Jackson Health System
“An academic health system with a public healthcare mission”

Mission Statement
To build the health of the community by providing a single, high standard of quality care for the residents of Miami-Dade County.

Vision Statement
Our strategic vision is to be a nationally and internationally recognized, world-class academic medical system and to be the provider of choice for quality care.

JHS Values
Commitment
Service Excellence & Quality
Confidentiality
Compassion
Teamwork & Communication
Culture of Inclusion
Respect
Integrity & Stewardship

Philosophy of Nursing
We believe that nursing is a professional discipline, both art and science, that incorporates nursing knowledge, critical thinking and caring. The delivery of care is guided by a single high standard of care for all that is safe, culturally competent and patient- and family-focused. Nursing practice is vital to accomplishing the JHS Mission, Values, Pillars of Success and Standards of Excellence. We believe that each individual is unique and brings abilities and needs to the healthcare milieu. We are committed to relationship-based care that focuses on nurses’ relationships with patients and families, co-workers and self. The nurse-patient relationship is based on genuine care and respect, recognizing the individual’s values, developmental stage, disabilities, sexual orientation, nationality, religious and cultural beliefs.

Our goal for nursing at Jackson Health System is to provide excellent care whereby all nurses are encouraged to realize their best potential as professionals. Excellence in patient care is fostered by providing nurses with orientation, mentoring, resources, continuing education, and advancement opportunities. Our nursing practice is evidence-based and one of collaboration with other healthcare professionals, educational institutions, healthcare advocates and organizations at local, regional, state, national, and international levels. We promote collaboration that brings together clinical practice, administration, education, and research.

Nursing Vision
JHS nurses are global leaders committed to excellence in providing specialized world class care through innovation, collaboration, and evidence-based practice.
Dear Jackson Nursing Family,

When I became Jackson Health System’s president and CEO, I knew I was taking on the biggest challenge of my professional life. I said then — and I still say it now — that Jackson’s challenges are business-related. There is no question that the medical care is among the best in the world.

You are a major part of the reason why. Jackson nurses are the best nurses in South Florida. And I say that with great certainty.

I have seen many of you hard at work, but I know from personal experience just how talented you are. In 1978, my son was born prematurely at Jackson Memorial Hospital. He weighed just over a pound and was given a 1 percent chance of survival. He spent months in the NICU, where a team of medical professionals never gave up on him. They cared for him, nursed him to health and treated him like their own. This year, he got married.

My son is one of your success stories, one of the lives you saved. My family and I are forever grateful to Jackson. There are countless others who feel the same way.

Over the past few years, Jackson has had its share of challenges. Still, the medical care provided at our facilities continues to be second to none — and we have proof.

This year, for the second consecutive time, U.S. News and World Report ranked the University of Miami/Jackson Memorial Medical Center the top hospital in Miami/Fort Lauderdale. This achievement is a testament to the outstanding work done in our facilities. And you, our exceptional nurses, are key to that success.

Each and every day, around the clock, you are the ones patients call on for help. You are Jackson’s ambassadors in delivering the compassionate care that our health system is known for. I know that it is not always easy to maintain a positive outlook when there has been so much uncertainty about Jackson’s future. But we are all fully committed to turning Jackson Health System into a thriving network of programs that continue our mission of providing a single, high quality standard of care in Miami-Dade County.

Your expertise will lead us there.

I commend you for your dedication, passion and loyalty to this great institution. I am proud to call you my colleagues.

Sincerely,

Carlos A. Migoya
President and CEO
Jackson Health System
Welcome Messages

Dear Nursing Colleagues,

When I joined Jackson Health System’s nursing team as an O.R. staff nurse in 1991, I never thought I would one day be writing this note of welcome to our annual nursing excellence report as your chief nursing executive. Looking back on those 20 years and forward to our future, I can think of no greater honor or responsibility than serving you in this capacity. Every day I work to earn the most important part of my title— not “chief” or “executive,” but “nurse.”

The practice of professional nursing at Jackson is organized through four distinct and purposefully chosen frameworks:

1. Our nursing theory: Madeleine Leininger’s Culture Care: Diversity and Universality Theory;
2. Our professional practice framework: Relationship-Based Care;
3. Our care delivery model: Group Practice; and
4. Our shared governance structure, expressed through our unit and professional practice councils.

Jackson nurses are a critical part of a team that serves one of our community’s most noble missions: “To build the health of the community by providing a single, high standard of quality care to the residents of Miami-Dade County.” Each and every day, registered professional nurses fulfill this mission through their nursing practice. We see thousands of patients every week, never forgetting the impact we have on each one as an individual.

We are more than 3,000 registered nurses working in a variety of environments: an academic medical center, regional hospitals, primary care centers, medical nursing homes, mental health facilities, and correctional and school health programs. Together, we are the largest single professional work force in the system. Our daily interactions with our patients, their families, our medical staff, and our colleagues shape the way Jackson is seen across our campuses, our community and the country.

We are Jackson, where nurses care and relationships matter.

In this combined 2010/2011 annual nursing excellence report, you will find representative examples of Jackson nurses at their very best. I’m proud to be a nurse. I’m proud to be a Jackson nurse. I’m proud of you.

Warmly,

Ric Cuming, RN, MSN, EdD, NEA-BC
Senior Vice President and Chief Nursing Executive
Jackson Health System
Welcome Messages

To All JHS Unit Practice Council Members:

Jackson Health System has given us the necessary tools to build a foundation to improve our practice environment and patient care outcomes through our nursing vision related to the pillars of excellence. Our motto, “Putting all the pieces together,” exemplifies how we achieve our goals with collaboration with all stakeholders.

By using the Rosswurm-Larrabee Model, we are able to use evidence-based research to implement and maintain a change in practice. Making a change starts at the forefront. Our UPC Charter philosophy states that, “We believe that those who are closest to patient care are the best participants in how to improve healthcare outcomes and the practice environment.” As we continue on our journey to excellence, be the best you can be and show our communities that Jackson Health System is here to make a difference and to provide excellent service.

Thank you,
Michelle Tossona, RN, LNC
Jackson North Medical Center
Chair of the Shared Governance Coordinating Council

Esteemed Jackson Nurses:

Our greatest cultural traditions teach us that health is a product of both body and spirit. Your work at Jackson embraces that tradition, makes it a part of our daily work and carries it into our future. On behalf of my colleagues on the Public Health Trust Financial Recovery Board, thank you for continuing your tireless pursuit of academic achievement, clinical excellence and - most importantly - compassionate patient care.

Marcos José Lapciuc
Chairman, Public Health Trust Financial Recovery Board
Chief Nursing Officers

“The organization’s senior leadership team creates the vision for the future, and the environment necessary to operationalize that vision. They must enlighten the organization as to why change is necessary, and communicate each department’s plan in achieving that change” (ANCC, 2008).

