Welcome to our New Chief Nursing Officer

BY AMY ALDERMAN AND MOLLY WOULFE
STAFF WRITERS

Veteran nurse administrator Debra Albert, RN, MSN, MBA, NEA-BC, joined the University of Chicago Medicine July 9 as chief nursing officer and vice president of Patient Care Services.

While she’s climbed up the ranks in health care, she’s never strayed from her passion.

“Once nursing is in your blood, it stays in your blood,” she said.

That showed during her first week at the University of Chicago Medicine, when Albert sat through the majority of the July new nurses’ orientation sessions to get to know many of the new nurses and "share the new-hire experience," she said.

“We are learning together what it is to be a University of Chicago Medicine nurse!”

She’s already poised to make her contribution. “I am looking forward to connecting with more of the nursing staff to better understand their practice and our opportunities to develop and grow,” she said.

Albert, former chief nursing officer for Vanguard Health Chicago at MacNeal Hospital in Berwyn, began her career at the prestigious Cleveland Clinic Health System as an undergraduate nursing assistant. She spent more than two decades at the Cleveland Clinic, where she took on the roles of chief nursing officer and vice president of patient care services at the system’s Fairview Hospital.

She is credited with reducing RN turnover, improving the patient experience and holding the line on costs. She also helped launch an EPIC electronic medical record system and a program to reduce pressure ulcers, initiatives the University of Chicago Medicine also has established.

As chief nursing officer of the Cleveland Clinic Main Campus, Albert, RN, MBA, MSN, NEA-BC, elevated the nursing-related patient experience benchmark and led a $4.7 million capital-improvement campaign. She also raised bedside staffing levels and decreased RN turnover during her tenure.

“Debi was the overwhelming choice to fill the chief nursing officer position,” said Chief Operating Officer Mona Sonnenshein.

“Many members of the nursing staff, administration and faculty participated in the vetting of our new CNO, and Debi was the overwhelming choice to lead our nursing and other caregiver teams in their pursuit of excellence,” she said.

A 2010 graduate of the Johnson & Johnson Wharton Fellow program, Albert holds a master’s in nursing.

“Coming back to an academic medical center is very exciting for me,” Albert said.
“A Very, Very Good Year”

BY MOLLY WOULFE STAFF WRITER

Dean Kenneth Polonsky, MD, and UCMC President Sharon O’Keefe are optimistic about University of Chicago Medicine and BSD’s FY 13 after ending FY 12 on a very positive note.

Key achievements include:

- Medical Center volume increased: Admissions were 6.2 percent or 1,421 above last year while PDP clinic visits are 5 percent above FY 11;
- Payer mix was the same from FY 11 to 12 with FY 12 private admissions 7.1 percent higher than FY 11;
- The Pritzker School of Medicine was ranked by U.S. News & World Report in the Top 10 of all medical schools;
- Our physicians and scientists continue to publish and present research that put us at the forefront of medicine and science;
- Clinical practices are expanding with the opening of the new Comprehensive Cancer Center at Silver Cross;
- Operational Excellence has partnered with departments and leaders to perform over 90 kaizen events;
- Top-notch faculty and administrative recruits are bringing continuing leadership to advance our mission and vision;
- Reorganized branding and an advertising push around the University of Chicago Medicine and Biological Sciences are increasing awareness of the new hospital and services;
- Major gifts have led to the Bucksbaum Institute for Clinical Excellence and the Grossman Institute for Quantitative Biology and Human Behavior.

Recently both Dean Polonsky and President O’Keefe kicked off a series of separate, ongoing town hall meetings aimed at dialoging with faculty and staff regarding progress to date and changes ahead. Watch a video of President O’Keefe’s town hall meeting on the intranet at http://home.uchospitals.edu/whats-happening/leadership.

Debra Albert, continued from Page 1

Although she’s always busy setting goals or exceeding expectations in her career, Albert said she also believes in making time for a well-rounded personal life. In her free time, she delves into her hobbies of cooking, baking, gardening, reading and exercising. During the fall, she’s either watching football at home or from the stands with her husband of 17 years and their two sons, ages 14 and 12.

Karen Stratton, executive director of nursing at the University of Chicago Medicine’s Comer Children’s Hospital, served as acting chief nursing officer until Albert assumed her duties.

SAVE THE DATE: AUGUST 23

An all-day party is set to celebrate the New Hospital Pavilion and educate employees about the facility. Everyone is invited to tour the facility and mingle in the 7th floor Sky Lobby from 7 to 9 a.m., 11 a.m. to 1 p.m., and 3 to 7 p.m.

Watch for more information about the Sneak Peek in your email.
Task Force Works to Achieve Baby-Friendly USA Status by 2015

BY AMY ALDERMAN | STAFF WRITER

Two nurses in the Women’s Care Center are looking to add a new designation to the University of Chicago Medicine's long list of accolades: Baby-Friendly.

