



THE NURSES' STATION

Volume 2, Issue 1

January-February 2010

Editor: Maggie Schwarck, MSN, RN
mschwarck@marshmed.com

641-754-5004

NURSING NARRATIVE

Your Image

In the last couple issues of the *Nurses' Station* we have talked about nursing professionalism. We discussed our attire and the fact that we are constantly "on stage". Any time we step in the hospital, we are on stage as we interact with nursing staff, other hospital staff, our patients and families, and being observed by any of the above. Even when we are interacting with them on the phone, we are on stage. Many of us have experienced being representatives of our nursing profession and the hospital as we go about our everyday lives. We encounter patients and family in the grocery store, post office, department store, etc.



La Rae Schelling
MHA, RN, CPHO

Hopefully, when patients and/or their families recognize you outside of the hospital, you are interacting politely with others who are in service industries. If it happens that things do not go well and they are not meeting or exceeding your needs, think before you respond. The critical piece of information here is not to lose control of your emotions. Keeping your voice low means others have to pay careful attention to hear you. Typically, they will also keep their voices low when you do. It is very important not to appear angry or swear at them. The individual you are talking to will believe you are angry at them when you may be referring to the

situation/circumstance. I don't think any of you would react in that manner, however, it is very important to discuss. When you calmly express your concern, most service industries will try to please you by reducing your bill, giving you something free, or asking if you would like to discuss the incident with their supervisor. So, take charge of yourself!!

- Decide what is acceptable behavior from yourself as a professional.
- When you are on and off duty, be proud of what you say, do, and elect not to do.
- Introduce yourself as a nurse.
- Do mirror checks before you walk out of the door. Are you proud of what you see or are you just comfortable?
- Recognize the value of what you bring to the healthcare system.
- Validate your work through the documentation system.
- Work on your communication style and ask for feedback to ensure you are leaving a positive reflection. *Points from Our Image. Our Choice by Shelly Cohen, RN, BS, CEN*

As we have said so often, perception is reality to our patients, family, and friends. People believe what they see and hear. They need to see and hear more of the greatness of nursing!! Reshaping our image by working on some of the above will affect what the public sees, hears, and believes about the nursing profession and our nurses here at MMSC.

NURSING NEWS

MARSHALLTOWN MEDICAL & SURGICAL CENTER

3 South 4th Avenue
Marshalltown, IA 50158

Our Nursing Division now has a page on the MMSC website at: everydaychampions.org

It is located under the "Careers" tab on the website home page. There you will find links to: **Leadership, Professional Development, and Clinical Learning.**

BE SURE AND CHECK IT OUT!

WHAT'S NEW?

A Preceptor Display Board on 2nd Floor Near Elevator A



If you would like to recognize a colleague, highlight activities on your unit, provide a special interest story, or have suggestions for upcoming issues, please send to the Education Department, or call 754-5004, or send to: mschwarck@marshmed.com

SPECIAL POPULATIONS: Caring for Patients with Autism

MAKING ROUNDS

You may encounter children with autism in a variety of health care settings at MMSC. It is vital that you understand the various behaviors and symptoms of this disorder and learn how to help children and their families get the best possible care.

Approaches to the child's care should be tailored to his/her individual specific needs. If possible, try to interview the child's parents or caregiver prior to assessing the child. Learn what the child likes and dislikes and what will help keep him calm. Understand that interruptions in the child's daily routines are very stressful.

Try to limit the number of health care workers the child encounters at one time. Watch the environment you bring him/her into because too much sensory stimuli can exacerbate symptoms and prompt tantrums. Try to maintain a quiet, calming environment that's free of excess equipment, lighting, and clutter. If child is waiting to be seen, allow the child and family immediate access to a quiet area or exam room to avoid having to wait where other people, noises, smells, etc. can further irritate the child.