Chief Nursing Executive & Senior Vice President

President and CEO of Jackson Health System Carlos Migoya announced that Ric Cuming, RN, MSN, EdD, NEA-BC, was named Senior Vice President and Chief Nursing Executive of Jackson Health System.

Dr. Cuming has worked at JHS for a total of 11 years, and has been a tremendous asset to the leadership team. Most recently, he served as Chief Administrative Officer of Jackson South Community Hospital, where he led the hospital through a great transformation, including the construction of a new hospital tower, expansions and major renovations of the facility.

Dr. Cuming began his career at Jackson Memorial Hospital in 1991 as a staff nurse on the open-heart surgery team, a position he held for three years. Following a nine-year hiatus, he returned to Jackson as Associate Director of Perioperative Services, was quickly promoted to Director of Perioperative Services and then served as Chief Nursing Officer of Jackson Memorial Hospital.

Dr. Cuming is experienced, knowledgeable and extremely dedicated to Jackson and to nursing—all qualities that will undoubtedly be instrumental in making him successful in his new role.
It is relatively easy to lead people where they want to go; the transformational leader must lead people where they need to be in order to meet the demands of the future. This requires vision, influence, clinical knowledge and a strong expertise relating to professional nursing practice. It also acknowledges that transformation may create turbulence and involve atypical approaches to solutions.

They must listen, challenge, influence and affirm as the organization makes its way into the future. Gradually, this transformational way of thinking should take root in the organization and become even stronger as other leaders adapt to this way of thinking.
Nursing Leadership at JHS

Nurses Appointed to New Leadership Positions at JHS

**Jackson South Community Hospital Chief Administrative Officer**

After an extensive search for the next leader of Jackson South Community Hospital, veteran healthcare executive Martha Y. Garcia, RN, MSN, MBA, was hired as the Chief Administrative Officer.

Ms. Garcia is a proven leader in hospital operations and business development. She has worked at several hospitals in our community, most recently as the Chief Operating Officer at Kendall Regional Medical Center. Under her leadership, that hospital launched a successful initiative that doubled patient satisfaction scores. Martha Garcia also served as the Chief Executive Officer of Memorial Hospital Pembroke, part of the Memorial Healthcare System in Broward County. There, she increased outpatient volumes by developing new programs, recruiting high-quality physicians and completing more than $20 million in capital improvements.

Ms. Garcia began her career as a staff nurse in the intensive care unit at Saint Francis Hospital in Miami Beach. She then moved to Hialeah Hospital to be the director of nursing service. After receiving a Bachelor of Science degree in nursing from Barry University, Ms. Garcia earned both her MBA and MSN from the University of Miami.

Her experience as a frontline medical professional, combined with the skills she has acquired as a seasoned healthcare executive, will help Jackson South continue to grow and flourish in Miami-Dade County.

**Jackson Memorial Hospital Chief Nursing Officer**

Mara B. Rosalsky, RN, MSN, BS, was appointed as the Jackson Memorial Chief Nursing Officer. Mara is a healthcare executive with more than 15 years of successful hospital, clinical and administrative experience inclusive of progressive leadership roles, strong team building and development skills. As a graduate of the Jackson Memorial Hospital School of Nursing, Class of 1996, Mara learned to be a strong advocate for quality patient care and a goal-oriented leader with a commitment to continuous quality improvement and a proven ability to prioritize, analyze, plan, manage and motivate in a complex environment.

For the past two years Mara has championed safe, quality patient care as the director of perioperative services while delivering sound fiscal stewardship netting high patient, physician and staff satisfaction. Mara received her Master of Science in Nursing from University of Phoenix in 2009, and a Bachelor of Science in Biology from Florida International University in 1992.
Shared Governance is the structure that provides nurses and frontline staff with a voice in decision-making in their work area. Shared Governance began with nursing in Jackson Health System because nurses are the largest group of providers at the bedside. It is a leadership style that empowers nurses to have an impact on decision-making for their practice. It is a partnership with the entire health system between those who provide care and those who support it. At the end of 2011, there were 69 UPCs and 9 professional councils in the system.

**Responsibilities**
1. To support the JHS vision, mission, and values
2. To provide the venue for showcasing excellence in nursing and healthcare practice at JHS
3. To involve JHS staff who provide direct patient care in key meetings
4. To tell the JHS story in terms of the significant contributions that JHS caregivers provide on an ongoing basis
5. To recognize extraordinary care
6. To collaborate with JHS departments to support the professional image of nursing

** Shared Governance Model**

*Councils to be established*
The Unit Practice Council (UPC) is how shared governance is expressed and organized at the unit level. UPCs comprise direct care staff from all caregiver roles. They are either elected by their peers or are volunteers on the council. They meet regularly, either monthly or bimonthly, to assess, plan, implement and evaluate projects related to practice, quality or care provided and staff/patient education. In essence, the work of the UPC is about improving the practice environment and it is based on evidence. The evidence may be unit-generated from data collection and/or enhanced from best practices in peer-reviewed literature or other facilities like ours. Even though managers are not UPC members, UPCs cannot be successful without them. Having examined how shared governance is practiced in other organizations, in September 2011, the Center for Nursing Excellence embraced the practice of having managers facilitate their own UPCs, steering away from the outside facilitator philosophy as a way of making shared governance at Jackson more tangible at the frontline.

The Shared Governance Coordinating Council (SGCC) meeting is the shared governance forum where Unit Practice Council members share outstanding nursing improvement project outcomes. These outcomes demonstrate how unit staff improve nursing practice to make a difference for patients and families.

**On March 3, 2010, the first Shared Governance Coordinating Council meeting for 2010 was held.** More than 100 staff members from the Jackson Memorial Hospital, Jackson North Medical Center and Jackson South Community Hospital attended.

Holtz Children's Hospital Newborn Intensive Care Unit Unit Practice Council members Dawn Allen, RN, and Olive McLean, RN, MSN, MSHSA presented their project on the appropriate use of sterile gloves when caring for premature infants. The UPC recognized that even though they were using sterile gloves to handle these neonates, the same babies were lying on clean, not sterile, sheets. The UPC investigated and found evidence that sterile gloves are not always necessary in the care of these small neonates. In fact, literature widely advocates that hand-washing is the most effective method of decreasing hospital-acquired infections. The UPC also researched and compared costs associated with sterile gloves versus clean gloves, and found that sterile gloves cost 99 cents per pair while clean gloves cost 10 cents, almost 10 times less. They were able to accomplish a cost savings between January 2007 and August 2009 of approximately $103,000. We salute the NICU UPC for questioning their practice to ensure that the organization stays current, and that their patients receive care based on the best available evidence while maintaining cost effectiveness.

