



October 20, 2023

TO: Legal Counsel

News Media

Salinas Californian
El Sol
Monterey County Herald
Monterey County Weekly
KION-TV
KSBW-TV/ABC Central Coast
KSMS/Entravision-TV

The next regular meeting of the **QUALITY AND EFFICIENT PRACTICES COMMITTEE - COMMITTEE OF THE WHOLE** of the **SALINAS VALLEY HEALTH**¹ will be held **MONDAY, OCTOBER 23, 2023, AT 8:30 A.M., CEO CONFERENCE ROOM, SALINAS VALLEY HEALTH MEDICAL CENTER, 450 E. ROMIE LANE, SALINAS, CALIFORNIA** or via **TELECONFERENCE**. (*Visit [SalinasValleyHealth.com/virtualboardmeetinglink](https://www.SalinasValleyHealth.com/virtualboardmeetinglink) for Access Information*).

A handwritten signature in black ink, appearing to read "Pete Delgado", written in a cursive style.

Pete Delgado
President/Chief Executive Officer

¹Salinas Valley Memorial Healthcare System operating as Salinas Valley Health

Committee Members: Catherine Carson, Chair; Rolando Cabrera, MD, Vice Chair; Pete Delgado, President/CEO; Allen Radner, MD, Chief Medical Officer; Clement Miller, Chief Operating Officer; Lisa Paulo, Chief Nursing Officer; Rakesh Singh, MD, Medical Staff Member; Michele Averill, Community Member

**QUALITY AND EFFICIENT PRACTICES COMMITTEE
COMMITTEE OF THE WHOLE
SALINAS VALLEY HEALTH¹**

**MONDAY, OCTOBER 23, 2023 8:30 A.M.
DOWNING RESOURCE CENTER, CEO CONFERENCE ROOM 117**

**Salinas Valley Health Medical Center
450 E. Romie Lane, Salinas, California
or via Teleconference
(Visit [SalinasValleyHealth.com/virtualboardmeeting](https://www.SalinasValleyHealth.com/virtualboardmeeting) for Access Information)**

AGENDA

1. Call to Order / Roll Call
2. Patient Care Services Update (PAULO)
Medical Surgical Unit Practice Council
3. Chest Pain Program Report (O'MAHONEY)
4. Mammography Program Report (DR. STEMERMAN)

5. Public Input

This opportunity is provided for members of the public to make a brief statement, not to exceed three (3) minutes, on issues or concerns within the jurisdiction of this District Board which are not otherwise covered under an item on this agenda.

6. Closed Session
7. Reconvene Open Session/Report on Closed Session
8. Adjournment

The next Quality and Efficient Practices Committee Meeting is scheduled for **Monday, November 13, 2023 at 8:30 a.m.**

This Committee meeting may be attended by Board Members who do not sit on this Committee. In the event that a quorum of the entire Board is present, this Committee shall act as a Committee of the Whole. In either case, any item acted upon by the Committee or the Committee of the Whole will require consideration and action by the full Board of Directors as a prerequisite to its legal enactment.

The Committee packet is available at the Committee Meeting, at www.SalinasValleyHealth.com, and in the Human Resources Department of the District. All items appearing on the agenda are subject to action by the Committee.

Requests for a disability related modification or accommodation, including auxiliary aids or services, in order to attend or participate in a meeting should be made to the Board Clerk during regular business hours at 831-759-3050. Notification received 48 hours before the meeting will enable the District to make reasonable accommodations.

**QUALITY & EFFICIENT PRACTICES COMMITTEE
COMMITTEE OF THE WHOLE**

AGENDA FOR CLOSED SESSION

Pursuant to California Government Code Section 54954.2 and 54954.5, the board agenda may describe closed session agenda items as provided below. No legislative body or elected official shall be in violation of Section 54954.2 or 54956 if the closed session items are described in substantial compliance with Section 54954.5 of the Government Code.

CLOSED SESSION AGENDA ITEMS

HEARINGS/REPORTS

(Government Code §37624.3 & Health and Safety Code §§1461, 32155)

Subject matter: (Specify whether testimony/deliberation will concern staff privileges, report of medical audit committee, hospital internal audit report, or report of quality assurance committee):

1. Report of the Medical Staff Quality and Safety Committee
 - Risk Management/Patient Safety (BAILEY)
 - Accreditation and Regulatory updates (KUKLA)
 - Leapfrog survey and Safety Grade reports (KUKLA)
 - Leapfrog Hospital Survey Review (KUKLA)
2. Quality and Safety Board Dashboard Review (KUKLA)
3. Consent Agenda:
 - Risk Management / Patient Safety – Full report
 - Environment of Care – Workplace Safety Report – Full Report
 - Accreditation and Regulatory – Full report
 - Restraint Committee Full Report
 - Pharmacy & Therapeutics/Infection Prevention Full Report

ADJOURN TO OPEN SESSION

CALL TO ORDER
ROLL CALL

(Chair to call the meeting to order)

Board Paper: Quality & Efficient Practices Committee

Agenda: Patient Care Services Update
Executive: Lisa Paulo, MSN/MPA, RN
Sponsor: Chief Nursing Officer
Date: October 23, 2023

Pillar/Goal Alignment:

Service People Quality Finance Growth Community

QUALITY:

Med-Surg Cluster Practice Council

3Main | 3Tower/Oncology | 4Main/Ortho-Neuro-Spine (ONS) | Peds

Our Purpose:

