

# The Pulse of Nursing



ALBANY MED Health System  
GLENS FALLS HOSPITAL



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## Message from the CNO

The first quarter of this year has flown by, and we have many initiatives underway. Our work to build an integrated EMR across the health system is progressing well. The clinical workgroups have been working to standardize practice and documentation in many areas. We are excited to bring greater efficiency to routine assessments and care practices to make charting more streamlined and less redundant for our clinical team!

Among our top organizational priorities are the following:

- Creating a safer and more secure work and care environment
- Improving RN and PCA staffing across all areas
- Improving nurse retention
- Fostering wellness and work/life balance
- Optimization of Operating Room efficiency and volumes
- Reducing Emergency Department length of stay for discharged patients

These focus areas are directed at strengthening our workforce and financial position so we can deliver an exceptional care experience for our patients and community. Your participation through our shared leadership councils, staff meetings, and organizational forums and surveys is so critical to ensure you have a meaningful voice in issues that impact your work. I am very much looking forward to our Annual Nursing Strategic Planning Meeting, which is scheduled for early May. This is an opportunity for us to

evaluate what we accomplished from last year's plan, identify new priorities, and establish key action items with representatives from nursing leadership, the core councils and unit-based councils, and other clinical nurses.

I have had some excellent clinical shadowing experiences in the past few months with some exceptional nurses: **Rory Beaudet, RN, T6**, **Courtney Moseman, RN, 2W**, **Cassandra Morin, ANM, T3**, **Krista Millington, RN, ED**, **Chris Carillo, RN, ED**, **Grace Lyons, RN, PAT**, **Kayla Nowicki, RN, 4W**, and **Rechelle Bullard, RN, CM**. I appreciate the generosity of your time and willingness to offer me the opportunity to learn the nuances of your work and all of its challenges. I am excited for my upcoming adventures with the Vascular Access team and T5!

I am also excited about the amazing work that has been started by our newly formed Caritas Committee. This group is the most genuinely engaged and caring group to work with. My co-chair, **Kelly Hendricks, RN, T2**, has more to share about this in her article, and we are looking forward to sharing more about the committee's work during Nurses Week, so stay tuned! Here's hoping we will experience a gentle Spring with warmer temperatures and more sunshine to carry us forward!

Donna



## May/June Education Opportunities

### BLS

Full Cert: 5/8, 5/22, 5/29, 6/5, 6/26, 6/19

Recert: 5/26, 6/23

### ACLS

Full Cert: 5/31 & 6/1, 6/7, 6/8

Recert: 5/3

### PALS

Recert: 5/19

\*Please sign up in Oracle! Seats are limited and fill up quickly!

## Buzz on the Blog

### CLINICAL PRACTICE ALERTS

*There have been many recent changes, be sure to check these out on GFH Intranet:*

<https://intranet.glensfallshosp.org/patient-care/clinical-practice-alerts>

- Dual RN Witness for IV Chemo
- Blood Transfusion 4-Hour Rule
- Enhanced Nasal Cannula Look-A-Like
- NEW Shiley – Flexible Trach Tubes
- Baxter Spectrum IQ IV Pump Software Upgrade
- OR Preop Checklist
- Limb Alert Wristbands
- Incontinence Management
- Chest Tubes Atriums
- Nebulized Duoneb Shortage
- CAUTI Prevention
- Oral Care Protocol for ALL Non-Vented Patients
- TPN Tubing with Filter
- Total Joint Program Update
- Changes to the Patient Assessment Policy for Med/Surg



## Code Lavender

By: Kelly Hendricks, BSN, RN

The word “code” connotes a sense of importance and urgency, requiring us to drop everything and help someone in dire need. Emergency responses in hospitals happen every day and though we may be resilient and even desensitized to these traumas, we are still affected. Stresses of emergencies compound onto responsibility for daily acute physical and emotional needs of patients. Much of this stress may become internalized as we put our own needs aside to care for others, and we may even reach emotional breaking points on occasion.

