Gayle Peterson RN

Goal: Continue to educate the Patient Care Services community, patients and families, about advance care planning through the support of the Advance Care Planning Task Force, chaired by EICPC member, Sharon Brackett, RN.

2006 Accomplishments:

- PCS Health Care Proxy website: collaborated with Janet Madigan, Jean Callahan, and Sally Millar to edit the agreement between MGH and Mass Health Decisions to allow electronic versions of the Spanish and Portuguese Massachusetts Health Care proxy form to be posted on the site at the request of the Primary Care health centers and to explore options to make the site available to all of the health centers.
- The advance care planning brochures developed by the task force are now distributed as MGH Standard Register documents. This pair of informational brochures is now given to patients as part of the admission packet on inpatient floors and other entry points to the hospital such as PATA. Approximately 20,000 of these brochures have been distributed in 2006.
- Presentations on advance care planning concepts, facilitation skills, and documentation options have been offered by ACP Task Force members at Palliative Care Grand Rounds January 25, 2006 and ELNEC Curriculum October 13, 2006.
- In coordination with The Norman Knight Nursing Center for Clinical and Professional Development and The Stoeckle Center for Primary Care Innovation, we provided leadership and certified instructors in presenting the Respecting Choices Advance Care Planning Facilitator for Primary Care Program on October 2006. This groundbreaking collaborative effort between Primary Care and Patient Care Services was made possible through a grant from the Esther Rabb Foundation. The program certified 32 multidisciplinary clinicians as advance care planning facilitators, including four clinicians from Beth Israel Deaconess Medical Center (BIDMC). This program also provided the education in advance directives and advance care planning for the CMS Care Management Program case managers hired to date for the Medicare demonstration Project.
- Collaborated with The Blum Patient and Family Learning Center and The Stoeckle Center to develop the content, marketing, and facilitators for monthly Advance Care

Planning Open Sessions, which were offered in July, August, and September. Because attendance at the initial sessions was low, the task force is regrouping to redesign marketing, space, and a new lunch hour time frame.

- Members collaborated with trained ACP facilitators in The MGH Cancer Center to develop the content and assist with facilitating monthly advance care planning programs on the HOPES Program calendar. These programs have been offered monthly since September. Currently the Task Force is collaborating with the Hopes Program to explore expanding the number of Task Force ACP facilitators offering the program to allow expanding the program into the Cox Radiation and Infusion areas.
- Developed the agenda and content for quarterly ACP facilitator update forums on February 2, 2006 and August 3, 2006. The May forum was deferred to allow facilitators to attend the EICP sponsored educational program B.O.A.T.I.N.G. a moving and interactive play and panel discussion about advance care planning.
- Sharon Brackett, RN, Chair of the ACP Task Force, has been asked to participate in the MGH EOL CPM Team and the Partners Advance Care Planning IT Workgroup to represent the ACP Task Force and share the expertise and knowledge gained in their work to date within Patient Care Services.
- Collaborated with Joanne Empoliti, the Nursing Practice Committee and leaders from Medical Information systems to provide scanning of advance directive documents into CAS and Red Sleeves in all inpatient gray charts to identify and house advance directive documents.
- Respecting Choices certified RN facilitators and designated AD champions with leadership support from Sharon Brackett, RN, who guided the implementation of a unit-based education initiative on advance directives and advance care planning on inpatient adult units. This initiative was supported through Patient Care Services and The Norman Knight Nursing Center for Clinical and Professional Development.
- The Task Force developed a "Reflection Questions" sheet designed to serve as a patient education tool, discussion/documentation guide for the patient and their agent during an advance care planning discussion. The Cancer Center's Patient and Family Advisory Council and further revisions have reviewed the final draft of this document or development will be considered after their feedback has been reviewed.
- Continue to maintain and update a Shared Drive PCS ACP area to house presentations and minutes of all meetings, an Access database of all certified ACP instructors/facilitators and their activities, and an email distribution list of all certified ACP facilitator.

2007 GOALS

- Continue to educate Ethics in Clinical Practice Committee members and members of the PCS community about ethical issues in clinical practice. Specific strategies with existing ethics committees and developing and implementing education programs (Ethics Task Force, Harvard Ethics Leadership Council, Partners Ethics Committee, EICP sponsored programs; committee case review and ethics in the news, Ethics Resource Program, Unit-based Ethics Rounds, and the Harvard Ethics Consortium).
- Continue to heighten awareness of clinician's ethical obligation to address patients' pain through an interdisciplinary model. Specific strategies include utilization of data from the 2006 Staff Perception Survey to assist in defining practice problems and areas in need of education; collaborate with Pain Management Services and the Palliative Care Service in further measuring, defining and addressing ineffective pain management issues in patients.
- Discussion of the ethical issues related to patient access to care from primary care to emergency care; Develop strategies to raise awareness and possible solutions.

- Continue to educate and advise the Patient Care Services community, patients, and families about advance care planning through the support of the Advance Care Planning Task Force and through its members' representation on MGH and Partners EOL Teams.
- Through examination of the Massachusetts legislation on "First Consent," we worked collaboratively with MGH/New England Organ Bank representatives to develop educational initiatives for professionals and public. Strategies may include 1) Caring Headlines article, 2) letter to editor of The Boston Globe, and 3) develop additional educational programs.

**Patient Care Services Nursing Practice Committee
Annual Report 2006**

Description of Committee:

The Patient Care Services Nursing Practice Committee reviews, revises and communicates standards of practice for progressive nursing at MGH. This work includes reviewing and approving new products, new practice recommendations, and communicating of outcomes and revisions to staff throughout Patient Care Services.

Charges:

- ◆ Consult and approve standards of practice including clinical care and documentation guidelines.
- ◆ Approve clinical practice recommendations (including integration of new Patient Care Delivery Model).
- ◆ Determine and communicate standards for professional nursing practice at MGH.
- ◆ Communicate committee outcomes throughout Patient Care Services and to others as appropriate.
- ◆ Communicate changes and additions to clinical pathways.
- ◆ Approve clinical product selections.