- ❖ To identify and implement standards of care and evidenced-based practice specific to the Med-Surg Cluster
- ❖ To identify and resolve clinical and system issues impacting or affecting care coordination, a healthy work environment, the delivery of patient-family centered care, patient safety and clinical outcomes

Our Goals:

- Improve nursing practice
- Increase nurse satisfaction
- Enhance patient experience
- Achieve excellent patient outcome & improve patient satisfaction

Members:

- Anna Paz Mercado, BSN, RN, ONC (Chair)
- Natasha Limosnero, BSN, RN, PHN, CMSRN (Co-Chair)
- MJ Andalio-Angeles, RN, FCN
- Eva Abendano-Real, RN, BSN
- Liezl Anne Duesdieker, BSN, RN, CMSRN
- Maybelle Peters, BSN, RN, CMSRN
- Lisa Sandberg, BSN, RN, CPN
- Brittnee Sandoval, BSN, RN, CMSRN
- Flor Silva, BSN, RN, CMSRN



What We've Done

- ❖ Common Medication Handout
- ❖ Partner in Care
 - Nurse Engagement



Common Medication Handout:



Understanding Common Medications Entendiendo los Medicamentos Comunes

Purposes & Side Effects: Please discuss with your nurse what prescribed medications you are currently taking, why you are taking them, and their side effects. This list is for your reference. If you feel that any medication is making you sick or causing you pain, please contact your doctor or nurse immediately.
 Propósitos y Efectos Secundarios: por favor, discuta con su enfermero los medicamentos recetados que está tomando actualmente, por qué los está tomando y sus efectos secundarios. Esta lista es para su referencia. Si siente que cualquier medicamento le está enfermando o le causa dolor, comuníquese de inmediato con su médico o enfermero.

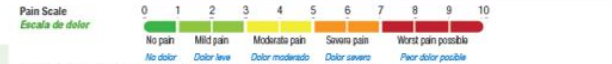
Drug Class Clase de Medicamentos	Common Medication Examples (Ejemplos de Medicamentos Comunes)	Purpose (Used For) Propósito (Usado para)	Potential Side Effects Efectos Secundarios Potenciales
Acid Reducer Reduce ácido	<ul style="list-style-type: none"> Omeprazole (Prilosec) Pantoprazole (Protonix) Famotidine (Pepcid) Calcium Carbonate (Tums) Lansoprazole (Prevacid) 	Reduces stomach acid Reduce del ácido del estómago	Headache, nausea, diarrhea, constipation • Proton pump inhibitors: Fractures Dolor de cabeza, náuseas, diarrea, estreñimiento • Inhibidores de la bomba de protones: fracturas
Anti-Anxiety Ansiedad	<ul style="list-style-type: none"> Aloprazolam (Xanax) Clozapam (Valium) Lorazepam (Ativan) Bupropion (Wellbutrin) 	Relieves anxiety, depression, or nerve pain Alivia la ansiedad, depresión, o dolor de los nervios	Drowsiness, nausea, dry mouth, weakness, confusion, dizziness, headache • Avoid driving or operating machinery Somnolencia, náuseas, boca seca, debilidad, confusión, mareos, dolor de cabeza • Evite conducir u operar maquinaria
Anticonvulsant Anticonvulsivo	<ul style="list-style-type: none"> Phenytoin (Dilantin) Phenobarbital (Luminal) Carbamazepine (Tegretol) Valproic Acid (Depakote) Lamotrigine (Lamictal) Topiramate (Topamax) Levetiracetam (Keppra) 	For seizure control Para el control de ataques de epilepsia	Drowsiness, dry mouth, blurred vision, constipation Somnolencia, boca seca, visión borrosa, estreñimiento
Antibiotic Antibiótico	<ul style="list-style-type: none"> Piperacillin/Tazobactam (Zosyn) Gentamicin (Gentak) Amoxicillin/Clavulanate (Augmentin) Sulfamethoxazole/Trimethoprim (Bactrim, Bactrin DS, Co-Trimoxazole Septin) Ciprofloxacin (Cipro) Ceftriaxone (Rocefin) Vancomycin (Vancomin) Doxycycline (Vibramycin) Sephalexin (Keflex) Amoxicillin (Moxatag) Azithromycin (Zithromax) Moxifloxacin (Axiaram) 	Treats and prevents bacterial infections Trata y previene las infecciones causadas por bacterias	Diarrhea, nausea, headache, rash/flushing, upset stomach, metallic taste • Methotrexate: Do not drink alcohol • Levofloxacin, Ciprofloxacin: Please give at least 2 hours before or 6 hours after antacids or other products containing calcium, iron, or zinc (includes dairy products or calcium-fortified juices) • Doxycycline: Sunburn Diarrea, náuseas, dolor de cabeza, sarpullido/erupciones, dolor de estómago, sabor metálico • Metotrexato: No beba alcohol • Levofloxacilo, Ciprofloxacilo y Moxifloxacilo: Tomar 2 horas antes o 6 horas después de los antiácidos u otros productos que contienen calcio, hierro o zinc (incluye productos lácteos o jugos fortificados con calcio) • Doxeyclina: quemaduras del sol