Glens Falls Hospital has initiated a committee dedicated to responding to employees who demonstrate a need for holistic emotional support. The Caritas Committee is an executed interpretation of the Code Lavender initiative started by the Cleveland Clinic in 2012. This response acts as a crisis management tool following traumatic incidents,

providing affected employees with support through a variety of means such as physical presence, debriefing, complementary therapies, and additional resources.

The Caritas Committee is also dedicated to the maintenance of emotional wellbeing and stress management. The Code Lavender movement has been adopted by hospitals nationwide and has been positively received, with qualitative data demonstrating high rates of satisfaction. The committee looks forward to engaging staff to decipher where and how the unique needs of Glens Falls Hospital employees may be met. Meetings remain open to all, meeting virtually every other Wednesday. I am privileged to be co-chair of this committee and will gladly be a resource to anyone wishing to learn more or to be a part of this positive change for the betterment of our overall mental, physical, and emotional wellbeing.

## Did You Schedule Your Colonoscopy?

By: Stephanie Rollo, BSN, RN, CGRN

The COVID-19 pandemic made many of us feel like things were out of our control. The rules and regulations at times seemed to change by the hour. We constantly tried to adapt best practices for safety and to meet the needs of our patients, families, and staff. It impacted the supply chain, dictated the availability of items, and limited our resources. There were many staffing challenges including turnover, shortages, and reassignments to fill the needs.



Another major shift was that non-urgent, routine screening and preventative procedures were put on hold to meet pandemic regulations and to conserve and allocate those critical resources, according to guidance issued by the Centers for Medicare & Medicaid Services (CMS) (Issaka & Somsouk, 2020). To that end, screening colonoscopies were included in the list of things that needed to be postponed. Some organizations canceled procedures due to staffing needs or overall constraints. In addition, patients canceled or rescheduled due to fear and safety concerns. The millions of adults who were already past due were at an increased risk of delayed diagnoses and cancers (Issaka & Somsouk, 2020).

Endoscopic procedures were prioritized based on their indications. Providers utilized telehealth and other methods to meet their patients' needs when they could not perform routine colonoscopies. Providers now work to prioritize and provide care to the backlog of all of those who had their exams delayed since elective procedures have resumed.

Despite being one of the most preventable types of cancer, The American Cancer Society data shows that colon cancer is

the 2<sup>nd</sup> leading cause of cancer deaths in the United States of men and women combined (cancer.org, 2023). It is estimated by the Colorectal Cancer Alliance that in 2023 over 153,000 people will be diagnosed with colorectal cancer and 52,550 will die because of it (2023). Screening colonoscopy is a potentially life-saving procedure that can prevent the development of colon cancer, but only if people get tested. The earlier colon cancers are found, the more treatment options there will be available; before it has the opportunity to spread.

Screening colonoscopies were previously recommended for those over age 50 and those at increased risk for colon cancer. Young-onset colon cancer is currently on the rise and The American Cancer Society is now recommending that the regular screening age be lowered to 45 years of age for those at average risk for colorectal cancer (2020, Nov.).

During times of a pandemic, we should not lose sight of disease prevention. Colorectal cancer is one of the few cancers with multiple screening options (Issaka RB, Somsouk M., 2020). Educating patients and families as well as offering other screening options are very important to ensure that those who require colonoscopies get the care that they need when they need it. We need to work towards a more defined approach for providing screenings to avoid the significant impact of delaying care.

We may not see the true impact of the delayed exams for a while. Many patients went undiagnosed, and we could see an increase in late-stage cancers due to the lack of appropriate interventions (Kopel, Ristic, Brower & Goyal, 2022).



Take control of your health. Contact your provider and schedule your screening. Preventative care should not wait. The earliest signs of colorectal cancers are NO symptoms. Never ignore new or worrying symptoms such as a change in bowel habits, rectal bleeding, unexpected weight loss, abdominal pain, or new or unexplained anemia. Screening is SO important. It could save your life!

