Creation of a role for the DNP prepared nurse in hospital leadership

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One way to open your eyes is to ask yourself, “What if I had never seen this before? What if I knew I would never see it again?”

—Rachel Carson
Objectives

• **Objective 1**: Define the attributes of the DNP prepared nurse necessary for successful transition into the nurse executive role.

• **Objective 2**: Define strategies the DNP prepared leader may use to preserve the value of hospital-based advanced practice nurses during economic hardship.

• **Objective 3**: Define strategies for engaging staff in clinical/translational research in the service sector.
Attributes of DNP in Director Role

• CNS with management experience
• Nursing experience
• Experienced in research and evidence-based practice change
• Willing to expand practice outside of normal scope
Driving Forces for Role Creation

• # CNE direct reports
• Create team out of individuals
• Identify best practices in role implementation
• Improve efficiencies of team
• Create structure
  – Standardize JDs
  – Productivity reports
Director, APN and Research

• Requires doctoral level education
• Provides a reporting structure for APNs/CNSs
• Responsible for ‘Generating New Knowledge’
• “Inspiring Advancements in our Caring Profession”
Preservation of the CNS Role

- Flexibility
- Align to core measures and key metrics
- Chair/liaison to key nursing mtgs in professional practice structure
- Engage the knowledge worker at the highest level
- ‘Manage up’
  - “Scot’s research on ventilator associated pneumonia is saving us 1.5 million dollars/yr annualized in disease prevention”
- Encourage rounding vs. Mtgs/Teaching
Do preservation strategies work?

- No loss of FTE
  - ↑ Behavioral Health 0.5-1.0
  - ↑ Oncology 0.5-0.6
- New
  - 1.0 Glycemic Management
  - 1.0 Emergency Services
Stimulating Research

• One open study at all times
• Create teams to increase engagement
• Use research to reach the nurses and elevate practice standards (out of the office)
• Align to organizational objectives
Stimulating Research

• 3 goals which seemed juxtaposed:
  – Increase staff nurse understanding and involvement in research
  – Back to basics, not too academic
  – Increase public image through publication
Example 1:
The Dinosaur Project

Dr. Caroline Brown EdD, San Diego State
http://nursing.sdsu.edu/inr/consortium.php

Judy Davidson DNP, Scripps Mercy Hospital

Mary Wickline, Medical Librarian,
UCSD Medical Center
Example 1: Dinosaur Project

• Exploration of the Process of Questioning Practice and Use of Evidence in Clinical Problem Solving Among Nurses
• Digging Up Dinosaurs
• Integrated new model for EBP with action research
• Action research / Critical social theory
Research Cycles

Figure 1: Action Research Process

- Plan
  - Interview
  - Monitor
  - Evaluate
  - Plan
  - Interview
  - Monitor
  - Evaluate
  - Plan
  - Interview
  - Monitor
  - Evaluate
  - Plan
  - Interview
  - Monitor
  - Evaluate
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  - Interview
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  - Evaluate
  - Plan
  - Interview
  - Monitor
  - Evaluate
  - Plan
  - Interview
  - Monitor
  - Evaluate

Cycle 1: Act - Analyze
Cycle 2: Act - Analyze
Cycle 3: Act - Analyze
Cycle 4: Act - Analyze
Cycle 5: Act - Analyze

A World of Learning
Dinosaur Project: Educate RNs in EBP

• Use formula we use in the EBP institute
• Take field notes of how ideas are received and processed.
• Explore concept until
  – nurse wants to quit
  – practice should not change,
  – or practice is changed
• Who should benefit?
  – Is it just the nurse who submits the idea?
Dinosaur Marketing Flyer

Digging for Dinosaurs

Ever wondered why some clinical practices never seem to change? Here's your chance to dig for those dinosaur-like clinical practices preserved by the ritual of doing them over and over!

Calling all Nurses—work on your own or get a team together and...

Enter the "Digging for Dinosaurs" Contest!

Grab your shovel and start unearthing ritual nursing practices!

Find Contest details and Entry Forms on the Scripps Intranet Homepage.

 Winners will be announced and prizes awarded monthly.
First Submission

"What is the dinosaur-like practice that you are questioning?"

Judy - I'm sorry to be critical, but this flyer is what I'm objecting to. Most of all, it's like non-professional words used instead of a context.

"How and when did we start doing it this way and how do others feel about it?"

"Because we're mostly women treated like shift work by the state, it's been easy to slip into 'non-professional' mode."

"What are some possible consequences if we changed the way we are doing it?"

"Pervade the self-esteem of these professional women. How can we expect to be treated as equal to men if we're digging our own holes?"