Meeting Schedule: 2nd and 4th Tuesday of the month from 1:30 pm to 3:00 pm

Co-Chairs:

Catherine Mackinaw, RN

Staff Nurse, Ellison 12, Neuroscience

Edna Riley, RN

Staff Nurse, IV Therapy

Coach:

Joanne Empoliti, RN

Clinical Nurse Specialist, White 6, Orthopedics & Phillips 22, Surgery

Members:

Sami Ahmed, RPh

Pharmacist, Pharmacy

Mimi Bartholomay, RN

Clinical Nurse Specialist, Yawkey 8, Oncology

Maureen Beaulieu, RN

Staff Nurse, Emergency Department

Kate Boyle, RN

Staff Nurse

Sheila Burke, RN

Clinical Educator, Norman Knight Nursing Center

Margaret Callen, RN

Staff Nurse, Blake 11, Psychiatry

Diane Carroll, RN

Clinical Nurse Specialist, Ellison 11, Cardiac Access

Rhianna Casale, RN

Staff Nurse, White 9, General Medicine

Cecilia Catone, RN

Staff Nurse, Endoscopy

Gina Cenzano, RN

Staff Nurse, Bigelow 13, Obstetrics

Margaret Chernaik, RN

Staff Nurse, Dialysis

Elena Clifford, RN

Staff Nurse, Emergency Department

Gregory Conklin, RN

Staff Nurse, Bigelow 9, RACU

Leslie Delisle, RN

Staff Nurse, White 8, General Medicine

Michelle Dever, RN

Staff Nurse, Ellison 7, Surgery

Erica Edwards, RN

Staff Nurse, Ellison 9, CCU

Jean Fahey, RN

Clinical Nurse Specialist, Ellison 12, Neuroscience

Karla Farrer, RN

Staff Nurse, White 11, General Medicine

Kathleen Flynn, RN

Staff Nurse, Blake 8, Cardiac Surgical ICU

Eileen Gardner, RN

Staff Nurse, Ellison 18, Pediatrics

Susan Gavaghan, RN

Clinical Nurse Specialist, Bigelow 9 RACU

Christine Grady, RN

Staff Nurse, Ellison 8, Cardiac Surgery

Kathleen Gottbrecht, RN

Clinical Supervisor, Nursing Supervisor

Mary Guanci, RN

Clinical Nurse Specialist, Blake 12, Neuroscience ICU

Amy Guillemin, RPh

Pharmacist, Pharmacy

Sioban Haldeman, RN

Clinical Nurse Specialist, Ellison 11, Cardiac Access

Kathleen Hoffman, RN

ICP, Infection Control

Marian Jeffries, RN

Clinical Nurse Specialist, Ellison 19, Thoracic Surgery

Donna Jenkins, RN	Nurse Manager, Ellison 19, Thoracic Surgery & PH 22, Surgery
Stephen Joyce, RN	Staff Nurse, SICU
Cindy Knauss, RN	Staff Nurse, Ellison 14, Oncology
Donna Lawrence, RN	Staff Nurse, Ellison 10, Cardiac Telemetry
Sharon Maginnis, RN	Staff Nurse, White 13, GCRC
Stacey Margardo, RN	Staff Nurse, Ellison 19, Thoracic Surgery
Cristina Matthews, RN	Staff Nurse, White 12, Neuroscience
Christine McCarthy, RN	Staff Nurse, Blake 7, MICU
Julie McCarthy, RN	Staff Nurse, PACU
Suzanne McCarthy, RN	Staff Nurse, Main OR
Nancy Mermet, RN	Staff Nurse, PH 22, Surgery
Sheila Moran, MLIS	Librarian, Treadwell Library
Linda Nichols, RN	Staff Nurse, Blake 12, Neuroscience
Kerin O'Grady, RN	Staff Nurse, White 6, Orthopedics
Leanne Otis, RN	Staff Nurse, Ellison 11, Cardiac Access
Erin Pelletier, RN	Staff Nurse, Main OR
Jane Ritzenthaler, RN	Clinical Nurse Specialist, Blood Transfusion Service
Erin Salisbury, RN	Staff Nurse, Ellison 6, Orthopedics
Claire Seguin, RN	Staff Nurse, PH 21, General Medicine
Nancy Swanson, RN	Infection Control Practitioner, Infection Control
Aileen Tubridy, RN	Nurse Manager, Ellison 10, Cardiac Telemetry
Pam Wrigley, RN	Staff Nurse, SDSU

Recorder:

Kim Chelf
Nichole Forrester

Goal:

- Review and approve nursing procedures, and current and new practices for patient safety and efficiency.
- Review issues and concerns regarding nursing practice.

2006 Accomplishments

- Reviewed and approved peri-operative beta blockade guidelines
- Reviewed and made recommendations for creation of PAML
- Discussed and approved on-line safety reporting system
- Reviewed and approved verification process for red checking
- Reviewed and approved policy for range orders and link to pain scale
- Approved and made recommendations for vital sign changes for blood transfusions
- Reviewed and approved subcutaneous administration of pain medications and symptom management by Palliative Care
- Reviewed and recommended changes concerning duplicate patient names
- Reviewed and approved use of sedation for intractable distress of a dying patient
- Reviewed and approved universal respiratory care procedures
- Reviewed and approved assessment and removal of PICC lines
- Approved and made recommendations to develop guidelines and a teaching plan for PCAs to assist with oxygen saturations
- Reviewed and approved the Safe Hand Off Policy, regarding the transfer of responsibility of care between RNs and providers

Goal:

Collaborate with the Quality and Research Committees and Pharmacy to facilitate practice changes. Continue to communicate with Operations Improvement Teams regarding changes in nursing practice.

2006 Accomplishments

- Reviewed and approved standard KCI infusions from pharmacy Medication Education Safety and Approval Committee.
- Reviewed and approved chemotherapy guidelines for infusion unit.

- Approved and made recommendations concerning change of TPN hang time
- Reviewed and approved code cart changes and updates

Goal:

Evaluated and approved new and current products for patient safety, efficiency, and cost effectiveness. Continue to maintain relationship with Materials Management as frontline evaluators for products.

2006 Accomplishments

- Reviewed and approved portable bed alarms
- Discussed PCA pump requirements and made recommendations
- Reviewed and approved new patient beds and furniture
- Reviewed and approved new specimen collection bags
- Discussed and approved trial of new sterling gloves
- Reviewed and discussed recommendation to change from tie gowns to snap gowns for patient safety

Goal:

Evaluate nursing documentation for appropriateness and quality.