Drug Class Clase de Medicamentos	Common Medication Examples (Ejemplos de Medicamentos Comunes)	Purpose (Used For) Propósito (Usado para)	Potential Side Effects Efectos Secundarios Potenciales
Antifungal Antifúngico	<ul style="list-style-type: none"> Fluconazole (Diflucan) Nystatin (Mycostatin) 	Treats and prevents fungal infections Trata y previene las infecciones de fungi	Nausea, vomiting, diarrhea, stomach pain/flat, headache, dizziness Náuseas, vómitos, diarrea, dolor de estómago, dolor de cabeza, mareos
Antidepressant Antidepresivo	<ul style="list-style-type: none"> Amitriptyline (Elavil) Escitalopram (Lexapro) Fluoxetine (Prozac) Citalopram (Celexa) Bupropion (Wellbutrin) Mirtazapine (Remeron) 	Relieves anxiety, depression, or nerve pain Alivia la ansiedad, depresión o dolor de los nervios	Drowsiness, dry mouth, blurred vision, constipation • Avoid alcohol Somnolencia, boca seca, visión borrosa, estreñimiento • Evite el alcohol
Anti-inflammatory Antiinflamatorio	<ul style="list-style-type: none"> Naproxen (Aleve, Naprosyn) Ketorolac (Toradol) Ibuprofen (Motrin, Advil) Indometacin (Indocin) Aspirin Dexamethasone (Decadron) Meloxicam (Mobic) Celecoxib (Celebrex) 	Reduces inflammation Reduce la inflamación	Risk of bleeding, sleeplessness, swelling, upset stomach (swelling) Riesgo de sangrado, insomnio, hinchazón, malestar en el estómago
Anti-Nausea Contra las náuseas	<ul style="list-style-type: none"> Ondansetron (Zofran) Promethazine (Phenergan) Motilopramide (Reglan) Scopolamine 	Relieves nausea and vomiting Aliviar las náuseas y los vómitos	Constipation, drowsiness, dizziness, fatigue, headache Estreñimiento, somnolencia, mareos, fatiga, dolor de cabeza
Blood Pressure Medications Medicamentos para la alta presión arterial	<ul style="list-style-type: none"> Ramipril (Altaba) Enalapril (Vasotec) Lisinopril (Prinivil, Zestril) Benzazepril (Lotensin) Quinapril (Accupril) Captopril (Capoten) Candesartan (Atacand) Ibuprofen (Advair) Losartan (Cozaar) Valsartan (Diovan, Antiozoline, Norvasc) Omeprazole (Prilosec, Toprol XL) 	For control of blood pressure Para controlar la presión arterial	Cough, dizziness, light headedness, low blood pressure, tremors, tiredness, weakness, frequent urination, visual changes • Consult with your physician before taking any salt substitutes or potassium supplements Tos, mareos, aturdimiento, presión arterial baja, temblores, cansancio, debilidad, micciones frecuentes, cambios visuales en la vista • Consulte con su médico antes de tomar sustitutos de la sal o suplementos de potasio
Blood Pressure and Heart Rate Lowering Reduce la alta presión y el latido del corazón	<ul style="list-style-type: none"> Diltiazem (Cardiem CD, Cartia XT, Dilacor XR, Tiazac) Amlodipine (Norvasc) Carvedilol (Coreg) Metoprolol (Lopressor, Toprol XL) 	Treatment of high blood pressure and heart rate Tratamiento de la alta presión arterial y la frecuencia cardíaca del latido del corazón	Dizziness, drowsiness, headache, light headedness, upset stomach, swelling, vomiting Mareos, somnolencia, dolor de cabeza, aturdimiento, malestar en el estómago, hinchazón, vómitos