Christiana Nwankwo, BSN, RN, a patient care manager in the Women’s Care Center, and Staff Nurse Jo Ann Allen, RN, MSN, IBCLC, a lactation consultant, are heading a task force with a goal of achieving accreditation from Baby-Friendly USA by 2015.

Today, many women are challenged to provide their newborns with breast milk due to work and home constraints, according to U.S. Surgeon General Regina M. Benjamin, MD, MBA.

Despite proven health benefits, only 13 percent of babies are exclusively breast-fed through their first six months of life, Benjamin wrote in her Call to Action to Support Breastfeeding. An increasing number of newborns have been diagnosed as malnourished in recent years — a problem that could be combated with the help of healthier infant feeding policies, Allen said.

Part of the plan to achieve the designation includes adopting other best practices throughout the Medical Center, such as teaching all hospital staff that newborns should only be fed breast milk, unless nurses have been directed otherwise; allowing mothers and infants to stay together 24 hours a day; discouraging the use of pacifiers or artificial nipples and fostering support groups for new mothers.

Gaining the Baby-Friendly designation means the organization certifies that the Medical Center is employing the best practices to teach new mothers about infant nutrition and encouraging them to breast-feed their infants — one of the most effective measures in preventative health care.

“The goal is to educate mom to help her make informed decisions,” Nwankwo said.

Lactation Counselor Applauds New Law on Breast-feeding

BY AMY ALDERMAN | STAFF WRITER

The University of Chicago Medicine Women’s Care Center nurses have gained some strong allies in their efforts to promote breast-feeding: Illinois lawmakers.

The Hospital Infant Feeding Act, which requires staff at all hospitals with birthing centers to educate new mothers on breast-feeding, was signed by Gov. Pat Quinn in late June.

University of Chicago staff nurse and lactation consultant Jo Ann Allen, RN, MSN, IBCLC, co-chairs the Chicago Breastfeeding Task Force, an organization that advocated for the act.

“Its signing is a great step forward for the cause,” Allen said.

“This law will help guide staff nurses,” she said. “It will help them to avoid some current hospital practices that can have a negative impact on breast-feeding, such as giving a bottle to a breast-feeding baby, keeping a baby in a nursery for extended periods or giving a baby a pacifier.”

The law requires that all hospitals with birthing centers establish an infant feeding policy and educate new mothers on breast-feeding and dietary supplementation using guidelines from the Baby-Friendly Hospital Initiative, a program sponsored by the World Health Organization and United Nations Children’s Fund.

Introduced by Rep. Robyn Gabel (D-Evanston) in February, the Illinois Hospital Infant Feeding Act takes effect January 1.

Last year, California approved a similar law, which takes effect in 2014.

Baby-Friendly task force facilitator Jo Ann Allen with some of her task force members announcing the University of Chicago Medicine’s application for Baby-Friendly status. Back row from left: Deborah Flores, RN, IBCLC, Eve Goertz, RN, RNC-OB, CLC, Christiana Nwankwo, BSN, RN, Ken Nunes, MD, and Ruth Wernis, RN, RNCMM, CLC. Front row from left: Rachel Jones, RN, MSN, clinical nurse educator for the Women’s Care Center, Allen, RN, MSN, and Eve Edstrom, RN, CBIS. Photo by Megan Doherty

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"The goal is to educate mom to help her make informed decisions," Nwankwo said.
Action Plans Yielding Positive Responses

BY MOLLY WOULFE | STAFF WRITER

Feedback from nurses who responded to the Employee Engagement Survey already is inspiring changes to scheduling, participation and other work practices at the University of Chicago Medicine.

Nearly 230 managers and leaders have met with their employees, including a large number of nurses, to discuss the results of the Employee Engagement Survey and ways to improve the workplace and patient care. A record 86 percent of staff members participated in the 2012 survey.

The goal of the action plans is to engage employees, inspiring them to embody and practice the five PRIDE values: Participation, Respect, Integrity, Diversity and Excellence (See story on page 5). The results: a happier and dedicated workforce that collaborates to deliver superior, compassionate health care.

“Our PRIDE values are the foundations of the care continuum,” said Debbie Stock, director of Organizational Development. “We provide a service, and service — no matter where you work — drives a great patient experience.”

Human Resources and Organizational Development leaders are meeting with managers and their staffs to map out these blueprints for improvement.

Proactive go-getters include administrative manager Tammi Allman and Sally Szumlas, director, nursing systems. The duo, who inherited a team of 11 float nurses last August, discovered the group was upset by the abrupt reassignment to new leaders. The nurses also felt undervalued, pressed for time and relegated to more difficult tasks.