**Shared Governance Coordinating Council**

The Unit Practice Council (UPC) is how shared governance is expressed and organized at the unit level. UPCs comprise direct care staff from all caregiver roles. They are either elected by their peers or are volunteers on the council. They meet regularly, either monthly or bimonthly, to assess, plan, implement and evaluate projects related to practice, quality or care provided and staff/patient education. In essence, the work of the UPC is about improving the practice environment and it is based on evidence. The evidence may be unit-generated from data collection and/or enhanced from best practices in peer-reviewed literature or other facilities like ours. Even though managers are not UPC members, UPCs cannot be successful without them. Having examined how shared governance is practiced in other organizations, in September 2011, the Center for Nursing Excellence embraced the practice of having managers facilitate their own UPCs, steering away from the outside facilitator philosophy as a way of making shared governance at Jackson more tangible at the frontline.

The Shared Governance Coordinating Council (SGCC) meeting is the shared governance forum where Unit Practice Council members share outstanding nursing improvement project outcomes. These outcomes demonstrate how unit staff improve nursing practice to make a difference for patients and families.

**On March 3, 2010, the first Shared Governance Coordinating Council meeting for 2010 was held.** More than 100 staff members from the Jackson Memorial Hospital, Jackson North Medical Center and Jackson South Community Hospital attended.

Holtz Children’s Hospital Newborn Intensive Care Unit Unit Practice Council members Dawn Allen, RN, and Olive McLean, RN, MSN, MSHSA presented their project on the appropriate use of sterile gloves when caring for premature infants. The UPC recognized that even though they were using sterile gloves to handle these neonates, the same babies were lying on clean, not sterile, sheets. The UPC investigated and found evidence that sterile gloves are not always necessary in the care of these small neonates. In fact, literature widely advocates that hand-washing is the most effective method of decreasing hospital-acquired infections. The UPC also researched and compared costs associated with sterile gloves versus clean gloves, and found that sterile gloves cost 99 cents per pair while clean gloves cost 10 cents, almost 10 times less. They were able to accomplish a cost savings between January 2007 and August 2009 of approximately $103,000. We salute the NICU UPC for questioning their practice to ensure that the organization stays current, and that their patients receive care based on the best available evidence while maintaining cost effectiveness.

**NICU UPC 2010**

**CHAIR:** Resemar Soldevilla-Galves, RN, MSN  
**CO-CHAIR:** Juan Torres, RRT  
**RECORDER:** Dawn Allen, RN, BSN  
**MEMBERS:** Robert Peifer, RN, MA  
Olive McLean, RN, BSN, MSHSA  
**FACILITATOR:** Beverly Fray, RN, MSN, APRN-BC  
**INTERIM NURSE MANAGER:** Olive Fowler, RN, MSN
Shared Governance Coordinating Council

2010 Shared Governance Leadership Award Recipients

1st Quarter
Violet Rhagnanan-Kramer, RN, MSN
Nurse Manager, JMH NSICU

2nd Quarter
Lise Galarneau, RN, BSN
Nurse Manager, JMH West Wing 7

2nd Quarter
Lorna Bartley, RN, LHRM, MHA
Nurse Manager, JMH ER-A

2nd Quarter
Gayon Dunn, ARNP, MSN
Nurse Manager, Jackson North Community Mental Health Center

3rd Quarter
Vanessa Plunkett, RN, MSN-HCA
Nurse Manager, Holtz Pedi ER
Shared Governance Coordinating Council

2010 Highlights of the Shared Governance Coordinating Council Meetings

Holtz Children’s Hospital Leadership Team with NICU UPC members, Olive, Dawn and Beverly Fray, UPC Coordinator

Althea Warrell, RN, Chair of the Shared Governance Coordinating Council 2008-2010 with Ann-Lynn Denker, ARNP, PhD, Director, Center for Nursing Excellence
Shared Governance Coordinating Council

2011 Highlights of the Shared Governance Coordinating Council Meetings

In 2011 the quarterly Shared Governance Coordinating Council (SGCC) meetings soared to higher performance levels focusing on improving quality at the point of care. More than 30 UPCs have been privileged to present at the Shared Governance Coordinating Council meeting attended by executives and staff.

In February 2011, JMH West Wing 11 UPC demonstrated how they prevented pressure ulcers after having “hardwired turning” their patients every two hours, a tried, true and sustainable practice. JNMC Women’s & Children’s UPC also highlighted how they engaged their staff and management to improve patient satisfaction by improving pain management in the postpartum unit.

In May 2011, the SGCC was all about the ER. The JMH ER-B UPC shared with executives and staff how they restructured the Rapid Response Team for efficiency, resulting in significant outcomes for the patient, staff development and flow of care. JMH ER-Triage UPC also highlighted how they improved patient throughput by utilizing evidence-based interventions in the literature and from best practices.
2011 Highlights of the Shared Governance Coordinating Council Meetings

In August 2011, the JMH West Wing 9 UPC, led by Rocio Simunovic, RN, BSN, MHSA, and Alex Santos, RN, BSN, were proud to share positive outcomes related to pain management of their patients after a focused evidence-based pain management education campaign. Patient satisfaction scores were significantly improved and sustained as a result of their interventions.

Ryder Trauma Center Resuscitation UPC had completed several other projects prior to this meeting but their big project turned their Omnicell around. They collaborated with the Materials Resource Division to remove outdated codes and improve par levels while engaging staff to ensure that proper codes were utilized when removing supplies. Their effort resulted in savings of several thousand dollars for their unit while improving staff accountability.
The Jackson South Community Hospital Pharmacy-Nursing Unit Practice Council, led by Stephanie Smith, RPh, presented at the Shared Governance Coordinating Council meeting on November 15, 2011. They shared a historical trajectory of the council which grew out of concerns raised in a 2001 survey asking nurses, “How do we measure up?” They received valuable input, focused on the negative responses and developed a task force, which later evolved into the UPC to address issues raised. Today, nursing and pharmacy at JSCH have a symbiotic relationship with the patient as its core. Some of their outcomes are listed below:

- All pharmacists have “shadowed” nurses in their work settings and some nurses have “shadowed” pharmacists.
- Pharmacists provide patient medication teaching in their (patients’) rooms, per the nurse’s request or if pharmacists deem it necessary.
- System of accountability via the Patient’s Own Medication Log, was established as a patient safety measure and also to track patient’s home medications at the time of discharge.
- Community health fairs.
- In-services for nurses on their own units, regarding medications.