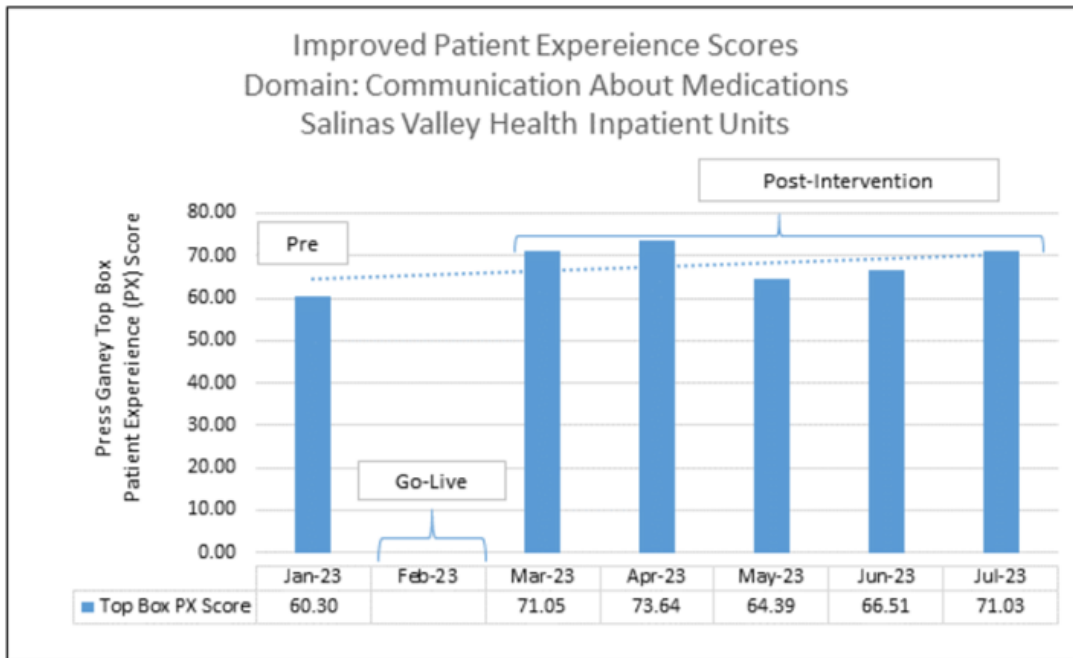
Drug Class Clase de Medicamentos	Common Medication Examples (Ejemplos de Medicamentos Comunes)	Purpose (Used For) Propósito (Usado para)	Potential Side Effects Efectos Secundarios Potenciales
Blood Sugar Control Control de azúcar en la sangre	<ul style="list-style-type: none"> Metformin (Glucophage) Glipizide (Glucotrol) Glyburide (Micronas, DiaBeta) Insulin Liraglutide (Humalog) - fast acting Glargine (Lantus) - long acting 	To prevent high blood sugar or treat diabetes Para prevenir los niveles de azúcar altos en la sangre, o tratar la diabetes	Tremors, tiredness, dizziness, upset stomach • Take with food • Can cause low blood sugar Temblores, cansancio, mareos, malestar en el estómago • Tomelos con comida. • Puede causar niveles bajos de azúcar en la sangre.
Cholesterol Lowering Reduce el colesterol	<ul style="list-style-type: none"> Atorvastatin (Lipitor) Simvastatin (Zocor) Pravastatin (Pravachol) Rosuvastatin (Crestor) Ezetimibe/Simvastatin (Vytorin) 	For treatment of high cholesterol Para el tratamiento del colesterol alto	Muscle pain, upset stomach, weakness, headache Dolor muscular, malestar en el estómago, debilidad, y dolor de cabeza
Diuretics (water pills) Diuréticos (píldoras de agua)	<ul style="list-style-type: none"> Furosemide (Lasix) Hydrochlorothiazide (Microzide), Metolazone (Dyazide) Bumetanide (Bumex) Spironolactone (Aldactone; potassium-sparing diuretic) 	Treats fluid retention and lowers blood pressure Trata la retención de líquidos y reduce la presión arterial	Low blood pressure, dizziness, frequent urination Presión arterial baja, mareos, orinar frecuente
Heart Rate and Rhythm Control Control del latido y ritmo del corazón	<ul style="list-style-type: none"> Amiodarone (Pacorone, Cordarone) Metoprolol (Lopressor, Toprol XL) Digoxin (Digitek, Lanoxin) Propafenone (Rythmor) Dronedronarone (Multa) Diltiazem (Cardiem CD, Cartia XT, Dilacor XR, Tiazac) Dofetilide (Tikozyn) Sotalol (Betapace) Carvedilol (Coreg) Amlodipine (Norvasc) 	Improve heart contraction and heart rate Mejora la contracción del corazón y regula el latido del corazón	Dizziness, headache, vomiting, upset stomach, tiredness, altered heart rate; Consult with your physician before taking any salt substitutes or potassium supplements Mareos, dolor de cabeza, vómitos, malestar estomacal, cansancio, latido alterado del corazón; consulte con su médico antes de tomar cualquier sustituto de sal o suplementos de potasio
Inhalers Inhaladores	<ul style="list-style-type: none"> Albuterol (Proventil) Fluticasone (Flovent) Salmeterol bromide (SERVAIR) Budesonide (Pulmicort) (Symbicort) 	For breathing difficulties Para las dificultades respiratorias	Altered heart rate, dry mouth • Rinse mouth after use Latido alterado del corazón, boca seca • Enjuagar la boca después de usar
Laxative Laxante	<ul style="list-style-type: none"> Docusate (Colace) Milk of Magnesia Bisacodyl (Dulcolax) Senna (Senoquick) Polyethylene glycol (Miralax) 	For constipation Para el estreñimiento	Diarrhea, cramps Diarrea, calambres en el estómago

Drug Class Clase de Medicamentos	Common Medication Examples (Ejemplos de Medicamentos Comunes)	Purpose (Used For) Propósito (Usado para)	Potential Side Effects Efectos Secundarios Potenciales
Mood Stabilizer Estabilizador del estado de ánimo	<ul style="list-style-type: none"> Lithium (Eskalith) Valproate (Depakote) 	Prevents altered thought process Previene alteraciones de la mente	Involuntary movements, dry mouth, drowsiness, Lithium: Stomach discomfort, thirst, frequent urination; Consult your physician Movimientos involuntarios, boca seca, somnolencia Lítium: Malestar en el estómago, sed, orinar con frecuencia; Consulte a su médico
Narcotic Antidote Antídoto narcótico	<ul style="list-style-type: none"> Naloxone (Narcan) 	Used to treat narcotic overdoses in emergency situations Utilizado para tratar la sobredosis de narcóticos en situaciones de emergencia	Flushing, dizziness, tiredness, weakness, nervousness, irritability, body aches Enrojecimiento, mareos, cansancio, debilidad, irritabilidad, dolor de cuerpo
Pain Medication Medicamentos para el dolor	<ul style="list-style-type: none"> Acetaminophen (Tylenol) Hydrocodone/Acetaminophen (Norco, Lorab, Norco) Morphine Fentanyl Oxycodone (OxyContin) Tramadol (Ultram) Oxycodone/Acetaminophen (Percocet) Progabalin (Lyrica) 	Reduce pain Reduce el dolor	Confusion, constipation, dizziness, drowsiness, dry mouth, nausea, rash • Avoid alcohol • Avoid driving or operating machinery Progabalin (Lyrica): Nerve pain treatment Confusión, estreñimiento, mareos, somnolencia, boca seca, náuseas, sarpullido • Evite el alcohol. • Evite conducir u operar maquinaria. Progabalin (Lyrica): Tratamiento para el dolor de los nervios
Vitamins & Mineral Supplements Vitaminas y suplementos minerales	<ul style="list-style-type: none"> Multivitamins (Multivitaminas) Iron (Fero) Calcium (Calcio) Magnesium (Magnesio) Folic Acid (Acido Fólico) 	Nutritional supplement Suplemento nutricional	Nausea, diarrhea, bloating, stomach irritation Náuseas, diarrea, iritación del estómago
Blood Thinner/Blood Clot Treatment Anticoagulante/ Tratamiento de coágulos en la sangre	<ul style="list-style-type: none"> Apixiban (Eliquis) Aspirin Clopidogrel (Plavix) Enoxaparin (Lovenox) Fondaparinux (Arixtra) Heparin Rivaroxaban (Xarelto) Warfarin (Coumadin) Dabigatran (Pradaxa) Ticagrelor (Brilinta) Pasoparin (Eliquis) Eptifibatid (Parsiparine) 	Prevents and treats blood clots Previene y trata los coágulos de sangre	Blood in stool or urine, bruising, risk of bleeding, upset stomach; Consult with your physician about taking any drugs over the counter Sangre en el excremento u orina, moretones, riesgo de sangrado, malestar en el estómago; consulte con su médico por los efectos de la toma de medicamentos sin receta médica



