

Northland Pioneer College  
Nursing Programs

NPC/Summit Advisory Meeting Minutes  
May 8, 2009

Participants: Jayne Simms, Director Medical Surgical Nursing  
Dianne Anderson, Assistant Director, Medical Surgical Nursing  
Fredda Kermes, Director of Staff Development  
Carolyn Jacobs, Director of Performance Improvement  
Debi Watt, Director of Home Health  
Carol Stewart, Nursing Faculty  
Penny Weiermann, Adjunct Faculty  
Susan Jamison, Instructional Specialist  
Orina Hodgson, Nursing Faculty  
Ruth Zimmerman, Nursing Faculty  
Debra McGinty, Dean of Nursing and Allied Health

I. Introductions

Debi Watt indicated there are capstone openings in home health for the coming year. Orina indicated she would take note and share that option with next year's students.

II. Preceptor Discussion: Deb McGinty

Deb has a list of staff who have precepted students in the clinical area during the semester. She is interested to know how many of these nursing staff have completed the preceptorship training at Summit. Fredda indicated the training was written by Dianne. Ruth indicated she has a difficult time discerning which nurses have received this training. Dianne pointed out preceptor who have been trained have a red tag on their name tag. Fredda explained that preceptors are bright, energetic, competent nurses who have excellent communication skills. To attend the workshop, nurses acquire their department director's permission.

Decision:

Deb will send list to Dianne Anderson to determine how many nurses have completed the training. Dianne will share a list of nurses who have completed the course with faculty. Dianne will give a copy of the handbook with Deb. Fredda will share the workshop packet with Deb.

III. Training Opportunities

Deb asked if Ken Allen could provide the students and faculty with an update regarding HIPAA requirements at the coming orientation in August. Carolyn Jacobs thought that was indeed possible and would be welcomed by the agency.

Decision:

Deb will invite Ken to present at the August Orientation.  
Deb will send Fredda the fall schedule.

III. Fall 2009 Hospital Orientation for 1<sup>st</sup> year students and untrained 2<sup>nd</sup> year students. There was a great deal of interest in setting up the orientation well ahead of clinical attendance. Meeting with different departmental directors would be helpful to orient them to what's important on the units.

Additional topics to be included in the student nurse orientation recommended by the advisory board included: HIPAA, equipment operation, i.e., beds, safety precautions/practices, infection control, IV equipment, sequential compression devices, computer programs/systems, monitors, vital sign equipment, medication and electronic health records. Susan asked if faculty could acquire training demonstrations for our computer lab so students could be oriented prior to coming to Summit.

Decision: Fredda will check with Renee to determine if training materials are available to students at NPC prior to their attendance at the hospital.

#### IV. Patient Safety

Fredda explained the purpose of [Institute for Health Care Improvement](#) which offers free online training to create a new generation of nurses. Fredda is a coach for this training. The [home page](#) for the Open School offers a link to [Open School videos](#). Quality [Improvement and Patient Safety](#) courses are outlined. New, [future courses](#) are in the planning phase.

Carolyn indicated new nurses haven't the sense their license is "on the line". There is a sense of minimal accountability. Older nurses have difficulty adopting new behaviors.

Decision:

Deb and Orina will participate in the online course this summer to pilot for student use in the coming academic year.

Carol will share information in the fall about the patient safety conference she attended this Spring.

#### V. Student experiences for low census days – Carol Stewart

Carol shared her ideas for times when there is low census. A brainstorming session ensued with the following ideas contributed:

1. IV/Chemo
2. Home Health
3. Special Procedures with Rebecca Broughton
4. Information technology to enhance understanding of informatic management of care
5. Infection control and employee health to enlarge leadership management
6. Social Services
7. Cardiac Rehabilitation if students have more flexibility in terms of time
8. Attendance at the Patient Advisory Council held one evening monthly which focuses on patient and family centered care.

Jayne felt that while there is active involvement and participation of faculty at the bedside with students, there never seems to be enough hands-on experience and clinical exposure.

She recommended working with the Health Unit Coordinator to increase critical thinking skills by classifying diagnoses and critically thinking/evaluating treatments and medications. Jayne recommended students might examine core measures, identifying nursing pieces for critical review of documentation, increasing their attention to detail and self-evident direction to identify critical point in documentation.

Dianne Anderson recommended the Phillips program online which present telemetry equipment regarding how to do measurements and print strips. Resources are available in the learning lounges.