L-R: Stephanie Smith, RPh; Paul Eger, RPh, CPh; Ric Cuming, RN, MSN, EdD, NEA-BC; Caridad Nieves, RN, BSN, MBA-HA; Lisette Downing-Pham, RN, BSN
Shared Governance Coordinating Council

2011 Shared Governance Leadership Award Recipients

1st Quarter
Olive Fowler, RN, MSN

2nd Quarter
Shared by Laurel Sinclair, ARNP, MSN, CEN, CCRN, and Kathy Dykstra, RN, BSN

3rd Quarter
Karen Strauss, RN, MSN, NEA-BC

4th Quarter
Paul Eger, RPh, CPh
Practice Councils are the structures that support shared governance at the organizational level. In 2010-2011, there were 9 Practice Councils. Membership in the councils depends on interest only. Any staff member who has an interest in these councils may attend and participate.

The nursing displays in the main lobby of the JMH West Wing and outside the gift shop are products of the Nursing History Council.

**Nursing Professional Practice Council Listing**

<table>
<thead>
<tr>
<th>Council</th>
<th>Facilitator</th>
<th>Chair</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional Development</td>
<td>M. McLaughlin, RN, MSN</td>
<td>G. Valdes, RN, MSN-HCS, DNP, BC</td>
</tr>
<tr>
<td>Nursing Cancer Council</td>
<td>Denese Clare, ARNP, MSN, NEA-BC</td>
<td>Dagoberto Perez, RN, BSN, MHSA</td>
</tr>
<tr>
<td>Nursing Theory/Nursing History Council</td>
<td>Lael Manzo, RN, EMBA-HA</td>
<td>Mercy Rodriguez, RN, MSN</td>
</tr>
<tr>
<td>Clinical Educators</td>
<td>Lael Manzo, RN, EMBA-HA</td>
<td>Marie Mohammed, RN, BSN</td>
</tr>
<tr>
<td>Nursing Standards</td>
<td>Ann-Lynn Denker, ARNP, PhD</td>
<td>Carol Bond, RN, BSN, MSM</td>
</tr>
<tr>
<td>Nursing Informatics</td>
<td>Ann-Lynn Denker, ARNP, PhD</td>
<td>Donna Benjamin, ARNP, MSN</td>
</tr>
<tr>
<td>Nursing Leadership Human Resource</td>
<td>Ann-Lynn Denker, ARNP, PhD</td>
<td>Beverly Fray, RN, MSN, APRN-BC</td>
</tr>
<tr>
<td>Nursing Workforces including:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Professional Development</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Workforce</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Performance Management</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Shared Governance Coordinating Council</td>
<td>Beverly Fray, RN, MSN, APRN-BC</td>
<td>Michelle Tossona, RN, LMC</td>
</tr>
<tr>
<td>Nursing Research &amp; Evidence-Based Practice</td>
<td>Ann-Lynn Denker, ARNP, PhD</td>
<td>Mary Wyckoff, PhD, ACNP, BC, FNP-BC</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The purpose of the Professional Development Council is to advance the professional development of Jackson Health System nurses. To that end, our major focus has been the development of a voluntary Professional Nursing Advancement Program for Clinical Staff Nurses which we finalized in 2011. The components of the program have been placed on the JHS Intranet and the Council members, along with key supporters of this initiative, have begun to inservice the process to the Divisional UPC Steering Councils.

The Professional Development Council leadership is in transition. During this time, Guillermo Valdes and Maureen McLaughlin are acting as co-chairs of this Council. Abel Rodriguez is the recorder.

Members of this Council are: Rosa Ackie, RN, MSN, MPH, Lucia Benjamin, RN, BSN, MHA, CCRN; Lynette DaSilva, ARNP, MSN, BC; Evel Michel, RN, BSN; Maybelle Panotes, RN; Jean Bonamy, RN; Alexandria Pop, RN; Abel Rodriguez, RN, BSN, CCM; Marie Y. Saint-Vil, RN; Rosemarie Taylor, RN, BSN, EdD, MA, BC; Guillermo Valdes, RN, MSN-HCS, DNP, BC; Maureen McLaughlin, RN, MSN.

In 2011, the Professional Development Council successfully launched the Professional Nursing Advancement Program (PNAP), which spanned more than five years in development.

The Professional Nursing Advancement Program (PNAP) was designed to recognize and reward clinical expertise and commitment to Jackson Health System clinical staff nurses. This recognition program is intended to foster job satisfaction, provide exceptional customer service with the integration of team collaboration, enhance leadership capabilities, and reward those using evidence-based practice standards in the provision of the highest quality level of patient care.

The PNAP provides eligible clinical staff nurses with a clinically-focused, progressive, voluntary program, with the opportunity to progress to advancement levels by demonstrating competency of defined behaviors related to guiding principles.

The conceptual framework, around which the PNAP is designed, incorporates both the Jackson Health System Professional Practice Model and Patricia Benner’s theory of novice to expert. This program was created with input from CSNs, nurse educators and nursing leadership from various units, departments across the health system, and fully supported by Nurse Managers, Directors of Patient Care Services, Chief Nursing Officers, The Center for Nursing Excellence and the Professional Development Council.
Professional Practice Councils

The PNAP model demonstrates a commitment of Clinical Staff Nurses to the JHS Nursing Vision of nurses as “global leaders committed to excellence in providing specialized world class care through innovation, collaboration and evidence-based practice.”

To ensure access for all Clinical Staff Nurses, the PNAP has been placed on the Jackson Health System intranet portal. This allows CSNs to reference and copy documents as they begin their advancement journey and to build their formal portfolio when they are ready to apply for one of the three advancement levels.

Members of the Professional Development Council and others dedicated to educating the Clinical Staff Nurses on the PNAP process have begun to provide in-services in the Divisional UPC Steering Councils.

Many nurses have participated in the development of this program over the years. Two of them who have made a significant impact in the final development of the program are Abel Rodriguez, RN, BSN, Clinical Staff Nurse, Trauma 3 A, and Rosa Ackie, RN, MSN, MPH, Clinical Care Coordinator, Care Management.

Nursing Cancer Practice Council

The Nursing Cancer Council (NCC) is a hospital-approved, multi-disciplinary team that includes nurses and pharmacists. It was formed in the late 1980s to address JCAHO issues and the need for policies and procedures regarding chemo administration. NCC has been responsible for the development of staff education through Chemo on the Bay (ACC); ONS Chemo workshop (UM) and classes on JEN.

The NCC is involved in product review as well. Some of the items recommended by our team include the Biopatch, InfusaPort Safety Needles, and the Phaseal closed system transfer device. NCC became a magnet practice council in December 2007 as an initiative to involve the bedside nurse in discussion of practice issues and ways to improve practice in this specialty.