When performing procedures, explain in simple terms exactly what you're going to do with as few words as possible. Children with autism are visual thinkers, so demonstrating what you're about to do beforehand is helpful. Have patience and give the child time to process what you're telling him. Attempt to distract him during procedures and always provide positive reinforcement. Avoid frequently saying "no" because this can sometimes lead to tantrums and aggressive behavior. Telling the child what to do rather than what *not* to do may be a better approach.

A high priority when caring for a child with autism is maintaining his safety. Children with autism are at higher risk for injury due to impulsive behavior, disorganized motor skills, frequent tantrums, and altered sensitivity to pain. Provide a safe environment to prevent accidents and injuries.

For additional assistance, a notebook with visual aids is located at the ER nurses' station. These visual supports help to communicate choices, give directions, and explain procedures.

Lippincott's Nursing Center.Com



Examples of visual aids/ supports:

- ☺ Photographs
- ☺ Food Labels
- ☺ Written Words
- ☺ Objects
- ☺ Picture Symbols



THE SCOPE

WHY JOIN PROFESSIONAL ORGANIZATIONS?

Membership in a professional nursing organization can benefit you by providing personal as well as professional growth. Here are some of the ways organizational involvement can make a difference.

Networking

It is an excellent way to make contacts that may lead to new opportunities. Meeting nurses from other healthcare organizations can help provide peer perspectives by communicating with nurses familiar with the work that you do everyday.

Education

Involvement can provide excellent opportunities for low-cost or free education. Members either attend free or at a discounted rate. Informal education can take place at any chapter meeting.

Leadership

Professional organizations can offer opportunities to take leadership roles in a mentored environment. Most chapters have nurses with all levels of experience and expertise.

Information Sharing

Finding answers to questions about a policy or practice is another good reason to be involved in a professional organization. These groups provide evidence-based research or practice standards that can provide the appropriate justification for introducing a new idea on your unit. One colleague begins sharing something from his or her job and, before long, the conversation evolves into a learning session.

Continued on Page 3

Professional Organizations (From Page 2) Scholarships

Many chapters offer scholarships and grants to fund continuing education. This money, which can be substantial, is usually restricted to use by members only.

Friendships

Many consider friendships to be the most beneficial aspect of belonging to a professional organization. Professional organizations can be rejuvenating. Many colleagues share ideas about how to deal with difficult

patients or families. Others figure out how to challenge a situation and create a win for everyone because of conversation and suggestions at a chapter meeting.

For a list of nursing organizations go to: <http://www.nurse.org/orgs.shtml>



UTILIZATION REVIEW DEPARTMENT

Director: Nancy Johnston

Nurse Reviewers: Paul Van Ryswyk and Cristi Pfantz

UR Physician Advisor: Dr. Joe Pollpeter

Nancy has been with the hospital for 30 years, starting her nursing career here in 1979. She is the Director of Utilization Review, Patient and Family Services, and is the Patient Advocate for MMSC. Paul and Cristi are both BSN graduates of Grand View University in Des Moines. Together they've had a wide range of clinical experiences and have backgrounds as nurse educators. Paul most recently worked in the Information Technology Department at Mercy Medical Center in Des Moines. Cristi will start her tenth year at MMSC, and still works part-time for MCC/IVCCD.

Paul and Cristi have numerous duties. Their priority is to conduct a review on every patient that is hospitalized, to check for the clinical indications for Inpatient or Outpatient status. Outpatient includes Outpatient Surgery, Extended Outpatient and Observation. They work closely with the UR Physician Advisor on status determinations as appropriate.

Observation patients are followed very closely. It is ideal to make a decision at 24 hours if the patient is clinically stable for discharge, needs additional observation time, or medical necessity for admission has been determined. A patient's observation time should not exceed 48 hours. The doctor must have the medical necessity to convert a patient to an Inpatient level of care. Observation is not a substitute for an appropriate inpatient admission.