Faculty spoke of the need to develop “up your sleeve” activities to increase competency and provide opportunities for practice, i.e., sim lab.

Jayne explained nurse staffing changes will continue secondary to challenges in management.

Fredda explained the sim lab provides hands on experience in a safe environment and is being more frequently. Students and faculty can use the space to problem solve in technique and practice providing analysis of procedures. Critical thinking skills can be developed in patient assessment and evaluating patient outcomes. Fredda felt relationships with pharmacists are important to nurses and student time spent in pharmacy prove beneficial. Fredda proposed student projects to address specific evidence-based practices could influence policy development and enhance operations, providing an opportunity for everyone to learn from. Orina added projects need to be leveled appropriately toward the student’s education and preparation.

There was discussion regarding how nurses seem to have little investiture in the organization and function as contributing members of the healthcare team. Staff are expected to participate in inservices. Susan suggested students participate in the November competency fair.

#### Decision:

Faculty will share clinical objectives with clinical leaders so nurses have ideas for activities for students.

Students may attend staff meetings and take advantage of Summit inservices.

#### VI. H1N1 Pandemic plans – Fredda Kermes

A rebound is projected for fall raising issues regarding quarantine policies if students are on a unit, they may miss class. NPC will follow its [Communicable Disease Policy](#)

#### VII. Round Table

Jayne explained externship plans would normally have been underway 4 weeks previously, but it’s too soon to tell what will happen with that program. While the program is mutually beneficial, it is expensive. Proposals have included reducing the number of students. She is recommending students go ahead and test, the exposure to the NCLEX is an benefit regardless of what happens with the program.

Debi Watt enthusiastically invited students to the Home Health meeting on Tuesdays. There are 4 nurses on staff/day assigned to extremely high acuity patient experiences. Monday blood draws, i.e., vancomycin troughs.

Carolyn explained opportunities for education in patient safety could benefit student development.

Fredda invited faculty to participate in:

Wound fairs throughout the year, a 3-hour block.

Pediatric Competency week will be held August 24<sup>th</sup>

Faculty can contact Fredda for more information regarding education activities at Summit that could accommodate students.

## Institute for Healthcare Improvement Course Offerings

Six online courses in the areas of quality improvement and patient safety. Each takes roughly an hour to complete and consists of several lessons taking 15-20 minutes each.

<p style="text-align: center;"><b><u>Quality Improvement</u></b></p> <p style="text-align: center;"><i>Chairs: Lloyd Provost, MS Associates in Process Improvement</i></p> <p style="text-align: center;"><i>Brent James, MD, MStat Vice President, Intermountain Health Care</i></p>	<p style="text-align: center;"><b><u>Patient Safety</u></b></p> <p style="text-align: center;"><i>Chair: Lucian Leape, MD Adjunct Professor of Health Policy Department of Health Policy and Management Harvard School of Public Health</i></p>
<p><b><u>QI 101: Fundamentals of Improvement</u></b></p> <ul style="list-style-type: none"> <li>• Lesson 1: Errors Can Happen Anywhere — and to Anyone</li> <li>• Lesson 2: Health Care Today</li> <li>• Lesson 3: The Institute of Medicine’s Aims for Improvement</li> <li>• Lesson 4: How to Get from Here to There: Changing Systems</li> </ul> <p><b>Faculty Authors:</b> Sandy Murray, MS, Improvement Advisor, CT Concepts Lloyd Provost, MS, Statistician, Associates in Process Improvement Robert Lloyd, PhD, Executive Director of Performance Improvement, Institute for Healthcare Improvement</p> <p><b>Editors:</b> Deepa Ranganathan, Institute for Healthcare Improvement Jane Roessner, PhD, Institute for Healthcare Improvement</p> <p><b>Reviewer:</b> Jonathan Finkelstein, MD, MPH, Associate Professor, Harvard Medical School and Harvard Pilgrim Health Care</p>	<p><b><u>PS 101: Fundamentals of Patient Safety</u></b></p> <ul style="list-style-type: none"> <li>• Lesson 1: To Err Is Human</li> <li>• Lesson 2: Responding to Error</li> <li>• Lesson 3: Identifying and Reporting Errors</li> <li>• Lesson 4: Error vs. Harm</li> </ul> <p><b>Faculty Author:</b> Frances A. Griffin, RRT, MPA, Director, Institute for Healthcare Improvement</p> <p><b>Editor:</b> Kathleen B. Vega</p> <p><b>Reviewers:</b> Lucian Leape, MD, Adjunct Professor of Health Policy Department of Health Policy and Management Harvard School of Public Health Carol Haraden, PhD, Vice President, Institute for Healthcare Improvement Frank A. Federico, RPh, Director, Institute for Healthcare Improvement Michael Leonard, MD, Physician Leader for Patient Safety, Kaiser Permanente</p>
<p><b><u>QI 102: The Model for Improvement: Your Engine for Change</u></b></p> <ul style="list-style-type: none"> <li>• Lesson 1: An Overview of the Model for Improvement</li> <li>• Lesson 2: Setting an Aim</li> <li>• Lesson 3: Measuring</li> <li>• Lesson 4: Developing Changes</li> <li>• Lesson 5: Testing Changes</li> </ul> <p><b>Faculty Authors:</b> Sandy Murray, MS, Improvement Advisor, CT Concepts Lloyd Provost, MS, Statistician, Associates in Process Improvement Robert Lloyd, PhD, Executive Director of Performance Improvement, Institute for Healthcare</p>	<p><b><u>PS 102: Human Factors and Safety</u></b></p> <ul style="list-style-type: none"> <li>• Lesson 1: Understanding the Science of Human Factors?</li> <li>• Lesson 2: Changes Based on Human Factors Design Principles</li> <li>• Lesson 3: Using Technology to Mitigate the Impact of Error</li> </ul> <p><b>Faculty Author:</b> Frank A. Federico, RPh, Director, Institute for Healthcare Improvement</p> <p><b>Editor:</b> Kathleen B. Vega</p> <p><b>Reviewers:</b> Lucian Leape, MD, Adjunct Professor of Health Policy Department of Health Policy and Management Harvard School of Public Health</p>