“We started with, ‘OK, being involved in decisions that affect your work and time with patients are priorities. What, as a team, can we do to help you?’,” said Szumlas, RN, MS.

Simple changes are bridging the gaps. The supplemental nurses will be listed as Medical Center employees on shift lists and encouraged to attend nursing meetings in the areas they serve. Each unit is preparing a guideline listing key contacts, phone numbers and details about medical equipment. They are represented at the Nursing Practice Forum as well. "It's a work in progress," Allman said.

Patient care managers Jennie Sierra, RN, BSN, and Nilsa Campos, RN, BSN, CCRN, discovered that their team — 75 nurses assigned to the Pediatric Intensive Care Unit and Cardiac Intensive Care Unit in Comer Children's Hospital — wanted more direct contact with supervisors and effective communication between day and night shifts to improve patient care.

The nurses brainstormed, then launched a change-of-shift briefing dubbed “The Change Chatter.” They also began posting information in their lounge and are growing more involved with their unit-based practice council.

“Our strategy is that we are showing and letting the staff know that we are committed in making the necessary changes,” Sierra said. “We inform our staff that we want honest and open feedback and that we want to come up with solutions that we can resolve together.”

We’re Going Greener with Recyclable Medical Supplies

BY MOLLY WOULFE | STAFF WRITER

The University of Chicago Medicine, pursuing many green initiatives, is making strides in recycling single-use medical supplies from the operating room, labs, and hospital floors. For example, simply reprocessing compression leg sleeves (used to prevent deep vein thrombosis) reduces landfill waste by hundreds of pounds per year. Stryker Sustainability Solutions is collecting used sleeves from our facilities and preparing them for safe re-use by following strict FDA guidelines.

The Medical Center-Stryker partnership has saved $52,000 and diverted more than a ton of medical waste from landfills since March.
Standards of Behavior Aligned with PRIDE Values

BY MOLLY WOULFE | STAFF WRITER

The University of Chicago Medicine is developing new Standards of Behavior to reinforce the Medical Center’s reputation and improve patient satisfaction and employee engagement.

The expectations, based on our PRIDE values, “represent our commitment to fostering a professional atmosphere and a culture of kindness,” Chief Operating Officer Mona Sonnenshein said.

The standards expand on the Medical Center’s five core PRIDE values and provide practical ways to live the values in all aspects of work. The values are Participation, Respect, Integrity, Diversity, and Excellence. The two dimensions for each PRIDE value help guide behavior and clarify expectations.

PARTICIPATION

Teamwork: Share the workload; assist and encourage your co-workers; appreciate the gifts, talents and expertise of others; deal with conflicts in a non judgmental and unemotional manner.

Accountability: Take initiative to act and get things done; do what you say you will do, when you say you will do it; perform your work to the best of your ability every day.

RESPECT

Kindness: Treat all as they would like to be treated; honor all patients and family members by being kind and compassionate; focus on others and their needs above your own; remain calm and caring even when under stress.

Relationships: Treat your co-workers as partners; involve the patient and explain things clearly; encourage and understand others; appreciate others and provide support when they struggle.

INTEGRITY

Confidentiality: Adhere to all patient privacy and confidentiality laws, policies and guidelines; respect employee/patient privacy at all times; make sure confidential information between employees remains confidential.

Organizational Citizenship: Ensure patient care is the first priority; take pride in your work and the work of your peers; support our commitment to the community.

DIVERSITY

Inclusion: Honor the patient’s viewpoint and beliefs; value every member of our health care team; respect individual and group practices and traditions; invite others’ ideas, thoughts and perspectives.

Cultural Competence: Learn about the cultural needs of each patient; recognize and address your own biases and barriers; acknowledge that there is more than one right way of doing things; consider others’ feelings when addressing difficult or sensitive issues.

EXCELLENCE

Professionalism: Act professionally in your actions, words and attire; recognize and value the expertise of others; create a welcoming and safe environment; approach your work with a can-do attitude.

Quality: Prioritize patient safety at the highest level; set and follow high standards; initiate performance improvement activities in your area; eliminate non-value-adding activities.

The Standards of Behavior are UCMC Standards of Behavior.

Service and Standards Workshops

The University of Chicago Medicine’s new Standards of Behavior, designed to enhance our performance and customer service, will be rolled out in a series of workshops for employees and leaders/managers.

Register for the mandatory courses, Service and Standards for Employees and Service and Standards for Leaders/Managers, through Oracle. The two-hour employee course, and the six-hour leader/manager course, run through the middle of September. Both courses are available at a wide variety of days and times.
New Color Code for Scrubs Unveiled

As previously announced, the University of Chicago Medicine is adopting scrubs that match a color to each category of caregiver in an effort to clarify roles for patients, their families and our co-workers and to improve their overall experience at the Medical Center. The new scrubs, which will have the official University of Chicago Medicine or Comer Children’s Hospital logo embroidered on them, also play a part in our Ambulatory-care redesign and the campus-wide effort to improve our appearance and service standards.