We follow ONS Oncology Nursing Society EBP guidelines in policy and procedure development, as well as NIOSH (National Institute for Occupational Safety and Health) recommendations for standardization of practice.

In 2008 we invited NIOSH to visit JMH to observe our practice and recommend any changes. This led to the development of the NIOSH team, which included members of the NCC and Occupational Health and Safety team.

The chair elected 2011-2012 is Dagoberto (Bert) Perez, RN, BSN, MSHSA, and the facilitator is Denese McGill-Clare, ARNP, MSN, NEA-BC.
Professional Practice Councils

Nursing Research & Evidence-Based Practice Council

The Nursing Research and Evidence-Based Practice Council is one of nursing’s long-standing practice councils. The council is the shared governance structure of system wide JHS nurses that fosters and supports nursing research and evidence-based practice. It is built on the belief that excellent patient care is only achieved through a context of science, best practices, research, and best evidence. The council helps to mentor and educate nursing staff through the research process. An extension of the council is the popular monthly “Research Lunch and Learn” series.

Chair
Mary Wyckoff, PhD, ACNP, BC, FNP-BC

JHS Nurses present at the 5th Annual Nursing Research Collaborative Conference

L-R: Conchita S. Freitag, RN, MSN, BSC; Donna Benjamin, ARNP, MSN; Althea Warrell, RN

Lee FongHong, RN, MBA, MSN, CCRN
Professional Practice Councils

Nursing Theory Practice Council

The Nursing Theory Council facilitates the dissemination and integration of Leininger’s Theory into the Relationship-Based Care culture. The council is a resource for the leadership of JHS nursing. The council assesses organizational capabilities and care provider competencies for the implementation of culturally competent care, and coordinates activities and learning opportunities that assist in the development of cultural awareness, and in the development of personal competencies that enable nursing staff to better handle cross-cultural encounters. Miami-Dade County is a dynamic, ever-changing multi-ethnic community. We value differences of beliefs and recognize the right of our patients to engage in health practices that are meaningful to them. Therefore, care strategies must address the uniqueness of our multi-cultural population. It is with this great sense of commitment that we incorporate Madeleine Leininger’s Theory of Culture Care: Diversity & Universality into our nursing practice.

2010 & 2011 Accomplishments

- Integration of Madeleine Leininger’s theory into the JHS Nursing Practice Model
- Inclusion of culturally competent behaviors in the JHS Performance Evaluation
- Inclusion of culturally competent behaviors in the criteria of the JHS Professional Nurse Advancement Program (PNAP)
- Completion of an Organizational Cultural Assessment Survey and implementation of improvement recommendations
- Exploration of a “cultural mindfulness process” as a method to teach cultural awareness and cultural competency skills

Council members meet with Nurse Theorist Madeleine Leininger
Professional Practice Councils

Nursing History Practice Council

A Tribute to Jane Mass

The Nursing History Council dedicated the JHS Nursing History Archive in honor of D. Jane Mass, RN, MSN NEA-BC on Tuesday, May 4, 2011.

The display case is located in the West Wing Lobby of Jackson Memorial Hospital and will feature different exhibits from our rich nursing history. Plans are to have a nursing history archive at both Jackson South Community Hospital and Jackson North Medical Center, and the exhibits will rotate through all three hospitals on a quarterly basis.

The Nursing History Council is part of the JHS Nursing Theory Council. If you are interested in joining the Nursing History Council or the Nursing Theory Council, you are welcome to attend our meeting. They are held on the first Monday of the month in Clark DTC 252 at 1:00 pm.

The contact person for the council is Mercy Rodriguez, Mrodrig2@jhsmiami.org. Please come and check us out!
As nurse educators, we believe that we are best equipped to provide standardization in education while creating a learning environment that fosters innovation and creativity using evidence-based practice to improve healthcare outcomes and the practice environment. We also believe that as nurse educators, we are the best equipped to resolve nurse educator issues in our work environment.

One of the achievements of the council was creating the Jane Mass tree memorial. The council also played a significant role in the implementation of The Joint Commission action plan.
Professional Practice Councils

Nursing Standards Practice Council

We believe that the complexity and ever-changing requirements of care within JHS requires systematic and decentralized processes to support policy development that meets organizational and regulatory criteria for policy implementation.

Chair: Carol Bond, RN, BSN, MSM
Co-Chair: Rosemarie Taylor, RN, BSN, EdD, MA, BC
Facilitator: Ann-Lynn Denker, ARNP, PhD

Role of Council:
The Nursing Standards Practice Council coordinates the standards management process, and guides and ensures that the seven-step process for policy development is followed. The council also disseminates principles that guide policy development, including evidence-based practice. Members serve as resources, mentors and coaches to individuals and policy and procedure committees.

2010 & 2011 Achievements:

- Policy Development and Management Workshop focusing on principles that guide policy development, and policy-writing skills, and evaluating the impact of standards on patient care/monitoring outcomes
- Development of the responsibility, authority and accountability roles for policy owners and conducted the Policy Owners' Summit
- Developed the database for tracking policy development and assignments.
- Implemented use of Nursing Standards Process Checklist to assure standardized policy development
- Nine new policies developed and 61 revised
- Established mentors/coaches to facilitate staff involvement in policy development
- Established a database of subject matter “experts”
- Developed and presented poster of Nursing Standards Seven-Step Process at Innovative Nursing Expo during Nurses Week Celebration
Professional Practice Councils

Nursing Standards Practice Council Membership:

Roboam Aguirre, RN, MSN, DBA  Director, Quality & Patient Safety
Donna Benjamin, RN, MSN  Coordinator, Nursing Informatics
Lucia Benjamin, RN, BSN, MSHA, CCRN  Director, Cardiovascular Services
Carol Bond, RN, BSN, MSN  Clinical Standards Coordinator
Jacqueline Boyce, RN, MSN  Quality Manager, Medical-Surgical Hospital
Jin Chin-Glemaud, ARNP, MSN  Quality Manager, Mental Health Hospital
Vicki Colburn, RN, BSN, MED  Quality Manager, Women’s and Children’s Hospital
Ann-Lynn Denker, ARNP, MSN, PhD  Director, Center for Nursing Excellence
Sandra Gorski, BSN, JD, LHCRM  Director, Risk Management
Laura Guerrier, RN, MSN  Educator, Emergency /Trauma Services
Laura Harris, RN, BSN, MS  ADN, PeriAnesthesia
Shannon Kearns, RN, MSN  Associate Administrator of Quality, JSCH
Anissa Laguna  Policy Administrator
Latoya Lewis-Pierre, RN, MSN  Nurse Manager, MICU
Julie Mann, RN, MHM  Director, Ortho-Rehab-Neuro Services
Lael Manzo, RN, EMBA-HA  Educator, Education and Development
Marie Mohammed, RN, BSN  Educator, Ambulatory Care Centers
John Repique, RN, MS, NEA-BC  CNO, Mental Health Hospital
Christine Rosillo, RN, BSN, MBA  CNO, Ambulatory Care Centers
Monica Scaccianoce, ARNP, MSN  Nurse Manager, Mental Health Hospital
Rosemarie Taylor, RN, BSN, EdD, MA, BC  Director, Education and Development
Professional Development/Continuing Education