<p>Improvement</p> <p><b>Editors:</b> Deepa Ranganathan, Institute for Healthcare Improvement Jane Roessner, PhD, Institute for Healthcare Improvement</p> <p><b>Reviewer:</b> Jonathan Finkelstein, MD, MPH, Associate Professor, Harvard Medical School and Harvard Pilgrim Health Care</p>	<p>Carol Haraden, PhD, Vice President, Institute for Healthcare Improvement Frances A. Griffin, RRT, MPA, Director, Institute for Healthcare Improvement Michael Leonard, MD, Physician Leader for Patient Safety, Kaiser Permanente</p>
<p><b><u>QI 103: Measuring for Improvement</u></b></p> <ul style="list-style-type: none"> <li>• Lesson 1: Measurement Fundamentals</li> <li>• Lesson 2: Displaying Data</li> <li>• Lesson 3: Learning from Measures</li> </ul> <p><b>Faculty Authors:</b> Sandy Murray, MS, Improvement Advisor, CT Concepts Lloyd Provost, MS, Statistician, Associates in Process Improvement Robert Lloyd, PhD, Executive Director of Performance Improvement, Institute for Healthcare Improvement</p> <p><b>Editors:</b> Deepa Ranganathan, Institute for Healthcare Improvement Jane Roessner, PhD, Institute for Healthcare Improvement</p> <p><b>Reviewer:</b> Jonathan Finkelstein, MD, MPH, Associate Professor, Harvard Medical School and Harvard Pilgrim Health Care</p>	<p><b><u>PS 103: Teamwork and Communication</u></b></p> <ul style="list-style-type: none"> <li>• Lesson 1: Why Are Teamwork and Communication Important?</li> <li>• Lesson 2: Basic Tools and Techniques</li> <li>• Lesson 3: Communication During Times of Transition</li> <li>• Lesson 4: Developing and Executing Effective Plans</li> </ul> <p><b>Faculty Author:</b> Michael Leonard, MD, Physician Leader for Patient Safety, Kaiser Permanente</p> <p><b>Editor:</b> Kathleen B. Vega</p> <p><b>Reviewers:</b> Lucian Leape, MD, Adjunct Professor of Health Policy Department of Health Policy and Management Harvard School of Public Health Carol Haraden, PhD, Vice President, Institute for Healthcare Improvement Frank A. Federico, RPh, Director, Institute for Healthcare Improvement Frances A. Griffin, RRT, MPA, Director, Institute for Healthcare Improvement</p>