Registered nurses, nursing assistants, licensed practical nurses, medical assistants, respiratory therapists, occupational and physical therapists, radiation therapists and other technicians and technologists are switching to the new scrubs.

Schedule for On-Campus Ordering

For those who still have not placed their orders, there are more opportunities to purchase scrubs on Tuesday, August 28; Thursday, August 30 and Wednesday, September 5. Information on the location will be communicated to employees and announced on our intranet site. Those who wish to try on the scrubs before ordering may do so. No appointment is necessary.

Those in off-campus clinics will need to come to the Medical Center for this purpose.

Scrub Color Codes

After seeking feedback on choices, leaders in each caregiver category have decided on seven colors:

- Navy: Registered Nurses
- Teal: Licensed Practical Nurses
- Wine: Medical Assistants
- Ceil: Nursing Assistants
- Hunter Green: Respiratory Therapists
- Caribbean: Occupational and Physical Therapists and Radiation Therapists
- Royal Blue: Technicians and Technologists

Styles

The scrubs come in three top options and seven pants options, with tall and petite sizes available. Employees can choose one top style and one pants style each.

The Medical Center will purchase and provide employees with a set of scrubs corresponding to the number of shifts they are regularly assigned to work each week in a clinical setting.

Additional scrubs can be purchased through the Medical Center’s exclusive vendor, Wright Fit Uniforms, during the on-campus ordering period. Those who wish to purchase matching warm-up jackets to wear over their scrubs may do so. The cost is $12.65 per jacket for XS to XL sizes. Larger sizes cost slightly more.

The scrubs are scheduled for delivery between the weeks of September 24 and October 1. Once distribution is complete, employees must wear the scrubs selected for their assigned positions.

More information is available on our intranet site, at home.uchospitals.edu.

New Appearance Standards Elevate Professionalism

Upgrading our dress and personal appearance policy enhances the patient and family experience. These new standards will ensure our employees are readily identifiable by their positions.

“Everyone benefits, including caretakers and staff,” said Terry Solem, vice president of Human Resources at the University of Chicago Medicine.

The updated policy coincides with the introduction of uniform/scrub colors and styles. Standard scrubs provide visual cues about the services each individual provides to our patients, outpatients, families, visitors and co-workers.

Additionally, a well-groomed appearance denotes pride in representing the Medical Center and elevates professionalism.

The apparel standards were presented to leadership in July. As currently envisioned, they include:

- All employees are expected to present a clean, neat and professional appearance.
- Clothes must be clean, neat and fit properly.
- Employees are expected to wear photo-identification badges on the upper torso on Medical Center premises.
- Appropriate clothing includes suits, skirts, sports coats, dress pants, slacks and trousers, and shirts/blouses/polos with collars.

The policy applies to employees and affiliates working on the medical campus and off-site locations.

For more information, contact:

Andre Crittenden, program coordinator, Human Resources at 2-2175.
Leadership Profile: Sally Black

BY MOLLY WOULFE | STAFF WRITER

Her mother encouraged her to be a doctor.

Sally Black wanted to be a nurse, like her calm, competent Aunt Annette. But she enrolled in medical school, anyway. After two years, she realized her true calling, transferred to St. Xavier University’s School of Nursing and never looked back.

“I always saw nursing as a privilege, to take care of patients,” Black said. “As much as an impact you make on their lives, they do the same for you.”

Two decades later, Black remains committed to patients and to looking ahead, essential qualities for her role as a program director (PD) of Clinical Operations for the New Hospital Pavilion. The veteran oncology nurse-turned-administrator, a respected leader at the University of Chicago Medicine, was tapped last year to join the team of six PDs who oversee the logistics of relocating multiple departments to the 10-story, 1.2 million-square-foot facility.

Her duties: “coordinating and planning life in the New Hospital Pavilion for 14 clinical departments,” including the patient care and intensive care units moving to the NHP, and the other departments that support patient care operations. The latter include the pharmacy, blood bank, social work, chaplain, case managers, infection control, respiratory therapy and bed access.

A collaborative approach is critical for the massive task, said Black, RN, MSN, MBA, OCN. Discussions and mapping strategies cover everything from department work flows to nursing station designs to the location of coffeemakers in waiting rooms.

“We began the process by meeting with all the departments and saying, ‘Tell me about your department. What are your practice standards?’ We looked at their plans and designs, evaluated the equipment and furniture they needed, as well as their computers and phones. We looked at how it would all fit together and flow,” she said.

Kaizen events have greatly influenced and shaped protocol, said Black, who routinely speaks in terms of “we,” not “I.” Enthusiasm for interdisciplinary rounds to enhance patient care spurred simple yet profound renovations.