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 SVMSH May November 2022





[Domain] Communication Provide Information Related to Your Medication:

- The reason for your prescription/medication/s
- How-to use/take your medication/s
- Medication side effect/s

Partner in Care:

Nurse Engagement Survey results from 2021:

- Low scores on Autonomy and RN to RN Teamwork & Collaboration domains

Assessment of MedSurg Nurse Perception of Autonomy, Teamwork and RN-to-RN collaboration:

Common theme responses for Autonomy		Common theme responses for Teamwork & RN to RN collaboration	
Critical Judgement/Thinking	<p><i>"Ability to critically think and take necessary actions".</i></p> <p><i>"Being able to use clinical judgement in situations and communicating with the MD and others involved in the care".</i></p>	Promotion of good communication & teamwork	<p><i>"Create a culture of accountability with emphasis to the importance of continuity of care. Nursing care is continuous and does not rely on one shift alone".</i></p> <p><i>"Increase communication, establish good rapport with each other, set example for others that will encourage teamwork, being proactive and taking initiative to meet team needs".</i></p>
Professional decision making	<p><i>"The ability to act upon my own guidance and principles knowing that they align with the values and policies of SVMH".</i></p> <p><i>"Ability to make decision in my unit within the scope of nursing and hospital policies. Freedom to suggest".</i></p>	Support & Professional Respect	<p><i>"RN buddy system. Have an assigned buddy each shift to support each other".</i></p> <p><i>"Listening to RN's concern regarding the unit and encouraging staff to practice peer feedback instead of back talk. Recognize staff that are observing promoting teamwork".</i></p>
Professional Independence	<p><i>"For me, autonomy means I can do my nursing practice in my unit independently based on the Nurse Practice Act of California Section 2725, SVMH Standards of Care and SVMH Policies and Procedure".</i></p> <p><i>"Self Governance"</i></p>	Encourage Participation	<p><i>"Staff engagement and participation in unit and organizational initiatives".</i></p> <p><i>"Open communication, offer opportunities for development. Don't judge staff for mistake, offer support & rewards (vacation, training)".</i></p>

Purpose of Partner In Care

- Improve nurse workflow/efficiency
- Promote teamwork
- Cultivate better communication amongst unit staff
- Reduce demands of Charge Nurse [CN] and afford opportunity for the Charge Nurse to prioritize and focus on leadership role
- Opportunity to practice Peer Feedback and create a stronger professional connection with peers



Poster #1:
 “Assessing nurses’
 perceptions of autonomy,
 collaboration, and teamwork
 in Med-Surg cluster units”

Nurse Engagement Survey 2021 (Pre-Intervention)

Item	ANCC Category	National Nursing Excellence July 2021 Average	Med Surg - (41)	ONC - (21)	ONS - (37)	Pediatrics - (16)	average
When appropriate, I can act on my own without asking for approval.	Autonomy	3.94	3.90	3.81	3.86	3.56	3.78
Within my scope of nursing practice, I have the freedom to act on what I know is in the best interest of the patient.	Autonomy	4.15	4.17	3.95	4.11	4.06	4.0725
Nurses in my work unit help others to accomplish their work.	RN to RN Teamwork and Collaboration	4.29	4.27	4.35	4.14	4.44	4.3

Nurse Engagement Survey 2022 (Go-live June 2022)

Item	ANCC Category	National Nursing Excellence July 2022 Average	Med Surg - (38)	ONC - (19)	ONS - (30)	Pediatrics - (16)	average
When appropriate, I can act on my own without asking for approval.	Autonomy	3.90	3.95	3.84	3.70	3.56	3.76
Within my scope of nursing practice, I have the freedom to act on what I know is in the best interest of the patient.	Autonomy	4.10	4.13	4.21	4.17	3.94	4.1125
Nurses in my work unit help others to accomplish their work.	RN to RN Teamwork and Collaboration	4.27	4.21	4.63	3.97	4.31	4.28

Item Performance: Improvement Focus	Autonomy		RN to RN Teamwork and Collaboration			
	When appropriate, I can act on my own without asking for approval.		Within my scope of nursing practice, I have the freedom to act on what I know is in the best interests of the patient.		Nurses in my work unit help others to accomplish their work.	
Performance Summary: Percent of Units Outperforming Benchmark	51.43%		77.14%		65.71%	
Work Unit	Score	Benchmark	Score	Benchmark	Score	Benchmark
Med Surg - Catherine Gomez (40)	3.88	3.90	4.33	4.10	4.28	4.27
ONC - Glaiza Marie Farnal (23)	4.09	3.90	4.22	4.10	4.39	4.27
ONS - Elvira Mae Delfin (30)	3.73	3.90	4.13	4.10	3.97	4.27
Pediatrics - Glaiza Marie Farnal (13)	3.08	3.90	3.85	4.10	4.54	4.27