As a result of our work in 2010 & 2011:

- 7,893 staff members met their professional development needs in 606 classes/workshops.
- 53 continuing education programs were reviewed for compliance with established standards. These standards were also presented to the nurse educators.
- 89 clinical staff met their license renewal requirements through two instructor-led classes for PME, DV, and HIV. More than 710 licensed professionals met similar requirements through the computer-based format.
- Approximately 140 nurse leaders’ skills were enhanced by the Nursing Leadership Series, which included the following topics: Leading, Cultural Diversity, Teamwork and Managing Change, Planning and Decision Making, Communication, Financial Acumen (Parts A and B) Quality Standards and Outcomes, and miscellaneous topics.
- Three CRNA students received scholarships for their training programs.
- 213 caregivers are now more competent to care for culturally diverse clients. The learning was facilitated by a one-hour “Lunch and Learn” format on the following topics: Haitian Culture! Promoting PEACE, Resource Guide, LGBT Perspectives, Utilizing JHS Patient Resources, American Jews, Filipino Culture, Native American Indians, Diabetes in Minorities, and Cultural Competence: A Journey.
Patient Outcomes

Dedication to Improving Nursing Care and Patient Outcomes

Jackson Health System has been a member of the National Database of Nursing Quality Indicators (NDNQI) since 2005 and is one of more than 1800 participating members of the NDNQI. Membership provides us with access to national comparison data for patient care quality improvement projects, for improving the nursing work environment and for nursing administration. Our participation in NDNQI satisfies the CMS requirement for participation in a “systematic clinical database registry for nursing-sensitive care” and that helps protect out hospital’s full reimbursement rate.

Nursing-sensitive indicators reflect the structure, process and outcomes of nursing care. The structure of nursing care is indicated by the supply of nursing staff, the skill level of the nursing staff, and the education/certification of nursing staff. Process indicators measure aspects of nursing care such as assessment, intervention, and RN job satisfaction.

2,243 JHS nurses participated in the 2010 annual RN survey. This represented an impressive 93% participation rate. 1,956 JHS nurses were among the 326,750 RNs who participated in 2011, representing an 87% participation rate. The annual survey, which measures nurses’ perception of the practice environment, job enjoyment and unit quality, provides a detailed picture of nursing structure and process and affords us useful and meaningful data that will assist JHS nurses in their goal to shape and improve the professional practice environment.

Patient outcomes are determined to be nursing sensitive because they are directly dependent on the quality and quantity of nursing care. Examples of nursing sensitive indicators are pressure ulcers, falls, and IV infiltrations. The nursing team captures and converts into data what nurses actually do and how their actions affect patient care. The NDNQI process helps nurses support the goals of quality improvement outcomes for patients. Jackson Health System monitors the following nursing sensitive indicators:

- Falls
- Falls with injury
- Pressure ulcer prevalence
- Restraint prevalence
- Catheter-associated urinary tract infections
- Central line-associated blood stream infections
- Ventilator-associated pneumonia
- Pediatric Peripheral IV infiltrates
- Pediatric Pain/Assessment/Intervention cycle
- Nursing care hours per patient day
- RN education and certification
- Annual RN Survey
Jackson Health System Celebrates National Nurses Week

2011 Theme: “Nurses Trusted to Care”

National Nurses Week begins each year on May 6th and ends on May 12th, Florence Nightingale’s birthday. These permanent dates enhance planning, and position National Nurses Week as an established recognition event.
2011 Nurse Week Award Winners

Nurses Week Celebration
R. Kirk Landon Sponsors Jungle Island Event in Honor of Nurses Week

JHS nurses heard inspiring messages about “caring” from Marcus Engel, a professional speaker and author whose customized messages inspire, impact and influence audiences. As a college freshman, Marcus Engel was blinded and nearly killed after being struck by a drunk driver. Through two years of rehab, over 300 hours of reconstructive facial surgery and adaptation through a multitude of life changes, Marcus remained committed to his goal of recapturing life. His powerful story is customized for each individual audience and always includes the basis of overcoming adversity, commitment to higher goals, honoring healthcare professionals and embracing the truly important aspects of life. Marcus’ keynotes have been witnessed by tens of thousands of audience members from elementary school students to CEOs, faith-based organizations to some of the country’s top-rated universities and colleges.

It was both a festive and inspirational event for JHS nurses and executives who attended.
One of the most surprising things about the conference was the new, technologically innovative products. I felt that some of these products could really help with the prevention of falls, maintaining skin integrity and their efficiency would allow me more time with my patients. For example, one of the products was the Patient Touch System. This is similar to the Apple’s iPod Touch. This device has the entire patient’s information, you can chart on it, can bar code to give patient medication, and you can text the physicians on a patient’s change of condition or simply to increase a pain medicine dosage. It works in real time and it is HIPAA compliant. It fits in your hand and in your pocket.

The most meaningful thing to me was the ability to network with other nurses in the US about shared governance. I learned that even though they might be in other settings, there was one common theme – it was about staff engagement, staff development and a team approach to solving clinical issues. It was really meaningful to me to share this experience with fellow staff nurses and I keep this in mind for the Unit Practice Council.

Nurse of the Year 2011
Rocio Simunovic, RN, BSN, MHSA
JMH West Wing 9 UPC Chair
"It was a privilege and honor to have attended the Magnet conference, a conference that symbolizes nursing excellence. What surprised me the most was the vast number of nurses who attended, nurses from all over the world…. I felt a special bond because the common thread between all of us was that we were all nurses and that by doing research and presenting the evidence we have the power to bring change to our practice."

Nurse of the Year 2011
Dawn Allen, RN, Holtz Children’s Hospital
UPC Chair NICU

"Being at the conference for me was a wonderful experience. It gave me the opportunity to meet nurses from all over the USA. I felt very special to participate..... The most surprising thing for me was to see and hear how happy the nurses from the Magnet hospitals were, also how much they emphasized specialty certification. The most meaningful to me was a presentation about mothers’ perception of benefits associated with skin-to-skin contact with their newborns, since we are in the process of becoming a certified Baby Friendly Hospital."