Consider the once-separate conference rooms for physicians and nurses. “We are knocking down walls to make it one big room so everyone from all disciplines can work together,” she said.

Chief nursing officer Debra Albert, RN, MSN, MBA, NEA-BC, recognizes a born leader when she sees one. “She clearly understands the issues our nursing team faces every day,” Albert said. “Sally has such follow-through that I am confident that no need, large or small, will go unaddressed.”

Nurse-Specific Improvements for the New Hospital Pavilion

ALL 240 INPATIENT ROOMS ARE PRIVATE AND SPACIOUS, eliminating “new roommate” requests and allowing nurses to easily navigate beds, equipment and visitors.

THE NHP IS EQUIPPED WITH THE RAULAND RESPONDER 5 NURSE CALL SYSTEM, an updated version of the system used in University of Chicago Medicine Comer Children’s Hospital. The updated system allows patients and nurses to converse via Cisco wireless phones carried by all nurses. If the issue is simple — say, a request for water — the nurse can alert the nearest nursing associate.

WORKFLOWS, DOME-LIGHT INDICATOR SYSTEM AND EMERGENCY PROCESSES WERE DEVELOPED WITH NURSING STAFF’S INPUT, as were nursing stations, supply rooms and equipment rooms.

ALL BEDS ARE TELEMETRY CAPABLE, able to monitor heart rate, blood-oxygen level and other vital signs via monitor technicians working around the clock. Initially, they will track non-Intensive Care Unit patients only.

PRIVATE PATIENT ROOMS WILL FEATURE THE GET WELL NETWORK, an interactive patient platform with health-education programs, as well as hospital information, pain assessment tools and other features.
Research Highlights

Bedside Hand-Off Transforms Shift Changes

BY AMY ALDERMAN | STAFF WRITER

A change in the way nurses at 4NE begin and end their shifts could turn into a campus-wide model to improve patient care and raise satisfaction levels.

The change, a process called Bedside Hand-off, requires incoming and outgoing nurses to report together on patients. That creates more time for nurses and patients to interact, ensuring that the new shift is apprised and ready for any issues that may arise, said Ruth Barnes-Mangonon, APN, MSN, CNS-BC.

“It provides a way to transfer trust from the outgoing nurse to the incoming nurse,” she said. “The patients are informed about their care, and it makes them feel comfortable about asking questions.”

Since the bedside handoff process was established in March, the nurses on 4NE have seen patient satisfaction reports improve, said Kristie Wymer, RN.

She and the 4NE team are hopeful that Bedside Hand-Off can be instilled throughout the Medical Center.

Before, nurses at 4NE obtained an assignment from the previous shift and reviewed the patient’s medical history. Nurses rarely saw patients together or had the opportunity to thoroughly discuss reports, Wymer said.

Now, nurses start their Bedside Hand-Off by meeting in a hallway to discuss the patients’ information. Then the outgoing nurse introduces the incoming nurse to each patient.

“I think the patients needed to know we were communicating to each other from one shift to the next,” Wymer said. “They definitely see there’s continuity. They can ask questions of the nurses while we’re together.”

While the nurses are in the patient’s room, they check things such as the identification band, the PCA pump and epidural setting. If a patient is identified as high risk for skin breakdown, he or she would be turned during the Bedside Hand-Off report, aiding the Medical Center’s initiative to decrease the occurrences of hospital-acquired pressure ulcers. The nurses also check supply cart stocks and the frequency of blood-sugar monitoring.

In total, the report takes an average of five minutes per patient. After visiting each patient, the nurses update the sign-out sheet and discuss their observations.

“There’s more accountability. The IV bags are not empty. The rooms are a little bit tidier. Time-wise, it’s more effective,” Wymer said.

Both the nurses and the patients benefit, Barnes-Mangonon said.

“From the nurses’ side, it offers the ability for real-time conversations,” she said. “And the patients get the reassurance of knowing the nurses are talking with each other about their needs.”

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NURSING GRAND ROUNDS

August 21: “MELD Score — What is in it for me?” Ruth Barnes-Mangonon, APN, MSN, CNS-BC; Helen Te, MD, Scott Alamar, RN, BSN, Pamela Boone, RN, MSN. (L168)

September 18: “Pain Management vs. Misuse/Abuse/Diversion of Prescription Opioids,” Connie Wright, APN. (L168)
Grateful Family Thanks Nurses in a Big Way

BY MEGAN E. DOHERTY | STAFF WRITER

The team at University of Chicago Medicine’s Comer Children’s Hospital has become like a second family to 23-year-old Kimi Sorensen during her more than 20 surgeries for hydrocephalus. Last month, Kimi was able to return some of their kindness. She and her parents threw a party in the fifth-floor break room to thank the dozens of nurses, doctors and other staff who have been with her every step of the way.