### References

- American Cancer Society. (2023, Jan. 13). Key Statistics for Colorectal Cancer. *Cancer.org*. <https://www.cancer.org/cancer/colon-rectal-cancer/about/key-statistics.html>
- Colorectal Cancer Alliance. (2023). Know the Facts. <https://www.ccalliance.org/colorectal-cancer-information/facts-and-statistics>
- Holland, J., Cwintal, M., Rigas, G., Pang, A. J., Vasilevsky, C. A., Morin, N., Ghitulescu, G., Faria, J., & Boutros, M. (2022). The impact of delaying colonoscopies during the COVID-19 pandemic on colorectal cancer detection and prevention. *Surgical endoscopy*, 36(12), 9364–9373. <https://doi.org/10.1007/s00464-022-09211-z>
- Issaka, R. B., & Somsouk, M. (2020, May). Colorectal cancer screening and prevention in the COVID-19 ERA. *JAMA health forum*. Retrieved February 26, 2023, from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8443218/>
- Kopel, J., Ristic, B., Brower, G. L., & Goyal, H. (2022). Global Impact of COVID-19 on Colorectal Cancer Screening: Current Insights and Future Directions. *Medicina (Kaunas, Lithuania)*, 58(1), 100. <https://doi.org/10.3390/medicina58010100>





## First Annual GFH Nurse Draft – Coming July 2023!

By: Katie Fowler MS, RN, CCRN-K, NPD-BC

Historically, nurses wishing to transfer to a different unit/department within Glens Falls Hospital have felt secretive about applying for a new opportunity. The internal hiring process can often feel awkward and sometimes nurses leave the organization before even looking for an internally-posted position.

Cue the new and exciting internal transfer program! That's right, just like in baseball, this draft will act as a source of recruitment within our organization to make the internal transfer process less secretive and more fun! The Nursing Professional Development Council, Nursing Leadership Council, and Human Resources have endorsed this program and we are all excited to kick it off in July.

The purpose of this program is to retain GFH nurses by making the internal transfer process more transparent, guided, and exciting. This program will also help predict turnover of positions and improve our ability to fill vacancies before they become vacant.

So, I bet you're wondering how it works. The GFH Nurse Draft will be open for all current nurse employees in good standing that have completed 6-months or more of their

current position. A brief survey will be sent via GFH email on July 1<sup>st</sup>, 2023. Units/departments participating in the draft will be listed on the survey. If you are interested in transferring to a new department, you'll want to complete the survey so the leadership team can help support your professional career goals within the organization. Once the survey closes on July 15<sup>th</sup>, your interest will be reviewed and forwarded to the appropriate department(s). August will bring career conversations with the Nurse Managers and/or Clinical Nurse Educators to provide guidance, facilitate shadows, and aide the interview process. September will be used to plan the transfer timeline and new unit orientation and employees in the draft can anticipate moving anytime between October-December.

Participants in the draft will be given a survey to evaluate the program to identify opportunities of improvement for 2024.

Please reach out to **Katie Fowler** with any questions: [kfowler@glensfallshosp.org](mailto:kfowler@glensfallshosp.org) or 518-926-5416.



## Dementia Care

By: Jordan Speshock, RN

In the recent months, there has been an increase in our dementia and long-term care placement population. These increasing numbers have prompted some concern and a desire to make some changes on our unit. We wanted to create some habits for this patient population that could instill a sense of normalcy for them during their stay. After researching beneficial ways to work with these populations, we found that social group activities benefit people with dementia by giving them a sense of entertainment and companionship. We decided on gathering these patients for mealtimes. When doing this, we saw a decrease in challenging behaviors and an increase in socialization and self-esteem among our patients. When gathering for meals, these patients exchange stories and have conversations that they wouldn't get the opportunity to have if they were isolated to their rooms. We also decided to dedicate a room on our floor for activities for these patients. Now we have many activity options for them to participate in including books, crossword puzzles, checkers, word searches and more. Having these activities helps increase cognitive stimulation and allows the patients to exercise their minds while encouraging social interaction with others. These changes have had a positive impact on our patients as well as our staff.

\*See "Ralph's garden" below – these are growing in the T3 family room windowsill and soon will be sent out to staff!







## Work Ethic in Nursing

By: Mary Noto, BSN, RN

One of the best things about the nursing community is our ability to learn from each other. In nursing, good teamwork is essential in establishing a positive work environment, which directly contributes to better patient outcomes.