2006 Accomplishments

- Reviewed and helped develop anticoagulation sheets
- Reviewed and made recommendations for PCA sheets
- Reviewed and approved health care proxy
- Approved and helped implement policy concerning red sleeves
- Reviewed and approved pressure regulation of isolation rooms with daily documentation and performance of tissue test, when in use
- Continued to review updates concerning trial of new documentation policy

Goal:

Continue to improve communication with committee members, encourage staff to attend and participate in committee meetings.

2006 Accomplishments

- Communicated with members via E-mail. Review of upcoming policies and procedures
- Continued to encourage use of online manual and provide direction for accessing Trove

2007 GOALS

- Promote patient safety by reviewing current and new nursing practices for safety and efficacy.
- Review issues and concerns regarding nursing practice.
- Develop, review and update Nursing Procedures to reflect practice.
- Utilize evidence and research in approval of nursing procedures and practice.
- Evaluate and approve products related to nursing practice. Continue to maintain relationship with representatives from Materials Management.
- Transform Nursing Practice Committee utilizing structure that has main committee and subcommittees, that include: 1) Patient at Risk, 2) Products, Procedures, Documentation, and 3) Population-Specific Practice, such as Cancer Center, Cardiac, Medical, and Ambulatory.

**Patient Care Services Nursing Research Committee
Annual Report 2006**

Description of Committee:

The Patient Care Services Nursing Research Committee exists to foster the spirit of inquiry around clinical practice. The committee supports nurses in the research utilization process and communicates the results of nursing research activities.

Philosophy:

Passion and purpose fueled by energizing forces builds great achievements.

Charges:

- Foster a spirit of inquiry around clinical practice.
- Promote awareness of institutional nursing research activities.
- Encourage and provide support for research-based practice.

Meeting Schedule:

1. General Committee meeting
1st Friday of each month, 1-2:30pm
2. Subcommittees
Upon joining the NRC, each new member joins one of the subcommittees:
 - a. "Did You Know..." Posters: 1st Friday; 12pm - 1pm immediately before NRC monthly meeting;
 - b. Research Day Planning: 1st Friday; 12pm - 1pm immediately before NRC monthly meeting
 - c. Journal Club Subcommittee: 2nd Wednesday, 1:15pm - 2:15pm

Co-Chairs:

Catherine A. Griffith, APRN-BC
Mary E. Larkin, RN, CDE

Clinical Nurse Specialist, Cardiac Surgery
Manager of Clinical Research, MGH Diabetes Center

Coach:

Virginia Capasso, APRN-BC, PhD

Clinical Nurse Specialist, Norman Knight Nursing Center; Nurse Scientist, Yvonne L. Munn Center for Nursing Research

Members:

Stephanie Ball, RN, MS
Chelby Cierpial, APRN-BC
Susan Croteau, RN
Kathleen Egan, RN
Patricia Flaherty, APRN-BC
Katherine Fillo, RN
Elise Gettings, RN
Talli McCormick, APRN-BC
Victoria Morrison, RN, PhD

Staff Nurse, ED; Faculty, Salem State College
CNS Ellison 11, Cardiac Access Unit
Staff Nurse, PATA
Staff Nurse, White 13, GCRC
Nurse Practitioner, Transplant Services
Staff Nurse, Bigelow 11, Adult Medicine
Research Nurse, Ellison 4, Anesthesia
Faculty, MGH Institute of Health Professions
Staff Nurse, White 11, General Medicine; Faculty
Salem State College

Catherine O'Malley, RN
Carolyn Paul, MSLS, MPH
Sharon Kelly-Sammon, RN
Steve Sampang, RN
Joan Stack, RN, MSN
Susan Stephens, APRN-BC
Theresa Vanderboom, RN
Kathleen Walsh, RN, PhD(c)

Staff Nurse, Main Operating Room
Senior Librarian, Treadwell Library
Staff Nurse, PACU
Staff Nurse, PH 21, Adult Medicine
Staff Nurse, Bigelow 14, Vascular Surgery
Nurse Practitioner, Weight Loss Clinic
Coordinator, Radiology
Case Manager, ED & Case Management

Recorder: Kimberly Chelf
Nichole Forrester

2006 Overall Goal: Expand current initiatives:

The subcommittee infrastructure of the Nursing Research Committee was further strengthened through operationalizing our model of Succession Planning, as each subcommittee seamlessly transitioned into having a recognized Subcommittee Chair. This infrastructure was put in place in 2005 and is modeled after the larger Research Committee to foster development of future leaders through mentorship, delegation and increased participation in committee decision-making. The structure is meant to serve as a guide for future NRC Coaches and Chairs. Each subcommittee is designing a “*How To... Manual*” as a guide to future committee leaders in running the NRC initiatives. A Nursing Research Committee business card was designed for networking at national conferences to increase visibility of the MGH NRC.

1. Host Nursing Research Day

Accomplishments:

- Nursing Research Day 2006 was very successful:
 - Three research teams presented the results of their Yvonne L Munn Nursing Research Award-winning studies, “Evaluating the Drug-Dosage Calculation Guide on the Registered Nurse’s Achievement Scores and Multi-Step Calculations on an Orientation Medication Assessment; The Giraffe Study; The Recognition and Prevalence of Delirium in Patients Who Fall While Hospitalized in the Acute Care Setting.”
 - Dr. Loretta Sweet Jemmott was the Yvonne L. Munn Nursing Research Visiting Professor, who met with staff caring for adolescents and pediatrics, members of the Nursing Research Committee, and awed the audience with her presentation about innovations in the area of health promotion.
 - The 2006-2007 Yvonne L. Munn Nursing Research Award was presented to Kelly Trecartin, RN, and Nicole Spano-Niedermeier, RN, for their work in the Blake 9 - Cardiac Catheterization lab on “The effects of informal reports of anxiety levels of waiting family members during invasive cardiac procedures.”
 - A total of 40 posters were displayed throughout the Fruit St. campus during Nurse’s Week representing work from original research, research utilization, and performance improvement projects.
- To strengthen staff nurse’s knowledge and skills related to writing research abstracts for poster presentations, the NRC hosted a session of Nursing Grand Rounds to provide guidance for nurses in “Writing Research Poster Abstracts” and “How Do I Know Which IRB Form to Use.”