“One of the nights she was really sick, we were sitting with her in Comer and said, ‘When you graduate from college, we’re going to have a party here to thank the nurses,’ ” said Florence Sorensen, Kimi’s mother. “It’s a real thrill that today’s the day.”

Kimi, who just graduated from Dominican University in River Forest with a degree in Natural Sciences, has been a patient at Comer Children’s Hospital for the past nine years. Born in Korea with hydrocephalus, an excess of fluid inside the skull, she had her first shunt put in when she was eight weeks old, shortly before her family adopted her. Immediately upon arriving in the United States, she underwent surgery for a second shunt.

“I didn’t have any problems for 14 years,” Kimi said. “Apparently that never happens.”

But a 2004 infection stemming from an earring spread to the mastoid bone behind her ear. That triggered a “free-for-all of problems,” Florence said. “Surgery after surgery, one revision after another.”

In December 2005, Kimi nearly died. She was rushed to Comer Children’s Hospital with terrible head pain and a stomach-ache, just one month after a surgery to revise a shunt in the left side of her brain.

“She just got sicker and sicker,” Florence said. “It was a nurse who saved her life.”

The morning of Kimi’s arrival, Nurse Practitioner Amanda Johnson got a call at 5 a.m.: Kimi was back at Comer — and she was in trouble. “Amanda raced into the room with a gauge to see how high the pressure was in Kimi’s head,” Florence said, “and the fluid just shot right out the top.”

Amanda quickly rushed Kimi down to the operating room for surgery. “It was her quick work and knowledge that really made the difference,” Florence said.

“The moment we needed her to be there, Amanda was there. And that’s the way all the nurses here have been all these years.”

Kimi hopes her connection with the Medical Center continues in another way: One day, she would like to work here:

“I want to be a nurse.

I thought about all the nurses at Comer, and I thought that’s the kind of relationship I want to have with patients. When I walk in the hallways, they always know me, and I think that’s really cool.”

Johnson, who has cared for Kimi since she was 14, is touched by the family’s gratitude. “It has been a tremendous experience to see Kimi grow up,” she said.

“I talked with her about what it is to be a nurse and was able to mentor her as she was making that decision. It’s a great honor to influence one of our patients like that.”

Jamie Kozel, RN, BSN, chats with Kimi Sorensen during her thank-you party honoring Comer Children’s Hospital nurses and staff. Photo by Megan E. Doherty
Leaders Reflect on Year One of Lean

**BY MEGAN E. DOHERTY | STAFF WRITER**

Since the University of Chicago Medicine's lean initiative started one year ago, employees have held more than 90 events and logged more than 2,900 hours, creating "change for the better" and saving the institution $500,000.

"We're making significant progress," said Deborah Kull, vice president of operational excellence, who heads the initiative. "We've already reshaped our environment and culture via the lean process in a very short period of time."

Based on a system developed by Toyota Motor Co. to streamline automotive manufacturing, the lean initiative prioritizes the creation of efficient, standard processes that allow a smooth flow of work.

That work has included 90 kaizen events from July 2011 to May 2012 with another 108 scheduled through the end of the year. The operational excellence team estimates that the 563 employees, many of them nurses, who have participated in these events have achieved $500,000 in savings.

"Staff participation has been outstanding," Kull said. "These changes will elevate the patient experience."

They'll also improve working conditions. Employees appreciate how value stream maps, "spaghetti" diagrams and checklists maximize their efficiency.

"Staff at all levels in the organization finally have a vehicle to improve processes and their work environment," said Corrin Steinhauer, RN, MS, OCN, NEA-BC, patient care director. "It has begun to chip away at the old way of conducting business here and really has everyone thinking of different and innovative ways of approaching their work."

That innovation may even include creating an entire room from scratch, as a team from the receiving dock did.

"The receiving dock never had a break room," said Anthony Havard, receiving dock supervisor. "When my staff went to lunch, they were pulled away to sign for packages or help unload a truck because they didn't have any privacy during their lunch hour."

During their kaizen, his team designated a space on the south end of the dock for their break room. Now they enjoy their lunch there and are more efficient when back on the job.

"We're starting to see some momentum for cultural change," said Greg Horner, director of operational excellence. "The past year we've looked at fundamentals; now we're beginning to look at process changes. We need to maintain standards over the course of the next year."

Another tool being utilized in the lean initiative is gemba walks, in which leadership goes onsite to assess workspaces. "Having the leadership engaged in weeklong events and in continued follow-up, like gemba walks, as part of the culture change would be the most powerful message we could send going forward," Kull said.
Early Defibrillation: Bridging a Lifesaving Gap in Time

BY MAGGIE HIGGINS | STAFF WRITER

This year, 356 nurses and nurse managers of the University of Chicago Medicine’s Bernard A. Mitchell Hospital completed cardiac arrest simulation training. That training quickly paid off in March after some of those nurses used their newly refined skills to cut down response times and help save the life of a patient.