Exploring Nurse Autonomy, Collaboration, and Teamwork in Med-Surg Cluster Units: Partner in Care, a Quality Improvement Project

Anna Paz Mercado, BSN, RN, ONC; Natasha Limosnero, BSN, RN, PHN, CMSRN; Earl Fulgencio, BSN, RN, RN-BC; MJ Andalio-Angeles, RN, FCN; Liezi Anne Duesdieker, BSN, RN, CMSRN; Maybelle Peters, BSN, RN, CMSRN; Lisa Sandberg, BSN, RN, CPN; Brittnee Sandoval, BSN, RN, CMSRN; Catalino Santos Jr., BSN, RN, RN-BC

Background

The Nurse Engagement Survey is designed to capture nurses' perspectives surrounding factors affecting nurse job satisfaction and engagement (Dempsey & Reilly, 2016). The survey helps our leaders and professional governance structures to make data-driven decisions to improve the satisfaction of clinical nurses within our organization. The Med-Surg Unit Practice Council (UPC) is dedicated to collaborating with our leaders to help improve nurses' satisfaction in the Med-Surg cluster units.

The Nurse Engagement Survey results for Med-Surg cluster units in 2021 showed scores below benchmark on Autonomy and RN to RN Teamwork and Collaboration categories on the following items:

”

“When appropriate, I can act on my own without asking for approval.”

AUTONOMY

”

“Within my scope of nursing practice, I have the freedom to act on what I know is in the best interest of the patient.”

AUTONOMY

”

“Nurses in my work unit help others to accomplish their work.”

RN TO RN TEAMWORK & COLLABORATION

The purpose of this project was to better understand staff perception on the low-scoring statements in the domains of Autonomy and RN to RN Teamwork and Collaboration and to effectively formulate better strategies to improve scores.

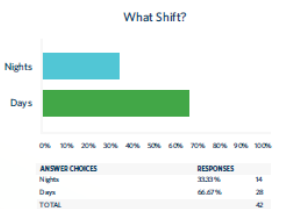
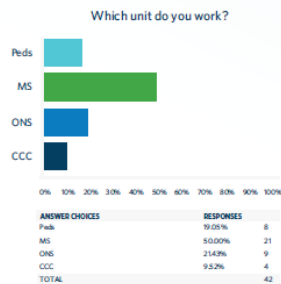
Methods

The first step was to send out a survey to all Med-Surg RN staff. Our questions consisted of the following:

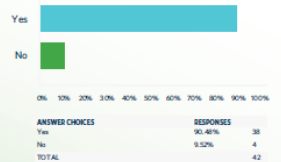
1. Which unit do you work in?
2. What shift?
3. Do you feel you have autonomy in your nursing practice?
4. What is your understanding of autonomy?
5. How can we promote teamwork and RN to RN collaboration in our units?

The survey was sent out to all Med-Surg RN staff and yielded a 36.2% response rate. Our team reviewed the open-ended comments and grouped them into themes. Based on staff feedback “RN buddy system. Have an assigned buddy each shift to support each other,” our Med-Surg UPC discussed the concept of team nursing and decided to adopt the concept of team nursing in a new initiative: Partner in Care.

Results



Do you feel you have autonomy in your nursing practice?



Common Theme Responses for Autonomy	
Critical Judgement/ Thinking	<ul style="list-style-type: none"> • “Ability to critically think and take necessary actions.” • “Being able to use clinical judgment in situations and communicating with the MD and others involved in the care.”
Professional Decision-Making	<ul style="list-style-type: none"> • “The ability to act upon my own guidance and principles knowing that they align with the values and policies of Salinas Valley Health.” • “Ability to make decisions in my unit within the scope of nursing and hospital policies. Freedom to suggest.”
Professional Independence	<ul style="list-style-type: none"> • “For me, autonomy means I can do my nursing practice in my unit independently based on the Nurse Practice Act of California Section 2725, Salinas Valley Health Standards of Care and Salinas Valley Health Policies and Procedures.” • “Self Governance.”

Common Theme Responses for Teamwork and RN to RN Collaboration	
Promotion of Good Communication & Teamwork	<ul style="list-style-type: none"> • “Create a culture of accountability with emphasis on the importance of continuity of care. Nursing care is continuous and does not rely on one shift alone.” • “Increase communication, establish good rapport with each other, set examples for others that will encourage teamwork, being proactive and taking initiative to meet team needs.”
Support & Professional Respect	<ul style="list-style-type: none"> • “RN buddy system. Have an assigned buddy each shift to support each other.” • “Listen to RN’s concerns regarding the unit and encouraging staff to practice peer feedback instead of back talk. Recognize staff an observing and promoting teamwork.”
Encourage Participation	<ul style="list-style-type: none"> • “Staff engagement and participation in unit and organizational initiatives.” • “Open communication, offer opportunities for development. Don’t judge staff for mistakes, offer support and rewards (vacation, training).”

