Educating the Nurses of Tomorrow
Dear Nursing Colleague,

I often say that the Hospital Center provides lifelong learning opportunities for any nurse, and as you will read here, the scope is growing quickly.

Thanks in part to the development of our innovative Center for Excellence in Nursing (CEN), we’ve increased options for nursing professional development. We’re building a simulation laboratory where we will pioneer methods for training nurses in needed specialties like OR nursing. We’ve expanded our evidence-based research projects and the number of our nurses presenting at professional conferences.

We are also growing our bridge programs, offering training in more specialties than most hospitals in the region. One of the education advances particularly close to my heart: the launch this year of the Nursing Leadership Academy, focused on developing the many skills and credentials nurses need to be effective and passionate leaders in the evolving health care arena.

None of this growth would be possible without enormous support. Both J.D. and Genevieve Murphy, who recognize and deeply appreciate the importance of nursing, have led the philanthropy that gives us our momentum and so many possibilities. As chair of the Washington Hospital Center Foundation, J.D. keeps nursing front and center in many of the Foundation’s funding efforts.

In addition, the CEN is supported by grants and by many of our own nurses, who have dedicated their personal philanthropy to growing a program that supports them.

Whether it is learning new skills, advancing in a cutting-edge medical specialty, researching a clinical protocol or simply beginning your career, the Hospital Center provides the education, the tuition support and the opportunities to help you keep moving forward. Nursing in the 21st century will require lifelong learning. Together, we’re making that possible.

Susan Eckert, MSN, RN, NEA-BC, CENP

SENIOR VICE PRESIDENT AND CHIEF NURSING EXECUTIVE, MEDSTAR WASHINGTON HOSPITAL CENTER
A Bridge To Somewhere

Nurses at MedStar Washington Hospital Center have the opportunity to sign on to a “bridge” program, an in-depth training and mentoring program that teaches the skills needed in highly specialized nursing practices. “These programs are incredibly popular” notes Michael Clarke, MBA, RN, NEA-BC, director of nursing education. The five main bridge programs—critical care, emergency medicine, perioperative services, cardiac care and women’s and infants’ services—are offered once per quarter. Here, three nurses describe their bridge experience.

Lauren Greene, RN, WIS Bridge, works in Mother/Baby
When I came to the Hospital Center in 2013, I worked on the med/surg unit 2F, but I knew I wanted to end up in the mother/baby practice. My mom, Gail Coles, has worked there for the past 41 years, and it’s where I was born. The hands-on learning of the bridge program was invaluable. One of the most important parts, I believe, was the simulation modules. We learned how to react in obstetrical emergencies, newborn resuscitation, and even participated in a mega-code before we worked with the babies. The simulations provided me with a lot of exposure and confidence in myself when working in my practice. Great educators were always around to give a helping hand, plus clinical coaches, so I felt there was help if I ever needed it. That comfort of always having help kept me at ease throughout the training.

Jillianne Jackson, RN, OR Bridge, works in Third Floor OR
I entered the OR bridge because I had worked in the pre-operative holding area and the PACU, and wanted a way to learn more about perioperative services. In the OR bridge, you learn about every step of the surgical process, from scrub to materials to anesthesia. What I didn’t expect was the autonomy the nurse has in the OR. You are the patient’s advocate right before they go into the procedure, and then all the way through to the recovery area. You have to be very organized and at the top of your game to be aware of everything that’s going on. They call it “OR ears”—a way of listening to everything at once. What I found I really like about OR nursing is that you are absolutely part of a team. The nurse works in concert with the surgeon, the tech and the anesthesiologist to make the procedure a success.

Casey Jo Collins, RN, Critical Care/Cardiac Bridge, works in CVRR
I entered the bridge program because I wanted to work with increased acuity patients. When I was working on 4NW, we would get the step-down cardiac patients from the CVRR, and that intense environment seemed challenging and rewarding. The most surprising aspect of this bridge is how much information you are required to know. You get more in-depth pathophysiology about cardiac recovery; you learn about pacers and balloon pumps. You don’t even start on LVADs until you’ve been working here for a few months. So this is a great program for nurses who are eager to learn a lot. You also get enormous support. In the CVRR, we work together so closely that every patient is everyone’s patient. Your colleagues want you to do well, they support you constantly, because they want all the patients to do well. They want you to ask questions and learn what you don’t know. It’s been so positive that I see myself staying in this area for a while.
To provide optimal patient care and attract the nurses of tomorrow, the Department of Nursing at MedStar Washington Hospital Center is expanding the education, research and clinical rotations it offers at its fastest rate ever.

In the past four years, the number of nursing educators has doubled. The number of nursing research papers and posters went up 100 percent just last year. Nursing areas including the sterile processing department, which cleans and supplies all equipment for the 38 Hospital Center operating and procedure rooms, asked for and received an educator to keep ahead of rapid developments in scopes, drills and other tools they process.