"What alternatives can you suggest on the way we are doing it now?"

Approach the trade in a more professional manner. Play to the highest, not lowest, level.

"What evidence can you find to either support or refute the way we are doing this practice now?"

- library field trip
- exploring the internet
- talking with others
- information from a conference
- information from a professional group

Thanks for listening...
New Nursing Research Announcement:
Exploration of the process of questioning practice and use of evidence in clinical problem solving among nurses.

Investigators:
Judy Davidson, DNP RN, Director of Advanced Practice Nursing,
Caroline Brown, EdD RN, SDSU

How can you help shed light on your practice?
Please consider submitting an idea about a practice issue you feel should change either:
• because you suspect there is no evidence to support the practice,
• or there is evidence to support a practice that is not currently in place at Mercy.
Ideas can be submitted individually or as a team.
Ideas are being gathered during July and August 2008

Practice Issue Submission Form

Name: __________________________ Phone Number: __________________________
Email: __________________________
Group Members: __________________________

What is the practice that you are questioning?

How and when did we start doing it this way and how do others feel about it?

What are some possible consequences if we changed the way we are doing it?

What alternatives can you suggest to the way we are doing it now???

Submit your researchable topic by email or mail to:
Judy Davidson 619 243 0902
4777 Fifth Ave, MEBI (Mailbox in Administration) Office on 5th floor across from elevators Mercy SD
Thank you for your feedback related to our ongoing research related to practice issues and problem solving in nursing.
I am especially thankful that you feel that nurses do not need "cute" to participate in research.
Please accept my apologies, because we in no way want to demean or lower the image of nursing.

I have reformulated the nursing marketing flyer based upon your feedback.

I respect your experience and associated wisdom in ICU nursing,
and hope that you will consider submitting a practice idea for us to investigate in your department.

Judy E. Davidson
DNP RN CCRN FCCM
Director, Advanced Practice Nursing and Research

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Results of Dinosaur

- In one year:
  - 15 nurses reported 24 practice concerns
- Became known as the EBP lady
- Stimulated consults for outdated practices to be delegated to CNS team
- Solidified role in organization
- Confirmed supposition that research is an engagement strategy
Example 2: Poetic Transcription

- Adopted Sr. Simone Roach’s caring model
- Challenged to translate it into practice
- Not about to create forms
- Poetic transcription to explore the concept of caring x 2 years
- IRB didn’t laugh
- Nurses emotionally moved
- 25 nurses a year who had never participated in research involved (poet or recipient)
- Provided structure for CNS involvement in nurse’s week (vs. distributing candy/hotdogs)
Elissa

*Flying*
A soaring eagle  
Strong ethical beliefs and principles  
All of her actions compassionate and meaningful  
Nurturing those newest to the nest,  
Committed to teaching others to be their best  
Finding and seizing every teachable moment  
Assisting others to find and navigate their path  
I can see her flying, wings at full span  
The breeze blowing through her feathers,  
Welcoming and warm to others  
Utilizing all resources to pull the team together,  
Flying so high, so high above  
If only we could all fly, all of the time.
It happened so quickly while driving
I can’t remember my name.
I see many lights staring at me
I hear beeps and mechanical noises.
A feeling of fear surrounds me.
My heart speeds it’s tempo.
I want to yell but I can’t.

I want to move and I am stone.
I thought “My God am I dying, or
Is this a terrible nightmare?”
Then suddenly I feel a peace within me.
A gentle human touch on my chest.
A voice so soft and kindly
Revives my heart and soul.
I now feel a sense of security
Because of that one nurse who saw what I needed.
Example 3: Staff-led Research

- San Diego EBPI
- 3-4 teams a year
- Master’s prepared RN + staff RN
- Application process
- 6 days of class + project time
- Example: Worker’s comp

![Graph of Musculoskeletal Injuries related to Patient Handling](chart.png)
Journal Club

- Monthly during normal practice council lunch
- Voluntary, but most stay
- >30 participate
- Create journal club tool kit
- CNS/APNs → Staff
- Review levels of evidence with each article
- Statistician available for consultation
Do these stimulation techniques work?

- 15-20 nurses a year published
- 15-20 presentations at local and national meetings
- Return to school rate increased
- Librarian requested job description
- So many research projects that it stimulated corporate review
Summary

• The DNP RN with leadership experience is prepared to
  – Lead CNSs
  – Oversee EBP change
  – Coordinate generation of new knowledge within the service sector

• With key alignment to organizational objectives and flexibility, the role of the APN within the hospital setting can be preserved