Conclusions

We are evaluating a new initiative: Partner in Care. At Salinas Valley Health, our Care Delivery Model focuses on Swanson’s theory of caring, which embraces a relationships-based, collaborative approach, emphasizing partnership with colleagues, patients, families and the community (Salinas Valley, 2017). Excellent care starts at the bedside. Working autonomously within our scope of practice and with a partner helps enhance the quality of care we provide to our patients. The goal of Partner in Care is to strengthen the relationships between nurses caring at bedside. Stronger relationships and respectful open communications help improve teamwork, professional collaboration and promotion of nursing career satisfaction (Cioffi & Ferguson, 2009). This results in improved patient outcomes, improved patient care, reduction of medical errors and improved patient satisfaction. This reflects on Salinas Valley Health’s Professional Practice Model of taking PRIDE in delivering care for every patient every day.

We presented Partner in Care at a Med-Surg staff meeting, during shift change huddles, and at a poster presentation at the Fall Professional Fair. It was implemented in June 2022. We will review Nurse Engagement Survey scores in June 2023 to assess if scores in Autonomy and RN to RN Teamwork and Collaboration are above national benchmarks. We will also conduct a follow-up internal survey to gain understanding of nurses’ opinions and feedback on Partner in Care. We are hoping that we can use the lessons learned from this initiative to strengthen the relationship between staff while also improving patient safety, patient care and patient satisfaction.

References

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Salinas Valley Memorial Hospital. (2017). *Professional Practice Model* [PowerPoint Slides]. STARnet. Retrieved June 4, 2022, from https://star1.e.svmh.com/Communities/~/CollaborativeCare/ourcd/_layouts/15/WopiFrame.aspx?source=136488DF5-D4B0-464E-94EC-8DBFBC825943&file=PPM%20Educational%20Overview_8.10.17.pptx&action=default

What’s Coming Up...

- Hospital Acquired Pressure Injury Action Plan
 - To reduce incidence of HAPI Stage 2 and above in 3 Main for Q3 & Q4 2023
- Standardizing Oral Care
 - To prevent/reduce incidence of Non-ventilator Hospital Acquired Pneumonia [NVHAP] by focusing on standardizing oral care regimen and accurate documentation



**Chest Pain Program
October 23rd, 2023**



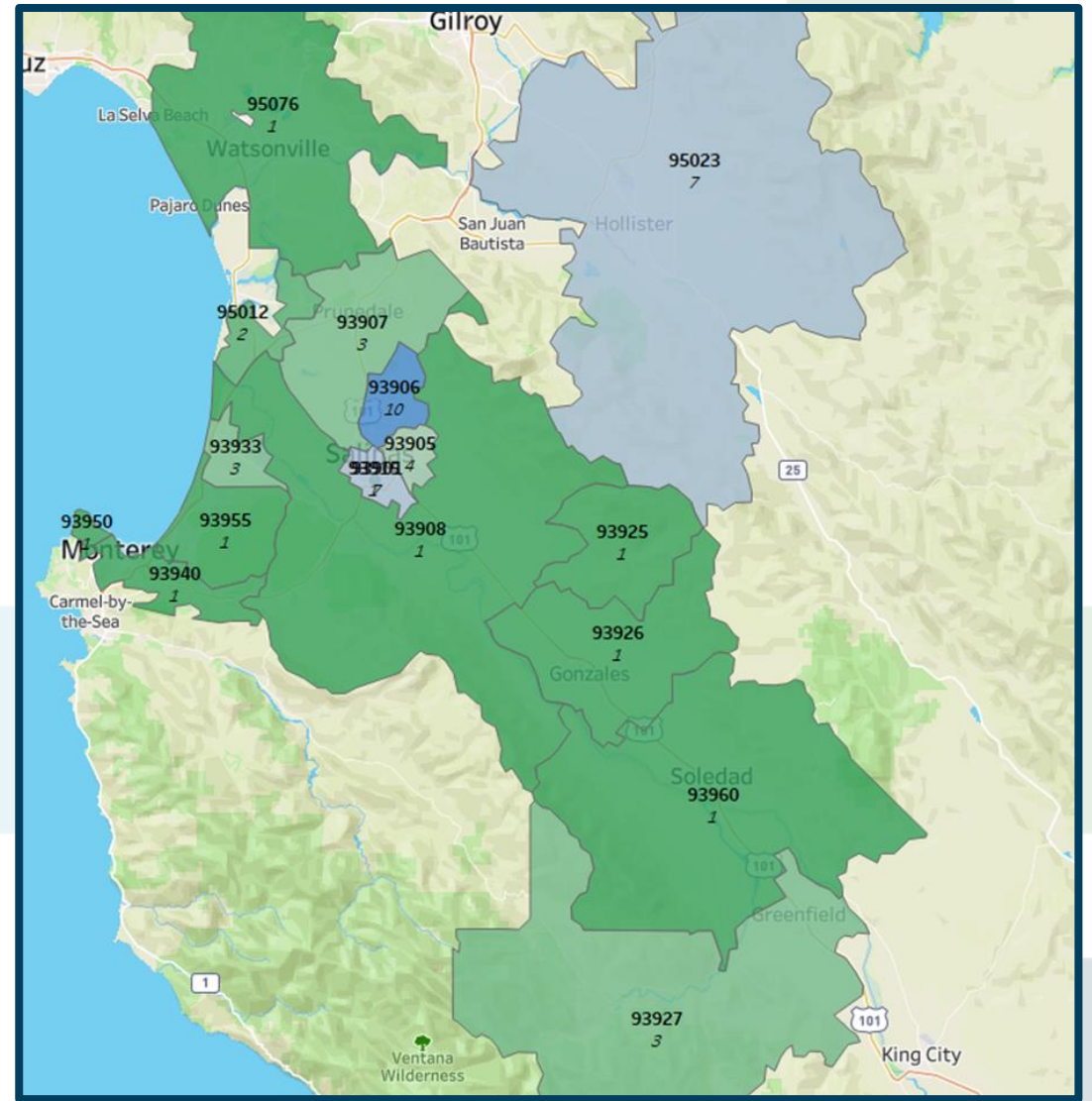
Patient Safety Work Product (PSWP) for Quality Improvement Purposes
Patient Safety and Quality Improvement Act of 2005 (PSQIA)