At 5:15 a.m. in early March, a patient on the 6NE floor became unresponsive. The nurses on duty responded exactly as practiced. They called a Dr. Cart code, performed chest compressions, applied the defibrillator and delivered a shock to the patient—all in less than two minutes. The patient was revived and left the hospital showing no signs of complications from the incident.

The mannequin for mock code simulations serves as a practice ground for nurses learning how to deliver a shock with a defibrillator. Photo by Amy Alderman

The success of this case is attributed to efforts put forth by a team that worked to advance the process of connecting analytical research with performance improvement. The people involved were Emily Lowder, RN, BSN, Manager of Nursing Education; Mary Ann Francisco, APN, MSN, GCNS-BC, CCRN, Clinical Nurse Specialist; Mary Maroney, RN, MSN, Clinical Nurse Educator; Ruth Mangnon-Barnes, APN, MSN, CNS-BC, Clinical Nurse Specialist; Donna Mangruen, APN, MSN, ACNS-BC, CMSRN; Valerie Bednar, RN, BSN, MA, CCRN, Clinical Nurse Educator; Jan Beschorner, APN, MS, CNS-BC, AOCN, Clinical Nurse Specialist; and Mary Ann Stokas, RN, MSN, OCN, Clinical Nurse Educator.

This team invited Meredith Borah, RN, MSN, to embody this link when she took on the resuscitation officer position created in July 2011 at the University of Chicago Medicine.

Borak’s first task was to identify the problem. In 2011, 28 percent of cardiac arrests occurred in areas outside the intensive care unit. Yet, none of the defibrillators in those locations had been used regularly by nurses. In each case, staff waited for the Dr. Cart team to arrive. The average arrival time of the team was three minutes.

"Research shows that you tremendously improve the patient’s chance of survival if you deliver a shock within two minutes," Borak explained. "We totally miss that window in waiting for the Dr. Cart team."

Dana Edelson, MD, MS, assistant professor of medicine, has led much of the resuscitation research on the medical campus. Combining Edelson’s research with her observations on the inpatient floors, Borak made it a priority to develop a training program for nurses and to improve cardiac arrest responses using the Simulation Center.

During January’s trainings, groups of nurses successfully completed a simulation with a mannequin showing signs of cardiac arrest.

Neuroscience Nurses Gain Momentum

BY AMY ALDERMAN | STAFF WRITER

Nurses on Comer 5 are putting in the time to ensure that the youngest patients battling neurological diseases at University of Chicago Medicine’s Comer Children’s Hospital feel secure and cared for as they move from surgery to recovery.

With training from a series of three 10-month-long classes focusing on clinical neurosciences, the nursing staff on Comer 5’s pediatric neurosciences unit is able to work more closely with patients who have undergone a number of complex treatments, such as the implantation of a vagal nerve stimulator or a lumbar drainage device.

“It makes the families feel more at ease because they know the nurses can give their children the specialized care they need," Amanda Johnson, RN, MSN, CPNP, who mentors budding neuroscience nurses, said.

The program has also been a hit with neurosurgeons.

“They’re amazing,” said David Frim, MD, PhD, chief of neurosurgery, about the neuroscience nurses. “What a great thing for the hospital to support. It’s a win-win-win situation. It makes our job that much easier. The patients are happier and the families are happier.”
Comer Children’s Hospital Gets a New Logo

BY MOLLY WOULFE | STAFF WRITER

Comer Children’s Hospital at the University of Chicago Medicine has a new logo emphasizing its position as Chicago’s pediatric hospital of choice. The design features the Windy City skyline inside a shield-like crest and the tagline, “At the Forefront of Kids’ Medicine.”

The logo, a playful spin on the University of Chicago Medicine branding designed with input from Comer leadership, reinforces ties with the parent organization. The words “kids” is underlined to emphasize the focus on family-friendly care, while the skyline proudly highlights the hospital’s connection to the city.

Comer admits about 5,000 patients annually. Outpatient clinics accommodate more than 90,000 general pediatric and specialty visits a year, more than half of them to off-site locations. More than 28,000 visits are made to the pediatric emergency room each year.

New Wellness and Health Management Director Looks to Empower Employees

Whetsel leads initiative to design health benefit

JEFF BISHKU-AYKUL | STAFF WRITER

Investing in the health and well being of the University of Chicago Medical Center employees is a responsibility that the Human Resource team has embraced. In that light, the team will begin offering a comprehensive wellness benefit this fiscal year that will provide opportunities, resources and support to help all employees make positive changes toward improved health.

