

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



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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



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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



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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



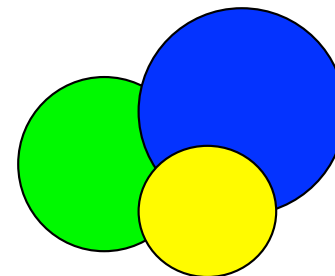
Director, APN and Research

- 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 .5-1.0
 - ↑ Oncology .5-.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



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Stimulating Research

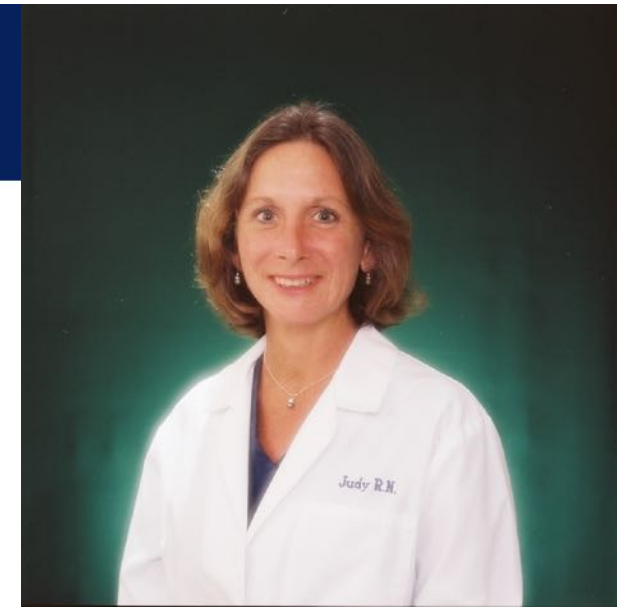
- 3 goals which seemed juxtaposed:
 - Increase staff nurse understanding and involvement in research
 - Back to basics, not too academic
 - Increase public image through publication



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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



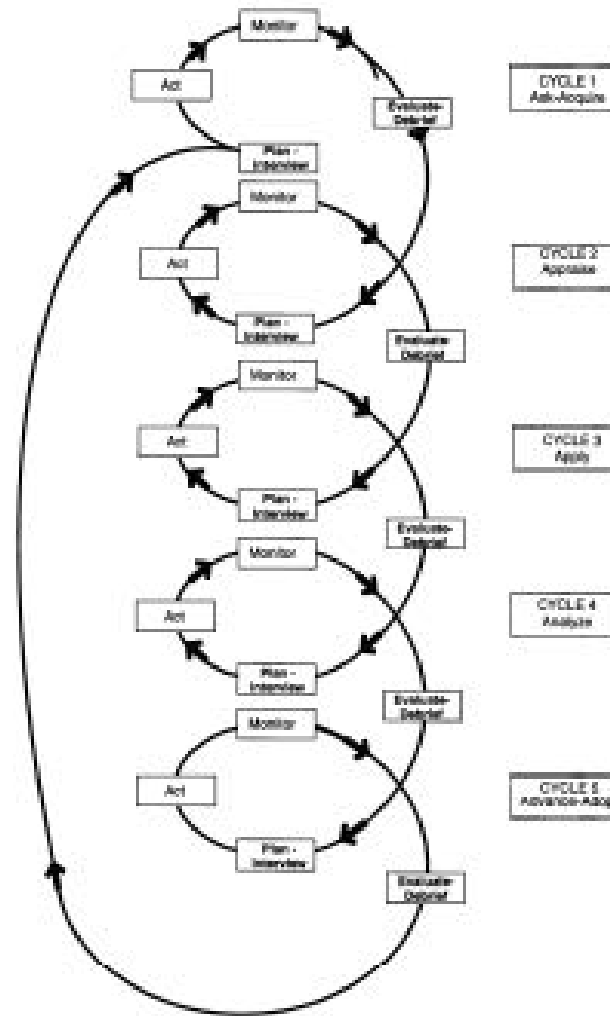
Example 1: Dinosaur Project

- 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 One: Action Research Process




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 these 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!**

Visit Contest details and Entry Forms on the Scripps Intranet Homepage!
Click Education/Training
Click Staff Development/Recruiting
Click Digging Up Dinosaurs

Winners will be announced and prizes awarded monthly

Sponsored by the Council of Scientific Inquiry
For further questions: denaham.judy@scrippshealth.org

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First Submission

What is the dinosaur-like practice that you are questioning? *Sue - I'm sorry - be critical, but that's the point - what I'm objecting to - treating all those like non-professionals who have to be coerced into a world of care. Children's. The way to improve it is here and when did we start doing it this way and how do others feel about it?*

Because we're mostly women + treated like shift workers 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?

Reduce the self-esteem of the avg profession. How can we expect to be treated as equals to all's if we're digging.

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

Approach the task in a more professional manner?

And use - play to the highest, not lowest, level of audience.

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

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

Thanks for library...



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Marketing Flyer Take 2



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: _____
Email: _____ Phone Number: _____
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 snail mail to:
Judy Davidson 619-243-6902

Davidson.Judy@scrippsmc.com

4077 Fifth Ave, MBR1 (Mailbox in Administration)
Office on 6th floor across from elevators Mercy SD



Apology Letter x 3

- 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
-
- Scripps Mercy Hospital
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- fax: 619 686 3530
- 4077 Fifth Avenue, MER1
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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.



Janice

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.

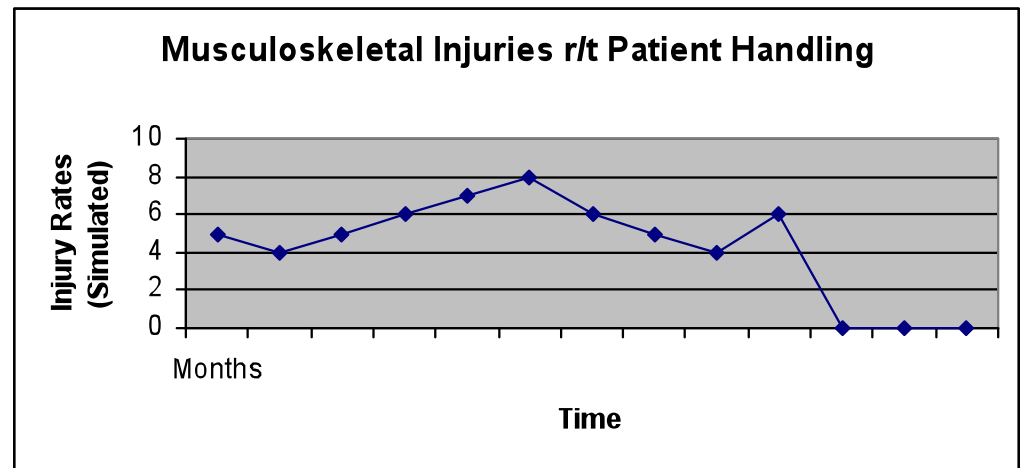
I want to move and I am stone.
I thought "My God am I dying, or
Is this a terrible nightmare?"
Then suddenly I feel a peace within me.
A gentle human touch on my chest.
A voice so soft and kindly
Revives my heart and soul.
I now feel a sense of security
Because of that one nurse who saw what I needed.

And with her kindness restored me



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



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



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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