Almost every nurse hired today has a Bachelors of Science in Nursing, notes Chief Nursing Executive Susan Eckert, MSN, BSN, NEA-BC, CENP. New-to-practice nurses must participate in a one-year University HealthSystem Consortium (UHC) residency program with monthly classroom time and an evidence-based research project.

Technology upgrades, such as the global shift to electronic medical records, have meant even long-time nurses spend more and more time in a classroom. Seismic shifts in medical care are driving nurses to education: The Association of American Medical Colleges predicts shortages of 31,100 primary care doctors and 63,000 other physicians in U.S. in the next ten years. Filling the gap: nurses are becoming advanced practice clinicians, like nurse anesthetists and nurse practitioners, at record rates. The number of licensed NPs has doubled in the past ten years to 205,000, according to Consumer Reports.

What this means for acute care teaching hospitals is that demands on nursing departments for constant education are becoming an ever-larger financial and practical commitment.

With its tuition reimbursement and robust bridge programs, the Hospital Center attracts more and more nurses with specialist ambitions. That, too, raises education demands—it costs approximately $60,000 to take a nurse through a training program, and requires experienced nurses to serve as clinical coaches, or mentors, on a unit. “The idea of one job for a lifetime is no longer true in society in general,” notes Janis Donnelly, MBA, MS, BSN, vice president of Nursing Excellence. “For a hospital, that means you have to provide internal opportunities to grow.”

“As an academic medical center, we have always provided a lifelong learning opportunity,” says Eckert. “We’re just offering more now.” This year Eckert started a Nursing Leadership Academy to provide management training for nurses who want to move into executive roles. “Thankfully, we are large enough and have the support to take our nurses into 21st century medical care.”

Wound specialists Susan Sardensky, RN (center) and Catherine Spangler, RN (right) teach Nora Njosa, RN, of 1C how to measure a wound.
Most MedStar Washington Hospital Center nurses today think of the Center for Excellence in Nursing (CEN) as a dedicated space for professional development at the Hospital Center, thanks to the new facility that opened in January 2014.

In fact, the CEN was established in 2007 as a partnership with the Washington Hospital Center Foundation as a resource for nurses seeking funding for research, training or conference presentations. It has grown quickly as demand for nursing professional development at the Hospital Center explodes.

The CEN is one of few distinct hospital-based nursing development centers nationwide. It supports nursing innovation and the strategic goals of the Department of Nursing, including clinical education for more than 2,400 members of the Department of Nursing, clinical research and evidence-based practice development, simulation training, presentations and academic posters at national conferences, certification training, academic support and leadership development education.

These professional development opportunities ensure state-of-the-art patient care and help establish evidence-based safety and practice standards for the field.

Research sponsored by the CEN has focused on rapid response teams, patient mobility, neuroscience, wound care, geriatrics and women’s health. In addition, the CEN has worked with the Department of Nursing’s Quality, Safety and Education division to teach hundreds of hours of continuing education credits and provide more than 10,000 hours of unit-based education.

The CEN is funded entirely through grants and individual philanthropic donations from Board members, Foundation members, community members, grateful patients and their families, and associates who give generously through annual payroll deductions.

“Nobody should ever leave the Hospital Center saying they didn’t have the opportunity to grow,” says Patricia McCartney, PhD, BSN, director of nursing research at the Hospital Center. “If it’s not here already, we’ll help them do it.”

CEN training includes (from top right) classes in Left Ventrical Assist Devices (LVADs), simulation classes and classes in equipment upgrades.
Both J.D. and Genevieve Murphy support MedStar Washington Hospital Center with extensive philanthropy, from the MedStar Heart & Vascular Institute to the pioneering Medical House Call Program and the Center for Excellence in Nursing (CEN). In fact, a recent gift will be used to build a simulation lab to train nurses in a number of specialties, including an innovative OR simulation program. In addition, J.D., a grateful patient, is chair of the Washington Hospital Center Foundation and on the Hospital Center Board of Directors. The Murphys tell Center Nurse why they make a special effort to support nurses and nursing education.

**CN: Your gifts to nursing suggest you have a special place in your hearts for nurses.**

**Genevieve:** We do! We have a niece who is a nurse. But more than our family connection, we know nurses are critical. They are on the front line every day, watching over patients. In addition to providing care, the nurse is a critical link between the physician, the patient and the family. I’ve sat in many a hospital with a loved one in the OR or intensive care, and I can tell you the nurse is your lifeline.

**J.D.:** I know that operationally, from [Hospital Center President] John Sullivan on down, there is complete understanding that nurses are vital to the provision of excellent health care at the Hospital Center. [Chief Nursing Executive] Sue Eckert is on the President’s Council, she’s at the Board meetings, and everyone recognizes that nursing is an equal partner to other providers. So supporting our nurses is critical; it’s part of our support of the Hospital Center.