Leading this new initiative is Jason Whetsel, MBA, ATC/L, director of wellness and health management, who joined the Medical Center HR team last month. Whetsel, a licensed athletic trainer, brings over 16 years’ experience in wellness and population health management to the Medical Center.

“Our goal will be to build a sustainable wellness benefit that will not only provide resources and a culture that is supportive of a healthy lifestyle,” he said. “Motivating employees to ‘take action’ and participate will be another high priority of the program.”

Carefully designed incentive, communication and intervention strategies will be paramount in appealing to a diverse employee population. “Whether you are the ‘walking well’, high risk, or someone who is managing a chronic condition, resources and incentives need to be available that address the entire continuum of health,” Whetsel said.

To assure success, key stakeholders will be identified and an advisory wellness committee consisting of leadership and staff will be formed. “This committee will serve as a sounding board to assure the initiative meets the health needs of our workforce but also to create ways to make this journey fun,” he said.

“As with any effective strategy, this will take time. Wellness is a marathon, not a sprint.”

Wilkerson Returns to the Home Team

Welcome back to Daryl Wilkerson, returning as vice president of support services at the University of Chicago Medicine. He took charge of food services and environmental services, security, parking, transportation and gift shops on July 9.

Wilkerson, who directed many of these operations from 2000 to 2006, has spent the last six years as vice president for support services at Mount Sinai Medical Center in New York. There he spearheaded green and waste-reduction initiatives, saving the Medical Center $1.6 million and diverting more than 13 tons of waste in a single year. He has also served in executive positions at the Children’s Memorial Hospital in Chicago and at the Cleveland Clinic.

Note to NFL fans: Yes, he’s the same Daryl Wilkerson who played for the Baltimore Colts and in the United States Football League.
Nurse Dances Her Way from Student to Instructor

Donna Christian-Harris, APN, FNP, followed the traditional medical learning model and the drum-powered beats of Zumba to become a fitness instructor.

Christian-Harris, an advanced practice nurse in the University of Chicago Medicine Breast Center, was introduced to Zumba by her cousin two years ago. She was hooked immediately.

"Even if you’re tired, once you hear the music, you want to move," she said, smiling at the thought of the Latin-inspired rhythms.

Zumba energized her workout routine and tapped into her love of dance.

She started taking classes three times a week at her local community center. Last October, she was asked to lead a class for breast cancer survivors at New Beginnings Church, 6620 S. King Drive.

Christian-Harris decided to make it official and trained to become an instructor.

Now, she teaches students to move and shake it up through sweat-inducing routines to fusions of Latin, African and Middle Eastern rhythms and tunes.

On the medical campus, Christian-Harris leads a class at noon every Tuesday as part of the Get Fit club. She also starts each Saturday with a high-impact Zumba class at a neighborhood church.

To raise money for a friend battling breast cancer she also runs a two-hour Zumba-thon every three months.

Congratulations

Congratulations to Terri Russell, APN, DNP, NNP-BC, a neonatal nurse practitioner at Comer Children’s Hospital at the University of Chicago. She is the recipient of the National Association of Neonatal Nurse Practitioners Excellence Award.

Winners of the Excellence Award are acknowledged for advancing the mission and vision of the association through exemplary practice, leadership, service and education.

“I’m still having a hard time believing I’ve been selected to achieve this high honor,” Russell said. “I am truly privileged to witness the resilience of the sick and premature infants I help care for in the NICU. I never cease to be amazed at the power of excellent medical and nursing care.”

Carol Polinski, APN, MS, NNP-BC, was the recipient of this prestigious award in 2011.

Parking Garage Undergoes Renovation

Sections of the fourth and fifth floors of the Maryland Avenue parking garage will be under renovation for the next several months.

The work is scheduled to take place in three phases, during each of which 100 of the garage’s approximately 1,800 total spaces will be unavailable. Ray Thomas, associate director of renovation at the University of Chicago Medicine, expects the process to last until November, depending on weather delays.

Garage traffic will be re-directed, but visitors will still be able to access each floor. Plastic protection and plywood will be used to minimize automobiles’ exposure to construction, and Thomas says that noise from the work — which involves jackhammers — will be far enough from patients to not be an issue.

Get Involved

Leaders of the Medical Center are willing to go for a splash in a dunk tank on Wednesday, August 29, to raise funds for the American Heart Association Heart Walk. A dunk tank will be set up in the Wyler Courtyard during lunch hours.

Organizers are rallying for walkers and donations to hit the $60,000 mark by the AHA Heart Walk on September 28 in Grant Park.

“We need to make a big push toward our goal,” said Holly Bunton, who is one of the leaders of the fundraising efforts.

For more information, contact:

Holly Bunton, section administrator, Cardiac & Thoracic Surgery at 2-3554.