2. “Did You Know....” Research Utilization Posters

Accomplishments:

- The system for providing the poster boards to clinical areas was redesigned.
- During calendar year 2006, three “*Did You Know...?*” *research utilization* posters were written and produced by the “*Did You Know...?*” Subcommittee. The posters, which are available on the MGH Nursing Research Committee website, include:
 - *PLAN, DO, CHECK, ACT: The Model for performance improvement at MGH*
 - *Decreasing the Risk of Surgical Site Infections - Does your perception of the professional practice environment count?*
 - *Pulmonary Hypertension*

3. Nursing Research Journal Club Subcommittee

Accomplishments:

For the MGH nursing community, the Nursing Research Committee Journal Club continued to provide opportunities for staff nurses to hear nurse researchers present original published nursing research via bi-monthly Journal Club presentations.

- The Subcommittee created a “Mini Journal Club” that has a permanent slot on the agenda of the NRC monthly meeting preceding the Journal Club’s regular session. Embedded in the Mini Journal Club format is a summary and review of the program of research of the Nurse Researcher who is presenting at the Journal Club main session. This format is designed to develop the expertise of subcommittee members in reading, critiquing and presenting research reports.
 - Collected “Web Trends” data 2002 - 2006 which tracks website usage.
 - Worked collaboratively with a Treadwell Librarian and IS to develop a streamlined marketing strategy to facilitate access to presenters’ journal publications and comply with copyright regulations.
 - Expanded the Journal Club marketing to both the online and print versions of *Nursing Spectrum*.
 - The process for selecting journal club presenters was refined.
 - We instituted a slide loop, which is designed as a recruitment tool, for display as attendees assemble for the Journal Club.
 - The Journal Club Subcommittee further engaged in community outreach to five local academic institutions inviting those interested to present their original published research at the Journal Club.
 - We provided links to articles on our website.
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- Carroll, D.L. (2005). Capacity for direct attention in patients undergoing percutaneous coronary intervention: The effects of psychological distress. *Progress in Cardiovascular Nursing*, 20(1), 11-16.
 - Horowitz et al. (2001). Promoting responsiveness between mothers with depressive symptoms and their infants. *Journal of Nursing Scholarship*, 33(4), 323-329.
 - Rawdin, L. (2000). Oncology patients' perceptions of quality nursing care. *Research in Nursing & Health*, 23(3), 179-190.
 - Read, C.Y., Perry, D.J., & Duffy, M.E. (2005). Design and psychometric evaluation of the Psychological Adaptation to Genetic Information Scale. *Journal of Nursing Scholarship*, 37(3):203-8.
 - Mahoney, D.F., Cloutterbuck, J., Neary, S., & Zhan, L. (2005). African American, Chinese, and Latina family caregivers' impressions of the onset and diagnosis of dementia: Cross-cultural similarities and differences. *Gerontologist*. 45(6):783-92.
 - Mahoney, E.K., Trudeau, S.A., Penyack, S.E., & MacLeod, C.E. (2006). Challenges to intervention implementation: Lessons learned in the Bathing Persons with Alzheimer's Disease at Home study. *Nursing Research*, 55(2 Suppl):S10-16.
-
- Developed a database for tracking Journal Club attendance and attendees.
 - A Two-Session Teleconferencing Pilot was conducted to determine the resources needed for remote broadcasting. The pilot was done from Satter Conference Room at 2210 Yawkey to White 13 conference room. The need for funding to support technical personnel was identified as a primary barrier for teleconferencing as a form of expanding Journal Club distribution.

4. Extranet Website

- Extranet Website content and categories were reorganized.
<<http://www.mghnursingresearchcommittee.org/>>

5. Increase in Total Membership

- As a result of the expansion and growth of the NRC initiatives, the total committee membership was increased from 16 to 25 to allow for management of growth and innovation within the subcommittees.

6. Scholarly Publications:

- A writing group was formed to write a scholarly publication about the creation and operation of the Nursing Research Committee. A manuscript entitled, "Massachusetts General Hospital - Nursing Research Committee: Promoting Research Utilization from the Perspective of the PARIHS Framework" was submitted to JONA in October 2006 and is under review.
- Additional articles are planned to showcase various aspects and activities of the committee with the overall goal of developing scholarship among the committee members.

2007 GOALS

Overall, our goal is to carry our agenda forward into the next year—to facilitate member participation and leadership within the sub-groups to promote personal and professional growth, and to prepare future nursing leaders.

1. Expand Nursing Research Day into Nursing Research Week

- a. Host a Research Fair under the Bulfinch Tent on the Friday of National Nurse Recognition Week. The Research Fair will include a Research Consultation Section with MGH Nurse Researchers available to nurses to gain direction with clinical research questions. Representatives from Treadwell Library, Sigma Theta Tau International, Clinical Research Program, the Munn Center, Mallinkrot Unit and several book vendors, who publish nursing research books, will be available.

2. "Did You Know...." Research Utilization Posters

- a. Create an online system to award nursing contact hours to those reviewing the "Did You Know..." research utilization posters on the Nursing Research Committee website.
- b. Publish 6 DYK Posters
- c. Write the DNS footprint of a DYK poster.
- d. Revise the "Instructions to the Author - Guidelines for Creating A DYK Poster.
- e. Consider ways to measure DYK poster effectiveness.

3. Nursing Research Committee Journal Club

- a. Publish a methods paper on the Journal Club
- b. Analyze and interpret the WEB TRENDS data which tracks web page use.
- c. Formalize the structure of the Mini Journal Club presentations.
- d. Evaluate effectiveness of the Mini Journal Clubs.
- e. Develop a research proposal to measure the impact of the Journal Club on staff nurse practice utilizing focus groups.
- f. Broaden the circle of reach of the Journal Club.

4. Continue to update and revise the Extranet Web Page

**Patient Care Services Patient Education Committee
Annual Report 2006**

Description of Committee:

The goal of the Patient Education Committee is to support clinical staff in developing their role in patient education activities that reflects the diverse patient population served. The committee supports these activities through stimulating, facilitating and generating knowledge of Patient Education materials, programs and systems that will improve patient care and enhance the environment in which clinicians shape their practice.