**CN: What motivates you to support nursing education?**

**J.D.:** Having a Center for Excellence in Nursing is the right step forward. When I speak with physicians about what drives them to the Hospital Center from all over the world, they tell me it’s that they treat diseases and conditions here they don’t see anywhere else. The challenge is to create a solution for these patients, and every day of the week, the doctors work hard to come up with the best, most
thoughtful solutions. So, whether you are talking about cardiac care, or cancer, or orthopaedics, you are talking about the best doctors providing state-of-the-art care. That requires nurses who know what they are doing and are given the training to support this advanced medical care.

**Genevieve:** I have aging parents who have had to deal with numerous medical issues. The nurse is their mediator and link to medical knowledge. It’s clear that nurses are critical to helping patients set expectations and understand their treatment. We want to support their continuing professional development, so they can continue to support their patients.

**CN:** Do you think there is a growing awareness of the need for philanthropy to support nurses, and hospitals in general?

**Genevieve:** We understand that the CEN receives donations from a number of nurses at the Hospital Center. Those gifts show that nurses value this kind of research and training. If we can help it grow from there, that would be great. We want to light the way for others who understand the importance of nursing and giving nurses the professional support they need.
Michael Clarke: Room to Grow

When Michael Clarke stepped into the role of Director of Nursing Education this spring, he brought with him his years as a nurse leader on a cardiac unit, and some specific ideas for how to better connect educators and bedside nurses. The first, a mobile app that will alert nurses to classes and other opportunities, will launch this fall. He’s also bringing simulations and other training onto the unit instead of just presenting in a classroom. Clarke sees more room to grow.

One of the reasons nurses have so much opportunity to grow and develop their practice at the Hospital Center today is the robustness of our Nursing Education Department. This past year, we provided more than 1,200 hours of live instruction in more than 28 core courses, and taught more than 2,700 learners in our classrooms. We have a course catalog on StarPort with more than 50 regular programs—everything from a monthly eight-hour basic dysrhythmia interpretation class to specialties in burn nursing or LVAD management. For experienced nurses, we teach classes in clinical coaching and resource nursing. We also orient patient care technicians.

That doesn’t even include our quarterly bridge programs, which give nurses a comprehensive and mentored experience in a new nursing specialty. We also train all nurses at the Hospital Center when we roll out new equipment, as we did with the new Pyxis® medication management technology and will be doing with the launch of MedConnect III next year.

I would say our nurse educators are key to the success of nursing here, and key to the care of our patients. We are often the people nurses and leaders turn to when they have questions, when they need to learn how to do something, or when they need to change something that isn’t working well.

Luckily, we have a group of really smart and dedicated nurse educators who want to do the best job for nurses. They spend countless hours preparing, and they run exceptional programs. Our goal is to also be as responsive as possible to the learning needs of the nurses at Hospital Center. Sometimes that may be arranging an in-service and sometimes it may mean facilitating a specialty certification review course.

Even with all we do, there is still a lot of room to grow. We have special skills days, and I think we can reach even more nurses by developing more innovative ways to let them know when programs are happening. We also know it’s a struggle to get nurses off units into classrooms, so we started bringing simulations to the units in an attempt to reach them where they are working.

As part of their residency program, first-year nurses conduct an evidence-based practice project. There’s a lot of potential there for developing these into presentations at conferences, as a team from 4NW recently did at the University HealthSystem Consortium (UHC) conference.

Probably our biggest opportunities will be in the new simulation lab, which should be up and running by the second half of FY16. This will give us a more robust tool to challenge nurses in a “live” environment.

Our focus is, and always will be, making certain Hospital Center nurses have the opportunities they want to grow and develop new skills and refresh core skills. We are all about creating the lifelong learning environment our nurses deserve.
“I am feeling hot,” says the patient. 
“Do you think I have a fever?”

The nurse appears flustered. She’s trying to take the patient’s blood pressure, the cuff lines are tangled, and now the patient is talking about another symptom.

A difficult situation in any clinical environment, but this is a simulation lab at the George Washington School of Nursing (GW SON) in Ashburn, Virginia. The “nurse” is instructor Patricia Davis, DNP, director of the simulation laboratory, who is pretending to be a novice nurse completely overwhelmed by the slightest request.

Three MedStar Washington Hospital Center nursing educators sit in the control room, providing the voice for the patient and taking notes on the nurse’s performance under pressure.

Watching via camera in another room: the rest of the nurse educator team, taking notes of their own on what works and what doesn’t in a simulated setting.