Nurse of the Year 2011
Marie Jean Louis, RN, BSN, JNMC Women’s & Children’s
UPC Chair

"At the magnet conference I was delighted to see the many new accoutrements, gizmos, gadgets, and paraphernalia designed to improve the delivery of care..... It was the simplest idea that resonated with me, which was; “Treat every patient as you would treat the most beloved person in your life….follow the practical guidelines and standards of Magnet and treat every patient as you would treat your own special person.”

Donna Benjamin, ARNP, MSN
Chair, Nursing Informatics Professional Practice Council

"If I had to sum up how my experience was at the ANCC Magnet conference in one word it would be WOW! Baltimore was such a beautiful city and to have the opportunity to meet and talk with nurses from all over the world was just amazing...I learned new ideas, shared some of my own and made some new friends.

The most surprising thing for me was to realize that we are not alone. It was eye opening to know that the changes we are facing everyday in our institution and in healthcare, in general, is what all ERs and hospitals are also experiencing.

I finally got it... We face the same challenges in improving our patients’ care and satisfaction while keeping our employee satisfaction at its highest level. While this is very challenging, at times we, as an institution, do a great job!"

Laura Taramona, RN
Jackson South Community Hospital
Health Care Heroes

Congratulations 2011 Health Care Heroes

The Greater Miami Chamber of Commerce held their annual Health Care Heroes Awards on Thursday, May 12, 2011, at Jungle Island. The purpose of the award ceremony is to recognize the collective actions of the individuals, institutions and programs that have made an extraordinary impact in the South Florida healthcare community and whose acts of heroism represents a display of dedication to excellence in their area of expertise beyond the scope of their profession.

Ann-Lynn Denker has been part of Jackson Health System since 1974. Her work as a pediatric clinical nurse specialist placed her in the forefront of areas of pediatric cardiology and AIDS, and later had an influence on the provision of nursing services throughout the entire health system as the Director of the Center for Nursing Excellence. In 1989, she became the first PhD-prepared nurse at Jackson. She has served on the American Nurses Association Political Action Committee and the Florida Nurses Association Political Action Committee. She has volunteered with Habitat for Humanity, the Guardian ad Litem program and the Human Services Coalition of Dade County. She also worked as a nurse practitioner on a medical mission to Ethiopia. Dr. Denker has served several times on the board of the Florida Nurses Association and currently serves on the Florida Board of Nursing.

Dr. G. Patricia Cantwell cares for some of the sickest children in South Florida. She not only helps to nurse many back to health through months and years of recovery, but also helps ease the pain of those who may never recover. Dr. Cantwell has championed Holtz’s palliative care practices and is involved with TiLLi kids, an organization that aims to maximize the overall quality of life for children with terminal illnesses. She is also the medical manager for the Urban Search and Rescue Team South Florida and has provided medical care to the victims of 9/11, Hurricane Katrina and the Haiti earthquake.

G. Patricia Cantwell, MD
Director
Division of Pediatric Critical Care Medicine
Holtz Children’s Hospital

Ann-Lynn Denker, ARNP, PhD
Director
Center for Nursing Excellence
Jackson Health System
Jackson Nurses Reach out to Disaster-Struck Haiti!

“The quality of care provided by this nurse under these circumstances was truly outstanding and unprecedented. Her name is VALERIE MATHURIN, RN, BSN, and she works in the PICU,” said Ralf E. Gebhard, MD, Professor of Anesthesiology; Associate Professor of Orthopedics and Rehabilitation Director, Division of Regional Anesthesia and Acute Perioperative Pain Management, University of Miami-Miller School of Medicine.

“I would like to second Ralf’s comments about Valerie. What he did not say is that we could not get another nurse to give the commitment and attention that Valerie showed. A few nurses helped for a few hours but they drifted away… It meant that I had to very frequently review the patients in the PAR myself. Once Valerie was in position this was no longer an issue. Under the conditions, moving the patients is a heavy job, and Valerie was constantly able to recruit people to help with this,” said James D. Guest MD, PhD, FRCS (C), FACS, Associate Professor of Neurological Surgery and the Miami Project to Cure Paralysis, University of Miami.

“Thank you so much for recognizing this dedicated nurse. What you all probably don’t know is that Valerie lost a family member in this tragedy and was still able to persevere. In addition, she recently graduated from our pediatric critical care internship so she is a fairly new RN,” said Carrie Feinroth, RN, MSN, Nurse Manager, Holtz Pediatric ICU.
JHS Nurses Give to the Community

Posted on Monday, January 25, 2010

From The Associated Press:

Gov. Charlie Crist has signed an executive order that will temporarily allow nurses licensed in other states to practice in Florida. Crist signed the order Monday at a press conference at Jackson Memorial Hospital in Miami, saying it will free up nurses from Florida to assist in the relief effort in earthquake-ravaged Haiti. He said the order would help the state's medical facilities cope with the resulting nursing shortage... about 200 nurses from Jackson Health System have volunteered to travel to Haiti. The executive order stays in effect for 90 days, but Crist said it could be extended if necessary.

Valerie Mathurin RN, BSN, Holtz PICU, speaking at the press conference held with Florida Governor Charlie Crist and Eneida Roldan, JHS President and CEO.

Odiane Medacier, ARNP, MSN, is a nurse practitioner for Pre-Admission Testing and was one of the first JHS nurses to volunteer in Haiti.
Jackson Health System Nurses Making a Difference in the Community

Jackson Outreach Team continues to make a difference in our community by participating at various community outreach events. Saturday, September 11, 2010, at Sun Life Stadium, Jackson participated in the annual Sickle Cell of America Walk, Run for Sickle Cell Anemia.

L-R: JMH Women’s Hospital Center Associate Nurse Manager Beverly Campbell, RN, BSN; Donna Richardson Joyner, nationally known fitness and aerobics instructor; WHC Nurse Educator Vashti Laing, RN, BSN; Denese Clare, ARNP, MSN, NEA-BC, Chief Nursing Officer for Holtz Children’s Hospital and Women’s Hospital Center.

The nursing staff, along with FIU nursing students, focused on educating the public about women’s health and sickle cell disease. They promoted awareness of sickle cell disease, how to become aware of sickle cell anemia, the sickle cell trait, and motivated people to be tested. 2010 marked the 100th anniversary of the discovery of the sickle cell.

Nurse Educator, Geraldine Sogluizzo, RN, MSN
JMH Taylor Breast Health Center staff participated in the American Cancer Society Making Strides for Breast Cancer 5K Walk on October 2, 2010, a yearly event for the center. However, the walk in 2010 was different. Staff members and family of the JMH East Tower 3 Mother Baby Unit joined them with amazing zeal and enthusiasm!