Charges:

- ◆ Develop strategies to assist healthcare providers in patient education design and implementation.
- ◆ Encourage joint projects between other Collaborative Governance Committees
- ◆ Disseminate patient education information and activities to the larger MGH community.
- ◆ Collaborate with Center for Professional Development to develop patient education programs to benefit PCS staff
- ◆ Participate in JCAHO task force to promote interdisciplinary education tools.
- ◆ Recommend systems and technology to support the cataloging, dissemination, documentation and evaluation of patient education activities and materials.
- ◆ Assure activities and materials reflect diversity of the population served.

Meeting Schedule: 2nd and 4th Wednesday of each month from 1:30 pm to 3:00 pm

Co-Chairs:

Audrey Kurash Cohen, SLP
Kathleen Reilly Lopez, RN

Speech Language Pathologist
Staff Nurse, White 7 & Ellison 7, General Surgery

Coach:

Taryn Pittman, RN

Patient Education Specialist/Manager, Blum Patient
& Family Learning Center

Members:

Carolyn Bartlett, RN
Cheryl Brunelle, PT
Diana Darby, RN
Claire Farrell, RN
Mary Margaret Finley, RN
Judy Gullage, RN
Michelle Hazelwood, LICSW
Elizabeth Johnson, RN
Janet King, RN
Donna Lawson, RN
Kathy Reilly Lopez, RN
Carol Mahony, OTR/L
Alexa O'Toole, RN
Jill Pedro, RN
Kristen Samatis

Staff Nurse, SDSU
Clinical Specialist, Physical Therapy
Staff Nurse, White 6, Orthopedics
Staff Nurse, PATA
Staff Nurse, Ellison 13, Obstetrics
Patient Education Nurse, PFLC
Social Worker, Cancer Resource Room
Clinical Nurse Specialist, Ellison 14, Oncology
Staff Nurse, Endoscopy
Staff Nurse, Bigelow 11, General Medicine
Staff Nurse, White 7/Ellison 7, General Surgery
Senior Occupational Therapist
Staff Nurse, Blake 13, Obstetrics
Clinical Nurse Specialist, Ellison 6, Orthopedics
Health Educator, Blum Patient & Family Learning Center

Angela Sorge, RN
Martha Stone
Laura Sumner, RN
Elizabeth P. West, RN
Mary Wyszynski, RN

Staff Nurse, Ellison 11, Cardiac Access Unit
Librarian, Treadwell Library
Clinical Educator, Norman Knight Nursing Center
Staff Nurse, Blake 14, Obstetrics
Staff Nurse, NICU

Recorders:

Kimberly Chelf
Nichole Forrester

Goal:

Increase staff awareness and utilization of patient education television channel by 50%

2006 Accomplishments:

1. Patient Education Resource Fair and Film Fest conducted in July 2006. A hallway display was set up in the White 1 corridor containing samples of patient education resources available to staff. The Blum Patient and Family Learning Center housed the film fest where staff could learn how to operate the television system and preview a patient education video.
2. A comprehensive video title list was made available on-line as well as a brief description of each video and instructions on how to use the patient education television system. Video usage increased from 156 titles viewed in FY05 to 174 titles viewed in FY06 (an increase of about 15%)
3. Gullage, J., Lawson, D. & O'Toole, A. (2006, June 15). The MGH patient education TV channels. *Caring Headlines*, 2006, pp. 4, 13.

Goal:

Participate in preparation for 2006 JCAHO survey

- a. Review and revise "Patient and Family Education" Clinical Policy and Procedure
- b. Review and revise "Patient Education: A Nursing Practice Guideline"
- c. Complete documentation audit of the Interdisciplinary Patient and Family Teaching Record

2006 Accomplishments:

1. "Patient and Family Education" clinical policy and procedure reviewed and revised in March (2006) Revised & Approved: Clinical Policy and Record Committee (12/06/02) (7/14/06) Approved Medical Policy Committee (12/23/02) (7/05/06)
2. Patient Education: A Nursing Practice Guideline" reviewed and revised March 2006. Submitted to Practice committee for review and approval March 06.
3. Documentation audit not conducted. The JCAHO steering committee implemented Tracer Methodology monitoring of patient care units, which included documentation on the Interdisciplinary Patient and Family Teaching Record. The committee did, however, review the form on request of the steering committee and made a recommendation to keep the Teaching Record as part of documentation as it meets all JCAHO standards related to patient education.
4. Sumner L, Brunelle C, and Pittman T, JCAHO and patient education: what you need to know, *Caring Headlines*, 2006, April 8; p:8-9

Goal:

Develop and implement a Patient Education Committee website.

2006 Accomplishments:

1. Web site developed (<http://www.mghpted.org>) and went live in July 2006. The committee presented the new web site at the Sept 5th Combined Leadership meeting with good response. The web site has received 379 unique visits from July through Sept 2006. Content on the website includes:
 - a. Committee description, charges and general information about meeting schedule and members
 - b. Goals and accomplishments
 - c. Patient education policies, clinical practice guideline and competency packet
 - d. Links to patient education electronic resources
 - e. Links to information on how to evaluate a health website for quality information
 - f. Links to plain language (health literacy) information
 - g. A link "contact us" to send an email to the committee with questions or comments.

Goal:

Increase competency of staff in accessing and using electronic patient education resources.

- a. Plan and implement 3 workshops to assist staff in identifying on-line patient education resources
- b. Work with KNCCPD staff to have Patient Education listed as a staff competency for FY07
- c. Hold a hallway display day to promote patient education resources available at MGH.

2006 Accomplishments:

1. Three 2-hour workshops were scheduled in the FND 6 computer workroom for the months of February, May and September 2006. The May workshop was cancelled due to low attendance. The workshops were advertised in the KNCCPD online calendar, Caring Headlines, and emails sent out to unit NM's and CNS. Total attendance for the Feb and Sept workshops was 9 clinicians. Evaluations of the workshops were overwhelmingly positive.