To provide the most up-to-date education for nurses at the Hospital Center, educators here go outside for instruction and bring their knowledge back to campus. Because the educators are developing a new simulation laboratory at the Hospital Center’s Center for Excellence in Nursing, they are spending the weekend at the GW SON to learn how to script, critique and coach nurses in the sim environment.

“It’s quite a complicated process, and it takes time to get the right scenarios,” notes Davis. Karen Batcheller, RN, one of the simulation voices, agrees. “You want to be reacting and yet you want to stick with the script,” she says. “This is outside anything we have done in a clinical setting, so it is great for us to get the training we need.”
A long-standing Collaborate Governance Practice Council at MedStar Washington Hospital Center is the Nursing Evidence-Based Practice (EBP) and Research Council. “We have two main goals,” explains Lauren Johnston, RN, one of the Council co-chairs. “We want to promote the use of evidence-based practice throughout the Hospital Center. We also want to support and provide guidance for nurses who are pursuing their own research.”

To prepare, members of the Council went through MedStar Health Research Institute’s Human Subjects Research Training and the Program for Ethics Education in Research (PEER) numbers. This background allowed them to review and discuss research policy and ethics for nursing practice.

The Council reviewed data from the MedStar Nursing Research Study and found a gap in Hospital Center nurses’ awareness of research resources and activities. “That led to our first outreach, a program during Nurses Week where we visited units with information,” says Trevor Diaz, RN, co-chair of the Council.

The 13 associate nurses on the council also encourage participation in research dissemination through EBP Rounds, and are available to help any nurse involved in research. The Council meets third Wednesday of every month and welcomes visitors. For further information email the council at whc_nursing_ebp_research_Council@medstar.net.

GROWTH IN RESEARCH

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A Year in Nursing Life: The UHC Residency Program

Every year approximately 300 new nursing school graduates come to MedStar Washington Hospital Center to start their careers. To transition these new nurses to the practice environment, and to educate them about the systems and practices in use in the Hospital Center’s clinical environment, the Department of Nursing adopted the University HealthSystem Consortium (UCH)/AACN Residency Program four years ago. Currently offered in 30 states, the year-long residency serves as a framework, to help take nurses from novice to competent provider.

The program “formalized our residency program, put us in line with the top national standards and reduced turnover of our newest nurses,” says Janis Donnelly, MBA, MS, BSN, vice president of Nursing Excellence. “It gave us an educational framework that works for us.”

Yet the residency program “is always being improved,” notes Michael Clarke, MSN, RN, director of Nursing Education. “We recently redesigned the curriculum to include more focus on professional development and engaging new nurses into their transition into practice.”

Nurses spend their first three months alternating between classroom learning and working with a clinical coach on their unit. “They have to know how to work the Pyxis® medication delivery system to know how to recognize a Code Blue and what to watch for during a transfusion,” says Clarke. “There’s a lot going on with our patients, and nurses need to know how to handle all the variables that come into play.”

Also important, says Clarke, is the evidence-based research project that all new nurses conduct over their first year. “We continue to redesign them to encourage nurses to produce evidence-based practice posters and public presentations to disseminate their findings.”

“There’s a lot of critical thinking and colleague education involved with these projects,” he says. “It’s a great introduction to nursing education.”

To enroll in the more than 80 classes offered to nurses through nursing education, go to StarPort and click on the tab “Departments—Nursing.” Then click on the Education and Professional Development box at the bottom of the page—the course catalog will come up. Also: look for the new downloadable “Ask NED” app that will update you on a mobile device any time new classes are added.
Life-Long Learning in Action

“I’d always wanted a bachelor’s degree. It was just a race to see if I’d get my degree or I’d retire first,” laughs Sheila Smith, BSN, RN. The nurse navigator at Washington Cancer Institute is one of a number of veteran Hospital Center nurses who return to college each year to earn a bachelor’s degree or advanced degree. Smith, who turned 66 this summer and has been at the Hospital Center for 10 years, proudly notes she graduated from Trinity Nursing School the same year as her granddaughter graduated from college.

For Catherine Flack, BSN, RN, it was a matter of finally having time to get her degree. Her 20-year-old son is now in college and “that’s when I went to college myself. It wasn’t easy!” Flack, who has been at the Hospital Center for 28 years and works in the perioperative admissions testing center, begins studying for a Master’s in Nursing this fall. “I’m a good teacher, and we need teachers for nursing school.”

Both credit their supervisors and the Hospital Center with providing the support, scheduling flexibility and tuition reimbursement that helped them achieve their education goals. “We are lifelong learners,” says Flack. “You won’t find a better place to make that education happen.”

Catherine Flack, BSN, RN (left) and Sheila Smith, BSN, RN

ON THE COVER: Nurse educator Charlie Sederstrom, MSN, RN, works with nurses Shanique Cochran, RN, Andrew Velasquez, RN, and Mariama Yilla, RN, in the Center for Excellence in Nursing.