Code STEMI Performance Measures



Designated STEMI Receiving Center

- Designation by Monterey County EMS Agency
- STEMI data access via Get With The Guidelines – CAD for ongoing performance monitoring
- Performance evaluation reviewed at County STEMI meetings
 - Includes all providers that treat/transfer STEMI patients



2023				
MEASURE	Q1	Q2	Q3 (YTD)	Q4
EMS FMC to PCI ≤ 90 Minutes	75%	60%	67%	
	3/4	3/5	4/6	
Transferring FMC to PCI ≤ 120 Minutes	0%	100%	50%	
	0/2	2/2	1/2	
Door to PCI ≤ 90 Minutes	100%	100%	100%	
	12/12	14/14	13/13	
Door to PCI Average (in minutes)	67	59	56	

*Retrieved from STARnet site for Chest Pain Program – Code STEMI Performance Measures



Chest Pain Certification: TJC Performance Measures

Chest Pain Certification Program

- Obtained through patient data abstraction and entry concerning Performance Measures
- TJC sends specialists to review current program
 - Track patient progression through program from presentation to discharge
 - Review charts with staff to ensure knowledge of program
 - Perform patient interviews to gauge program knowledge and satisfaction
 - Help focus program goals and provide advice to advance program Performance Measures
- Performance measures for performance improvement chosen and approved by program leadership
- TJC Chest Pain Program Certification renewed on 2/21/2023
 - Anticipating Intra-cycle call in Q1 2024

- Chest Pain Program Patient Education Discharge Questionnaire [Pt DC CPQ]
 - For all primary diagnosis AMI patients without documented contraindication
 - See below for more information on this intervention
- Targeted Cardiac Rehab Education [CR Edu]
 - For all primary diagnosis AMI patients without documented contraindication
 - Updates our AMI-specific patient education to better meet TJC and Clinical Practice Guideline recommendations for this population.
- Order for a P2Y12 medication upon discharge [P2Y12 on DC]
 - For all primary diagnosis AMI patients without documented contraindication
- Order for a ACE-I/ARB for LVED <40% upon discharge [ACE/ARB on DC]
 - For all primary diagnosis AMI patients without documented contraindication

2023				
	Q1	Q2	Q3 (YTD)	Q4
Pt DC CPQ	41%	46%	48%	
	14/34	25/54	15/31	
CR Edu	97%	98%	100%	
	32/33	60/61	35/35	
P2Y12 on DC	91%	92%	97%	
	29/32	47/51	29/30	
ACE/ARB on DC	100%	100%	100%	
	6/6	6/6	6/6	

*Retrieved from STARnet site for Chest Pain Program – TJC Performance Measures

Quality Update 2023

SVH Nancy Ausonio Breast Health Center

Amy Lantis Stemerman, MD

Medical Director, Breast Health Center

Co-Medical Director, Diagnostic Imaging

Background

- Opened in June 2011
- Since 2011 >1,500 Breast Cancer patients
- 2022 157/538 new breast cancer patients at SVH or 29% cancer program
- 2023 year to date 145 new breast cancer patients



Nancy Ausonio Breast Health Center



- ACR Designated Comprehensive Breast Imaging Center
- ACR National Mammography Database (NMD) Participant
- Statistics cited from NMD, computer-generated from MQSA compliant MagView tracking program, and SVH Cancer Registrar

Quality Measures Screening Mammography

- **Recall Rate**
- **# Biopsies Recommended**
- **Positive Predictive Value (PPV2)**-Number and percent of screenings with recommendation for biopsy with cancer result within 12 months
- **Early Cancer Detection Rate (<10mm)**

Screening Mammography

>14,000 screening mammograms per year

RECALL RATE

	2022	2023 (Q1)
SVH	9.87%	6.77%
NMD	9.94%	9.44%

Screening Mammography

BIOPSIES RECOMMENDED

	2022	2023 (Q1)
SVH	1.82%	0.85%
NMD	1.69%	1.45%

Screening Mammography 2023 (Q1)

- **Positive Predictive Value (PPV2)**-Number and percent of screenings with recommendation for biopsy with cancer result within 12 months

	2023 (Q1)
SVH	16.67%
NMD	17.69%

Screening Mammography 2023 (Q1)

- Early Cancer Detection Rate (<10mm)

	2023 (Q1)
SVH	40%
NMD	35.83%

Nancy Ausonio Breast Health Center

- Meets or exceeds national quality screening mammography standards
- Mammography regulations are some of the strictest federal regulations in medicine
- Easily and readily tracked
- Patients and clinicians should feel confident about the **QUALITY** and **SAFETY** of screening at SVH

Thank You

- MAMMOGRAPHY SAVES LIVES
- Yearly screening mammography starting age 40 or sooner if high risk

PUBLIC INPUT

CLOSED SESSION

*(Report on Item to be
Discussed in Closed Session)*

*RECONVENE OPEN SESSION/
REPORT ON CLOSED SESSION*

ADJOURNMENT