2. A patient education staff nurse competency was developed by the committee and submitted for consideration to the PCS competency taskforce that met in April and May 2006. The competency included learning objectives, the newly revised patient education practice guideline, a listing of electronic patient education resources for nurses to practice accessing, a five question quiz to validate knowledge, and a requirement for staff to access one DrugNote document to submit to the Nurse Manager as well as a sample of their documentation on the Interdisciplinary Patient and Family Teaching Record. The task force did not select the annual competency. The committee then made a presentation at the Sept 5, 2006 Combined Leadership meeting announcing that the competency packet was available on the Patient Education Committee website and could be used as a unit based competency for those who saw value in having their staff demonstrate competence in patient education.

3. A patient education hallway display was held in July 2006. Committee members provided samples of patient education materials and electronic resources. A sample of appropriate documentation was also provided.

Goal:

Communicate and disseminate Patient Education information and activities to the larger MGH community.

- a. Write a quarterly column in Caring Headlines related to patient education projects and initiatives.
- b. Disseminate results of the Patient Education Survey conducted by the committee.

2006 Accomplishments:

1. *Caring Headlines* articles published quarterly and targeted specific committee initiatives including: JCAHO preparation (April 06), MGH patient education TV channel (July 06), patient education practice survey results (Sept 06), The Nov 13th "Essence of Patient Education" workshop (Dec 06)

2. The Patient Education practice survey conducted in the fall of 2005 gave the committee information related to clinical staff's practice around patient education assessment, access to resources, teaching skills, evaluation of teaching, and documentation. The committee disseminated survey results during 2006 through the following venues:

- a. Development of an abstract that was submitted for Nursing Research Day
- b. Creation of a poster highlighting the survey purpose and objectives, implementation, results, written comments, conclusions, and future considerations involving patient education practice at MGH.
- c. King, J., Mahony, C., & West, E. (2006, September 7). Patient education: current practices and future direction. *Caring Headlines*, pp: 4-5.

2007 GOALS

- Implement a marketing plan for the Patient Education Committee website.
- Maintain, update, track and monitor usage of the committee website.
- Write and publish 3 *Caring Headlines* articles reflecting work of the committee.
- Repeat the Patient Education Practice survey and compare survey results with 2005 data.
- Track usage of unit-based Patient Education Competency program within Patient Care Services Nursing Department.
- Develop strategies to bring patient education in-service education to patient care units and allied health departments.
- Enhance committee members' knowledge of patient education theory and practice.
- Develop and implement strategies to involve disciplines outside of nursing in patient education initiatives.

**Patient Care Services Quality Committee
Annual Report 2006**

Description of Committee:

The Patient Care Services Quality Committee is a multidisciplinary committee responsible for identifying opportunities to improve patient care. Members develop knowledge and skill in using the quality improvement process. The committee works closely with the Director of Quality, PCS. The committee co-chairs represent PCS as active members of the PCAC. Members use the quality improvement process to identify high risk and problem prone aspects of care from their clinical settings and from analysis of hospital wide patient incidents. Systems analysis and improvement recommendations are referred to appropriate work groups for action and/or implementation.

Charges:

- Recommend quality activities based on important aspects of care and services (high volume, high risk, problem prone).
- Identify strategies to improve quality.
- Provide an arena to evaluate and disseminate program development regarding quality initiatives not specifically initiated by this committee.
- Provide increased communication and awareness of system improvement programs.
- Review findings and recommend departmental actions related to Department of Quality and Safety evaluations.

Meeting Schedule: 1st and 3rd Tuesdays of the month from 1:00 to 3:00 pm

Co-Chairs:

Karen Lipshires, RN

Patricia Wright, RN

Chemo Coordinator, Yawkey 8 Infusion Center

Staff Nurse, Main Operating Room

Coach:

Lynda Tyer-Viola, RN

Clinical Nurse Specialist, Blake 14, Obstetrics

Advisor:

Joan Fitzmaurice, RN

Director, PCS Quality & Safety

Members:

Jean Bernhardt, RN

Andrea Bonanno, PT

Diane Brindle, RN

Keith Brinkley

Shawna Butler, RN, JD

Jo Ann David-Kasdan, RN

Linda Cutting, RN

Thomas Drake

Monique Gauthier, RN

Sheila Golden-Baker, RN

Susan Gordon, RN

Deborah Jameson, RN

Amy Levine, RN

Margaret Munson, RN

Elena Pittel, RN

Susan Riese, RN

Joseph Roche, RN

Maryalyce Romano, RN

Mary Stacy, RN

Kathleen Tiberii, RN

Carol Upham, RN

Purris Williams

Denise Young, RN

Patricia Zelano, RN

Director, North End Community Health Center

Clinical Specialist, Physical Therapy Services

Staff Nurse, Blake 12, Neuroscience ICU

Operations Coordinator, Ellison 14, Oncology

Staff Nurse, White 10, General Medicine

Research Nurse, General Medicine

Staff Nurse, Hemodialysis Unit

Training Specialist, Knight Nursing Center

Staff Nurse, Bigelow 9, RACU

Clinical Educator, Knight Nursing Center

Staff Nurse, Ellison 9, Cardiac ICU

Librarian, Treadwell Library

Staff Nurse, SDSU

Staff Nurse, IV Therapy Team

Staff Nurse, Blake 13 & 14, Obstetrics

RN Coordinator, Pediatric Oncology

Staff Nurse, SICU

Staff Nurse, Ellison 7, General Surgery

Staff Nurse, PH 22, General Surgery

Staff Nurse, Blake 4, Endoscopy

Staff Nurse, Ellison 19, Thoracic Surgery

Respiratory Therapist, Respiratory Therapy

Clinical Nursing Supervisor, Bigelow 14, CRT

Staff Nurse, PATA

Recorder:
Linda Devaux

Goal: Promote the use of interdisciplinary teams in creating a safe care environment
2006 Accomplishments:

- Collaborated with numerous stakeholders to evaluate the environment of care for opportunities to improve patient safety. Stakeholders and topics include but are not limited to:
 - Office of Patient Advocacy
 - Patient at Risk Task Force
 - Safe Patient Transport: Safe handoffs program
 - Pain Management Program
 - EMAP project
 - MESAC
 - Adverse Drug Reactions
 - Occupational Health Annual Report
 - Patient Identifiers; new ID band implementation
 - CNS role in Wound Care management
 - Infection Control Quarterly Report
 - Blood Transfusion Task Force
 - Biomedical engineering Smart Pumps Project
 - NICHE-Networking to Improve the Care of Health System Elders:65+ Plus vs. +
 - Smoking Cessation Program
 - Floor communicators project
 - Partner's Ergonomics Program
 - RLI don't know what RL stands for web based Incident Reporting System
 - Low dose Chemotherapy Floor Administration task force
 - Performance Indicators: Dashboard quarterly review
 - Web based Environmental Services project roll out
 - Nursing Supervisor Team role review
 - Patient lift project: Implementation of ceiling lifts
 - JCAHO Tracer methodology review
 - Anticoagulation project
 - Work scheduling analysis
 - PAML task force and medication reconciliation
 - Medical Records/Health Information Systems
 - Tracheotomy Care Program
 - Documentation Updates
 - Morse Fall Scale program

- Monthly case presentations by Office of Quality and Safety

The purpose is to review events and recommend to the MGH Patient Care Assessment Committee whether or not the events meet criteria for reporting to the Patient Care Assessment arm of BORM. These criteria include but are not limited to *Death or major or permanent impairment of bodily function that was not ordinarily expected as a result of the patient's condition on presentation*. Case reviews also provide the opportunity to evaluate lessons learned from good practice or omissions. The reporting of events has become more transparent to include case scenarios, discussion of standards of care and potential outcome improvements. Some changes that were implemented related to reviews:

- Examples of practice changes related to case review are:
 - Bed alarm system changes
 - Patient lifts
 - Enhancements to the Falls Precautions Program
 - Collaboration with other Collaborative Governance Committees
 - Nursing Research Committee.: Karen Lipshires, RN and Julie Whelan, Librarian, Prepared "Did You Know Poster" on using Plan Do Check Act as the performance improvement

- Nursing Practice Committee directed review of policies and procedures in response to review of safety reports in collaboration with the Office of Quality and Safety.

Committee members increased visibility and collaboration with numerous task forces.

- Joe Roche, RN, Karen Lipshires, RN, and Mary Alice Romano, RN collaborated with EMR and IBM documentation system evaluation team: EMAP project
- Diane Brindle, RN, collaborated with Patient at Risk Task Force
- Andrea Bonanno, PT and Sheila Golden-Baker, RN, NICHE-Networking to Improve the Care of Health System Elders
- Sue Gordon, RN Patient at Risk Task Force
- Deb Jameson, Librarian, Amy Levine, RN, and Linda Cutting, RN to join Ergonomics Best Practice Committee
- Marianne Killackey, RN RL web based Incident Reporting System
- Sheila Golden-Baker, RN, MESAC chair, Magnet Core Group, Blood Transfusion Task Force.
- Denise Young, RN, Low-dose Chemotherapy Floor Administration Task Force, Magnet Core Group

Goal: Include opportunity for discussion of relevant articles from Quality focused literature

Accomplishments:

- Numerous articles to support discussion were provided and disseminated by Julie Whelan, Librarian and Deb Jameson, Librarian.

GOALS FOR UPCOMING YEAR

Goal:

Work with Collaborative Governance Leadership to create expectations and standards regarding communication of committee activities.

Rationale: To increase awareness and to reach more staff regarding activities and outcomes of committee work, possible solutions, newsletters, posters, bulleted meeting minutes to post.

Goal:

To identify and shape the committee's work in collaboration with the newly designed PCS Office of Quality and Safety to improve patient care and systems, provide action recommendations, and desired outcomes.

Rationale: To create a seamless link with PCS and the MGH Quality Initiative. To provide a service based perspective to the redesign and crafting of our new quality programs.

Goal:

To act as a focus group and to provide feedback to content and design of the Quality and Safety Website.

Rationale: As a reactor group, the committee is able to provide service based knowledge to improve the website content.

Goal:

To continue to review MGH patient safety data for Board of Registration in Medicine reporting in tandem with the Patient Care Assessment Committee.

Rationale:

Evaluation of patient safety data by the multidisciplinary committee allows for reflection on how to ensure safe practice and improve the overall hospital experience.

**Patient Care Services Staff Nurse Advisory Committee
Annual Report 2006**

Description of Committee:

The Patient Care Services Staff Nurse Advisory Committee provides a forum for communication between nursing leadership and clinical nurses at the Massachusetts General Hospital. Committee members representing all patient care units engage in dialogue with nursing leaders about matters of patient care and professional development.

Charges:

- Provide dialogue between chief nurse executive and clinical nurses.
- Dialogue includes matters affecting patient care delivery and clinical and professional development in the Department of Nursing.
- Opportunity is provided for two-way communication.

Meeting Schedule: 1st Tuesday of each month from 11:30 am to 12:30 pm

Membership: Staff nurses representation from each unit

Chair: Jeanette Ives Erickson, RN, MS
Senior Vice President for Patient Care and Chief Nurse

Members:

Dorothy Aiello, RN	Bigelow 9, RACU
Suzanne Algeri, RN	Ellison 10, General Medicine
Kevin Babcock, RN	Emergency Department
Wendylee Baer, RN	White 6, Orthopedics
Immacula Benjamin, RN	Ellison 18, Pediatrics
Kathleen Blais, RN	Blake 2, Infusion Unit
Lynne Bozzi, RN	Blake 14, Labor & Delivery
Maureen Brecken, RN	Post Anesthesia Care Unit
Sheila Brown, RN	Radiology Oncology
Tammy Carnevale, RN	Partners Continuing Care/Rockland
Paul Cella, RN	White 11, General Medicine
Ellen Coccoluto, RN	White 12, Neurology
Darleen Crisileo, RN	Blake 8, Cardiac ICU
Katie Dakin, RN	PH20, General Medicine
Brenda D'Alessandro, RN	Ellison 13, Obstetrics
Tracey Dimaggio, RN	PH 21, General Medicine
Rosemary Doherty, RN	Bigelow 7, GYN
Stephanie Fuller, RN	Ellison 6, Orthopedics
Alice Edmonds, RN	Infertility
Christa Gambon, RN	White 10, General Medicine
Laura Ghiglione, RN	Ellison 14, Hematology/Oncology
Deb Guthrie, RN	IV Therapy
David Hiett, RN	Radiology
Rebecca Johnston, RN	Bigelow 14, Vascular
Linda Kafkas, RN	Cox 1, Oncology Infusion
Megan Knecht, RN	Bigelow 11, General Medicine
Martin Lantieri, RN	Ellison 7, Surgery
Susan Leroux, RN	White 7, Surgery
Jamie Liu, RN	Blake 6, Transplant
Marissa Legare, RN	Blake 6, Transplant
Patricia Lynch, RN	Same Day Surgical Unit
Deborah Lynch-Roden, RN	Rapid Response Team
Terry MacDonald, RN	Blake 10, NICU
Mary Macleod, RN	Ellison 4, SICU