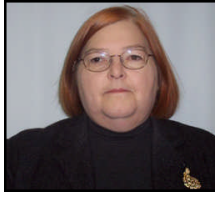
Medicare and Insurance companies pay for those services that are medically necessary and provided at the right level of care. UR sends in clinical reviews on patients as requested by the insurance companies. They perform chart reviews and appeal denials as appropriate. Utilization staff monitors inpatient length of stay with a review of the patient's optimal recovery course, physician orders, and progress notes. Each month they report on length of stay, # of discharges, readmissions, 1-day stays, avoidable days, registration changes, and outliers. They also publish a UR Newsletter. Paul and Cristi attend numerous meetings throughout the hospital with the goal of understanding how each department operates to facilitate the communication and teamwork throughout the hospital.

With your help, the department has quite a list of accomplishments thus far, and plan on adding more in the future. Please assist us with monitoring and appropriately decreasing the length of stay. Discharge planning starts with the patient's admission. If you say to yourself "Why is this patient still here?", it's time to move ahead with the discharge plans. It is very important to discharge or transition patients to a lower level of care, who are medically stable, meet the clinical indications for discharge, and no longer require a hospital level of service.

Please call us if we can assist you in any way. The UR Department is staffed 7 days a week with call 24/7; at 641-844-2973 (3445).

Welcome!

Marcia Rose has joined the Performance Improvement/Patient Safety Department as the Administrative Director. She is an Iowa native and comes to MMSC after most recently working in South Carolina. Marcia has vast experience and expertise in the area of Quality Management, Medical Staff Services, Infection Control and Patient Safety. Marcia received her MBA and BS in Pharmacy from the University of Iowa. She is also Six Sigma Black Belt Certified.



Please help welcome Marcia to Marshalltown and MMSC.

THE CLIP BOARD

“Honor nursing as the spirit-filled practice that it is. Use whatever presents itself, including the dark and difficult times, as lessons for growth. At the end of the day ~ offer gratitude for all.”

*~Jean Watson, PhD, RN~
Nursing Theorist*

YOUR 2010 SHARED GOVERNANCE COUNCIL MEMBERS

PEER REVIEW	PROFESSIONAL PRACTICE	QI/ED
Erin Propp (M/S/T/P) Chair	LeEtte Lane (OR) Chair	Jeanette Perdue (OR) Chair
Linda Cooper (ICU)	Kathy Stackhouse (SCC)	Amy Wilkening (ICU)
Andrea Petermeier (OR)	Sue Grieder (ER)	Connie Waterman (ER)
Susan Schill (ER)	Cassidy Simms (M/S/T/P)	Bobbi Brandenburg (WCC)
Kristy Rowley (WCC)	LeAnn Day (WCC)	Brianna Behrens (M/S/T/P)
Maggie Schwarck (Leadership Liaison)	JoAnn Katzer (ICU/Leadership Liaison)	Danielle Messick (SCC)
		Marge Huff (Leadership Liaison)

CHART REVIEW

Shared Governance and Your Nursing Practice by QI/Ed Council

Participation in nursing Shared Governance at MMSC enhances job performance and increases job satisfaction. It is an organizational structure in which our nurses contribute collectively to the decision-making process related to the standards and quality of care in their nursing practice. It empowers our nurses to use their clinical knowledge and expertise while collaborating among units and departments. At MMSC, there are 3 shared governance councils:

Professional Practice: The primary function of this council is reviewing and revising clinical policies and procedures and standards of care. Evidence-based nursing practice guides this process.

QI/ED: This council is responsible for monitoring the quality of care provided to patients. This is achieved by monitoring regulatory standards and quality indicators on a unit-by-unit basis. This council also focuses on educating patients and staff. Various methods are used to determine need and provide education at both the unit and hospital levels.

Peer Review: This council is involved in nursing orientation through the competency assessment process and preceptor support. They are responsible for the Special Recognition Program and assist with nurse recruitment/retention.

Each member of the nursing staff is responsible to participate in the governance system by seeking information, providing input, and communicating their perspective. Ask your unit director how you can become involved in Shared Governance at MMSC.