Arlene White, PCA of the Mother Baby Unit, approached team Taylor Breast Health Center to discuss her colleagues’ participation. She expressed the desire of her co-workers to honor nursing colleagues on the unit who had experienced breast cancer.

An enthusiastic group of 17 JMH East Tower 3A & 3B staff successfully raised more than $560 and participated in the walk along with their friends and family members. Sixty of their colleagues contributed financially in honor of their fellow employees. Arlene White and Linda Hibbert coordinated the East Tower team.

This was an extraordinary example of sharing time, talent and treasure for a cause that directly provided services to women in need of breast cancer screening and services. Taylor Breast Health Center staff were touched by this remarkable gesture by the staff of East Tower in support of their family, friends, and co-workers battling breast cancer. It was also a testament to the memory of those who had lost the fight. What a fine way to honor colleagues directly affected by breast cancer!

Jackson North Medical Center Supports Breast Cancer Awareness
On November 11-14, 2010, several Jackson and University of Miami staff members volunteered their time to attend the Children’s Burn Foundation of Florida Camp Tequesta. The camp is for children ages 6 to 17 years old who have sustained a serious burn injury. Burn camp provides the children with the chance to have fun and build relationships with other burn survivors. Olga Quintana, ARNP, MSN, is on the Board of Directors and is the Miami/Boca Regional Director for the Children’s Burn Foundation of Florida. Dr. Carl Schulman; nurses from Ryder Trauma Center 3B/Burns, TICU, and Trauma Resuscitation occupational and physical therapists accompanied the children as volunteers and “Burn Buddies.” The camp is free for the children, is staffed entirely by volunteers and is funded by donations from the public. For more information about Camp Tequesta, go to http://childrensburnfoundationoffl.com.
On Tuesday, September 27, 2011, 23 student nurses from the Université Notre Dame d'Haïti in Port-au-Prince visited Jackson Health System to observe patient care. Their visit began with a tour of Jackson Memorial Hospital, where they also saw the trauma helicopter in action. They then participated in a press conference, which aired on Channel 6 that evening. The second day was spent shadowing nurses at Jackson North Medical Center. They were amazed with our advanced technology, nursing practice and the entire health system.
2011 marked the 4th year of collaboration between Jackson Health System and the National Taipei University of Nursing and Health Sciences. JHS facilitated a collaborative international agreement between the University of Miami and the National Taipei University. The first meeting occurred at a Sigma Theta Tau conference in Vienna in 2007, at which time the JHS Advanced Practice Nurses attending the conference forged the relationship which has resulted in exchanged visits for the last 4 years. Douglas Houghton, ARNP, MSN, BC, and Salma Hernandez, ARNP, MSN, BC, have both visited and presented to the nurses at the National Taipei University of Nursing and Health Sciences (NTUNHS), located on 365, Ming Te Road, Peitou District, Taipei, Taiwan.

The university was founded in 1954, and was first known as “Taiwan Provincial Junior College of Nursing.” In August 1994, it was upgraded as a full-fledged college and became the first independent nursing college in Taiwan. With the growing demand for a nursing taskforce, NTUNHS has pioneered nursing and healthcare education in Taiwan. As of the 2009 academic year, NTUNHS had a total of 3 schools, 5 departments and 12 graduate institutes, which offer 5 undergraduate programs, 13 master’s programs and 1 doctoral program. In July 2010, NTCN was renamed National Taipei University of Nursing and Health Sciences (NTUNHS).
Interdisciplinary Grand Rounds

2010 Kick-Off

Interdisciplinary Grand Rounds (IGR) was introduced as an educational opportunity for Jackson Health System nurses and other disciplines to promote excellence in care through scholarly presentations. Nurses acquire new information and develop new skills as these rounds provide a forum for dialogue and collaboration.

Jackson Health System presented its first Interdisciplinary Grand Rounds presentation with a focus on Canine Assisted Therapy (CAT) at JMH on November 22, 2010. Jackson Health System, as an academic world-class institution, is committed to bringing educational programs that foster professional development and clinical excellence.

Dr. Mary Wyckoff presented a best-practice perspective that enriched the audience with thought-provoking clinical illumination.
Essential Attributes of JHS Nursing

The Essential Attributes of JHS Nursing

Essential attributes of nursing are those fundamental, indispensable and necessary practices that contribute to excellence in patient care throughout Jackson Health System. Included are the following caring behaviors that have been adopted by nursing leadership to assure an excellent patient experience.

Madeleine Leininger’s Culture Care: Diversity & Universality Theory:
- Deliver care that is congruent with patients’ and families’ values and beliefs
- Communicate effectively with patients/significant others from diverse backgrounds, using the assistance of trained interpreters or the language line, as appropriate

Relationship-Based Care (RBC)
- Hourly purposeful rounding
- Leadership role model RBC behavior
- Demonstrate service excellence at all times (smile, introduce yourself, explain your role in the patient’s care and ask the patient their preferred name).
- The RN will sit with each patient at least 5 minutes each shift/visit to plan and discuss the patient’s care, desired outcomes, and anticipate discharge planning.
- Plan the patient’s day with patient/significant other involvement — “What is the most important thing you would like to accomplish today?”
- Before leaving the room, round with purpose and ask, “Is there anything else I can do for you?”
- White boards are kept up-to-date each shift, including staff name and patient pain goal for the shift/day.
- “Care of the Patient” - Nurses at the change of the shift introduce the oncoming nurse to each patient/significant other providing seamless transition in care.
- “RNs Floating:” The nurse who is the “guest” receives a gracious greeting and thanks for the float; the assignment for that nurse is “friendly” and a set-up for success.
- Staff attends required training
- Each CNO hosts a bi-monthly “Nurse Advisory Council”
- Directors/Associate Directors/AICs conduct weekly validation surveys of staff and patients to ensure rounds are carried out consistently.

Group Practice
- Patient Care Groups will work together for at least 3-month intervals to provide consistency.
- Walking rounds/bedside report
- Groups will huddle at least twice during the shift; once at the start and then midway.
- Staff attends the current Group Practice classes as well as a future class on essential skill development for Group Practice success
- Refer to Group Practice: Review of Key Drivers

Shared Governance
- UPCs will meet regularly at least monthly as well as ensure a yearly schedule is posted
- UPC projects will be chosen from the “UPC approved project list”
- New UPC Chair/co-chair will attend “How to Run a Meeting
- Nurse Manager Facilitators will attend The Facilitation Workshop
- Steering councils meet regularly to support, guide, and encourage the work of the UPC. Two way dialogue, UPC reports activities, Steering Council asks, “what do you need from us to be successful?”
- Set day and time for UPC meeting &/or council meetings.
- New staff should attend at least one Steering Council meeting and one Shared Governance meeting within the first six (6) months of hire.