Young nurses can bring the most up-to-date, evidence-based practice to the work environment, while experienced nurses can share their vast clinical and practical knowledge. Young nurses also stand to learn a lot from experienced nurses. Experienced nurses understand and recognize the work ethic it takes to be successful in healthcare. Experienced nurses and new nurses can meet in the middle in order to create the best work environment and deliver the best patient care.

Experienced nurses have an amazing skill set: they can draw from a huge bank of prior experiences that can help guide both patients and new nurses through the situation at hand. These nurses anticipate events, know what to look for clinically, and can apply the steps needed to safely handle the situation. These skills and their knowledge base contribute to their effective and successful work ethic. Precepting is an excellent avenue for experienced nurses to share their knowledge and foster a younger nurse's work ethic.

Young nurses, meanwhile, enter hospitals prepared with up-to-date medical

knowledge and new schools of thought about the best ways to ensure patients are receiving the best care possible. They can help experienced nurses potentially think differently about how they approach certain aspects of the field.

Having a mentor that was able to work with me was critical when I first entered the nursing field a little over a year ago. My personal work ethic is driven by my love of the nursing field. To myself and to many others, nursing is more than just a job—it is a passion. I feel so grateful that I get to go to work every day to do what I love, so I show up wanting to do my very best. With that in mind as a young nurse, I learned through my mentors that you cannot do anything alone. Nursing is an extremely stressful profession that is both physically and mentally taxing. I realized that nurses must lean on each other for help to be successful. There is value in teamwork, and great teamwork can be used as a foundation to inspire someone to work harder. It was through my mentor that I learned this value, and that mentorship is a two-way street. I hope that I, as a young nurse, was also able to help teach my mentor something new about the field they took with them into their patient care practice.

The Glens Falls Hospital nurse residency program does an excellent job in pairing young nurses with experienced preceptors. The nurse residency is structured in a way

that not only sets the resident up for success, but the preceptor as well. The program values experienced nurses, while also recognizing the fresh ideas or perspectives new residents may bring. New graduate nurses have the distinct advantage of having the most current evidence-based practice methods fresh in their minds. With that, the nurse residents can bring these practices to the floor and further expand the knowledge of their preceptor.

I have personally gone through the nurse residency program and can attest to the fact that each preceptor I worked with valued my perspective. These preceptors were able to help me learn the skills I needed to be successful as a nurse. This is a great example of how teamwork can be utilized to foster work ethic.

Experienced nurses and younger nurses have a lot to offer each other. Through their collaboration, they can promote an environment that values a nurse's strong work ethic and makes sure both nurses and patients are well-taken care of.

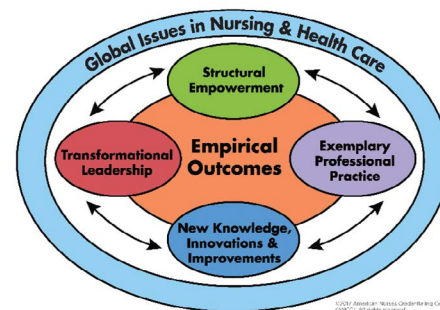




### Magnet Memo

By: Jamie Aliperti, MS, RN, CNML, Magnet Program Director

We are less than two years away from submitting our document for our second Magnet Designation, due on April 1<sup>st</sup>, 2025. To the right is the Magnet Model, the blue oval around the components represents the various factors and challenges facing nursing and health care today. This is what is so powerful about achieving nursing excellence based on the Magnet standards—the standards challenge nurses to problem-solve and think innovatively about their work based on the contemporary issues they face.



The five Magnet components give organizations structure to achieve nursing excellence:

- The **Transformational Leadership** component requires that the leadership team empower nursing staff to make decisions and drive changes that will improve the organization.
- The **Structural Empowerment** requires that the organization has solid structures and processes developed by influential leadership to provide an innovative environment where strong professional practice flourishes and where the mission, vision, and values come to life to achieve the outcomes believed to be important for the organization.
- The **Exemplary Professional Practice** component requires a comprehensive understanding of the role of nursing; the application of that role with patients, families, communities, and the interdisciplinary team; and the application of new knowledge and evidence.
- The **New Knowledge, Innovations, and Improvements** component acknowledges that our current systems and practices need to be redesigned and redefined if we are to be successful in the future.
- The **Empirical Outcomes** component focuses on the outcomes of structures and processes and how they compare to benchmarks. Clinical outcomes refer to workforce outcomes, patient outcomes, and organizational outcomes.