Mary Anne Malloy, RN
 Shean Marley, RN
 Lee McCloskey, RN
 Arlene Meara, RN
 Cynthia Meglio, RN
 Jane Miller, RN
 Denise Morelli, RN
 Hilda Morrison, RN
 Harriet Nugent, RN
 Susan O'Brien, RN
 Norine O'Malley-Simmmler, RN
 Joanne Parhiala, RN
 Amy Pironti, RN
 Bernadette Quigley, RN
 Cynthia Rappa, RN
 Julie Robinson, RN
 Janet Roche, RN
 Karen Rosenblum, RN
 Erin Salisbury, RN
 Brenda Girasella, RN
 Heidi Simpson, RN
 Meg Soriano, RN
 Amie Stone, RN
 Susan Tower, RN
 Billie Jo Watson, RN
 Deborah Zapolski, RN
 Martha McAuliffe, RN

Bigelow 10, Dialysis
 Internal Medicine Associates
 Blake 12, Neuroscience ICU
 Operating Room
 EP Lab
 Yawkey 8, Infusion Unit
 Phillips House 22, Surgery
 PATA
 Blake 14, Labor & Delivery
 Ellison 17, Pediatrics
 Ellison 9, CCU
 Blake 11, Psychiatry
 White 8, General Medicine
 Blake 7, MICU
 Ellison 12, ED Observation Unit
 Ellison 11, General Medicine
 Blake 4, Endoscopy
 Blake 11, Psychiatry
 Ellison 6, Orthopedics
 Ellison 11, General Medicine
 Ellison 3, PICU
 Bigelow 11, General Medicine
 Ellison 19, Thoracic Surgery
 Newborn
 Ellison 16, General Medicine
 White 9, General Medicine
 Ellison 7, General Surgery

Goal

Continue to provide input into, and feedback about, MGH Nursing's recruitment and retention strategies and image campaign.

Accomplishments

- Advertisements in Big Help edition of the *Boston Globe* 9.10.06, Boston Metro, T stations
- Open houses for recruitment of MGH nurses and support staff
- Nursing website enhancement to include a career section citing open positions in the Department of Nursing
- MGH Brand identity initiative
- RN Market adjustment and employee bonus
- Invitation to attend a reception on the USNS Comfort ship, to honor the MGH nurses who served during the time of the tsunami disaster; marked kick-off of Nurse Recognition Week 2006
- Distribution of the four-part *Boston Globe* series, "The Making of an ICU Nurse"
- MGH hosted the Massachusetts Student Nurses Association Annual Convention on 4.1.06
- Highlighted events for Nurse Recognition Week 2006
- Brainstormed ideas for Norman Knight Nursing Center "serenity/rejuvenation" room for MGH nurses (to be housed on Founders 3).

Goal

Identify issues impacting care delivery and/or quality of work life and identify strategies to address them.

2006 Accomplishments

Presentations regarding:

- Ongoing updates re: mandated staffing ratio legislation

- Patients First Initiative – an initiative involving Massachusetts Hospitals to make staffing information transparent.
- Collaborative Governance Evaluation
- Staff Perceptions of the Professional Practice Environment Survey 2006 (administered on-line and paper copy)
- Cbeds (bed tracking system)
- Circles, a complimentary, concierge service offered to MGH nurses
- Parking and shuttle bus services
- Environment of care: update and challenges
- Creating a culture of safety: discussion about work hours/fatigue
- Automated Patient Assessment Tool pilot
- Staff Nurse performance appraisal process

Issues raised included:

- Brakes on new beds are problematic; vendor worked to ensure every bed is operating properly.
- Specimen cups for collecting specimens that require transport on ice were discontinued; Materials Management worked to identify an alternative.
- Need for directional signs to the morgue (installed); additional morgue stretchers have been ordered
- Explore feasibility of providing childcare services for nurses working 12-hour shifts; Human Resources has determined not feasible at this time due to insufficient demand
- Parking garage bull's eye monitors need to be lowered so staff/visitors do not have to get out of their cars to connect with the electronic beam when entering/leaving the garage.
- Explore providing healthier food choices at Coffee Central, e.g. fresh fruit, yogurt, etc.
- On-line policy and procedure manual takes too long to obtain information
- PCA/epidural pumps are being replaced with "smart" pumps.

Goal

Participate in planning for upcoming JCAHO accreditation visit.

Accomplishments:

Presentations re:

- JCAHO "questions and answers" information distributed to membership
- Patient Identification Campaign: Match it, Catch it, and Attach it.
- JCAHO National Safety Goal: Safe Hand-Offs of Patients using SEAM framework (communication that provides overall situation and that comments on every active issue and the management of each issue)
- Quit Smoking Services for MGH patients.
- Tracer methodology

2007 Goals

- Operate as the clearinghouse committee to determine best group(s) and/or individual(s) to address identified issues (e.g. promoting a "green" organization).
- Protect the nurse/clinician relationship with patients and families through promotion of customer service, patient- and family-centered care, and safety initiatives (e.g. use of cell phones by staff while caring for patients and families).
- Identify and provide input into prioritization of educational offerings (e.g. new or enhanced, practice changes, technology, input into web site redesign).
- Serve as a liaison between unit-based colleagues and senior nursing leadership regarding day-to-day clinical and quality of work-life issues.
- Seek clarification as it relates to questions or concerns that the healthcare team raises (e.g. rumor control).

- Shape nursing's image and advertising campaign by providing input into the key processes of design, selection and evaluation.
- Disseminate key information about services that promote work-life balance (e.g. CIRCLES concierge service, back-up childcare).
- Participate in planning for, and communication of key information, for upcoming JCAHO accreditation and Magnet Re-designation reviews.

Collaborative Governance 2006