The work that we are doing at Glens Falls Hospital to meet the excellence standards set by the Magnet program has improved our practice in all the components. Magnet recognition validates the work nurses do daily in healthcare to improve quality outcomes, work environment, and patient experience. We increase our influence and professional status with our work to improve nursing and healthcare in general.

## SHARED LEADERSHIP: THE COUNCIL CORNER



### PROFESSIONAL DEVELOPMENT COUNCIL

**Chairperson:** Audrey Turner, BSN, RN, CPAN

**Chair-elect:** James Gustafson, BSN, RN, CCM

- This council met the goal of increasing shared leadership participation for 2022 and will sponsor an informational table as a biannual event.
- Nurses Week preparations discussed!
  - May 6<sup>th</sup>- Belinda has added a Darn Tough Hike at Wilton Wildlife Preserve
  - May 7<sup>th</sup>- Self-care Sunday. Post pictures to a View from Our Unit!
  - May 8<sup>th</sup>- Blessing of the Hands, Crazy Sock Day
  - May 9<sup>th</sup>- Wellness Booths CLC
  - May 10<sup>th</sup>- Unit-to-unit exchange—You've been Nursed!
  - May 11<sup>th</sup>- Award Ceremony
  - May 12<sup>th</sup>- Bake Sale for the Nurses Honor Guard. Wear white in honor of Florence Nightingale's birthday!

### NURSING INFORMATICS COUNCIL

**Chairperson:** Stephanie Rollo, BSN, RN, CGRN

**Chair-elect:** Trisha LaForge, BSN, RN, MEDSURG-BC

- Save the date for the Spring Into Computers Skills Fair, Ft. Margaritas and Monitors: Wednesday, May 24<sup>th</sup> 7:00 am–3:00 pm in the CLC. Check your email for the stations included!
- Downtime video created to demonstrate how to use the 724 (Downtime) computers and other helpful tips. Check out one of the links below to view the video.
  - Check out the YouTube link below to view the video: [https://youtu.be/o\\_gwWbCzkKQ](https://youtu.be/o_gwWbCzkKQ)
- Epic updates: Clinical informaticists attended 24 hours of training on behind-the-scenes functionality.

### NURSING PRACTICE & QUALITY COUNCIL

**Chairperson:** Garret Seabury, BSN, RN

**Chair-elect:** Faith Pollock, BSN, RN

- Sepsis Screening and resource tool
- System-wide initiative to reduce CAUTIs. Sage Primo/PrimaFit (male and female) external catheters are now supplied on all units and will replace the PureWick and condom catheters.
- Oral care education complete and suction toothbrushes are stocked on the units. This is increasing our efforts in preventing hospital-acquired pneumonia.
- CADD Solis pump training provided, go-live date TBD...don't forget to check your email for updates!

### NURSING RESEARCH COUNCIL

**Chairperson:** Christie McAvey, BSN, RN

- Welcome new members!
- GI collected patient BMI data for their pre-intervention gel roll initiative. The focus is to improve procedure times. Preliminary findings show improved intubation times and less manual manipulations.
- New research projects underway in PACU, 2W, and T3.

### NURSING COORDINATING COUNCIL

**Chairperson:** Karla Gensch, BSN, RN, CGRN | **Chair-elect:** Garrett Seabury, BSN, RN

- A Caritas page will be added to the intranet.
- High School to Health Care May 2<sup>nd</sup> 4:00 pm-8:00 pm.
- Nursing recruitment discussed with large orientation groups in May and June!
- Nursing satisfaction surveys results show that improving communications between departments is an area for opportunity.
- **Steve Wood**, Crisis Intervention and Safety Specialist and **Taylor Mickle**, Patient Safety Officer discussed the on-going training for de-escalation and managing challenging patients.