Office of Nursing Services (ONS)
Annual Report 2009

VA Nursing: Connecting All the Pieces of the Puzzle to Transform Care for Veterans
Remarks from the Chief Nursing Officer...

The VA Nursing community is recognized for being at the forefront of visionary efforts to ensure quality and safety, while transforming nursing practice for the future. With a focus on efficiency and effectiveness, VA Nursing plays a pivotal role in shaping care for Veterans with a commitment to being Veteran centered, results-oriented and forward-looking.

These efforts require an understanding of the whole, while attending to the many important parts. Keen attention to the intersections of those parts is the hallmark of nursing; patients and colleagues can depend on us for this.

Consider the puzzle of health care and imagine the pieces of that puzzle. What comes to mind for me is an elaborate puzzle with thousands of pieces...many pieces looking similar to each other yet having differences that are sometimes difficult to detect. When connections are found and the pieces come together, they portray a work of art. This work requires a great deal of effort (often-times patience and perseverance) in order to see each section as the envisioned image unfolds.

This is what nursing is all about!

It is through scientific rigor and academic partnerships that we understand what is in front of us, while we shape the whole and impact the future. This applies to work with individual patients, populations of patients, caregivers and families, collaborative partnerships with colleagues within VA, with the Department of Defense (DoD) and across professional organizations, and within the work environment and systems around us.

Take pride in all that you do and celebrate each section of the puzzle that you work on while you keep an eye on the "big picture". I extend my personal thanks to each and every one of you for all that you have done and will do!

Cathy Rick, RN NEA-BC FACHE
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First Nursing Job: Nursing Assistant and Ward Clerk (float position with dual roles based on daily need of units) while in nursing school.

VA Nursing Career Overview: First entered VA at the Milwaukee VA Medical Center (VAMC) as a Nurse Manager on a Cardiology unit, then moved into newly developed role as an Associate Chief Nurse for Resource Management; next role was as an Associate Chief Nurse for Critical Care; appointed as Division Co-Manager for Primary Care in partnership with a physician (Milwaukee) after reorganization into care lines (divisions), also took on collateral responsibility as Nurse Executive when former Nurse Executive retired; appointed into current role as the Chief Nursing Officer for VHA as of 2000-ONS, VA Central Office (VACO).

Most Passionate About: Enacting change to improve health care and create an action-oriented vision for VA Nursing to be a key force in that journey.

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2008 – 2012 VHA National Nursing Strategic Plan: Continuing to Transform Veteran Care for the 21st Century

Nursing Practice Transformation
Goal: Establish systematic approaches to support efficient and effective patient-driven care in all settings and programs.

Evidence-Based Practice
Goal: Create an environment of inquiry in which all nurses apply the best available evidence to improve health care delivery and outcomes throughout VA.

Career Development & Workforce Management
Goal: Continue to enhance the competent, dedicated, compassionate, and high-performing nursing workforce through retention, recruitment, and organizational initiatives.

Nursing Leadership Excellence
Goal: Sustain, support and develop leadership orientation, education and system-wide programs that prepare nurse leaders for the future.

The following pages of this report present in more detail the core team members, accomplishments and updates of related programs/initiatives in 2009 for these goal areas.

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The following pages of this report present in more detail the core team members, accomplishments and updates of related programs/initiatives in 2009 for these goal areas.
Leadership Excellence

Nurse Executive Mentoring Program

As VA Nursing embarks on multiple transformational initiatives, one key component is continuous leadership development through effective mentoring. To this end, a National Nurse Executive Mentoring Program was launched in 2004. Since its inception, 65 matches of newly appointed and experienced Nurse Executives have occurred. These Nurse Executive mentors collaboratively assist in the development of individualized development plans, peer support, and transfer of corporate knowledge and leadership skills. Of the 65 matches, 91 percent of participants have remained in their role, a tribute to the success of this program.

1st Annual Clinical Executives Conference

2009 Theme - Collaborative Decision Making and Communication: Essential Tools for Successful Clinical Executives (Audience: Associate Directors, Patient Care Services/Nurse Executives and Chiefs of Staff)

This recurring educational session, held in April 2009, provided collaborative opportunities and forums for Nurse Executives, other nurse leaders, and Chiefs of Staff to connect with one another, discuss clinical topics, and participate in numerous discussions on various topics that affect daily practice. Efforts will continue to be made to bring this group of clinical executives together on a yearly basis. Some topics from the 2009 conference included:

- Utilizing Servant Leadership
- Working With the Generations
- Patient Safety in Action—The Nurse Leader Role
- Role of Clinical Executives in Systems Redesign
- Shared Responsibility for Evidence-Based Practice Across Clinical Programs
- The Lived Experience of Clinical Executive Collaboration: A Veteran’s Perspective
- Leading the Generations for Collaborative Practice

These presentations and more are available on the ONS Web site: http://vaww1.va.gov/nursing/page.cfm?pg=133

First Nursing Job: Resident Attendant in a community living center.

VA Nursing Career Overview:
Part-time staff RN—Tuscaloosa, AL VA Medical Center (VAMC);
Clinical Nurse Specialist in Mental Health—New Orleans, LA VAMC;
Associate Chief Nurse, Education/ Specialty Care—Durham, NC VAMC;
Associate Chief Nurse, Nursing Research and Specialty Care then Nurse Executive—New Orleans, LA VAMC; Associate Director Patient Care Services—VA Tennessee Valley Health Care System (HCS); Associate Dean for VA Practice at Vanderbilt University—Nashville, TN; Program Director, Leadership Development/ Mental Health Clinical Nurse Advisor—ONS (VACO); Deputy Chief Nursing Officer—ONS (VACO).

Most Passionate About:
All projects in process or being developed by each of the ONS goal groups because they shape the future of VA Nursing and ensure the future development of staff and care for America’s heroes.

Kerrian Reynolds, MPH
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Leadership Support for VA Nursing Scholarship Programs

Through on-site and on-line educational programs, VA scholarships such as the National Nursing Education Initiative (NNEI), the Employee Incentive Scholarship Program (EISP), and VA Nursing Education for Employees Program (VANEEP) have provided valuable support for the educational preparation of VA nurses. For more information on these programs, visit:
http://www.vacareers.va.gov/I2_Salary_Support.cfm#Link2
Support for Nurse Managers

In a survey conducted by ONS in 2008, the Nurse Manager role was identified as the #1 toughest nursing specialty in which to retain and recruit qualified nurses. As a result, the following initiatives are available or in development to assist in supporting this vital role in patient care.

NEW! Assistant Nurse Manager Role

As a component of succession planning, the Assistant Nurse Manager role was developed during FY2009. Steps toward developing this role included completion of a functional statement and utilization guidelines, which have been issued to the field for role implementation. Presently, the Leadership Excellence workgroup is identifying facilities that utilize the role, its utility, and any barriers to implementation. Evaluation of this role is targeted for March 2010. Project materials are currently available on the ONS intranet Web site.

The Nurse Manager’s Passport to Success

A guide for Nurse Managers is nearly complete in order to assist in successfully navigating all aspects of the position. A series of focused interviews validated the need for this initiative and have identified numerous topics to be included: The Union As Our Partners, Time and Attendance, Human Resources Management, Assessing Performance, Nursing Unit Activities (Staffing Methodology, Standards of Care, Standards of Practice, etc.), and more. This valuable resource will be coming soon!

ONS Supports GHATP Trainees!

The Graduate Healthcare Administration Training Program (GHATP) has been a great resource within ONS for recruitment and retention of future VA health care administrators. These trainees have brought valuable business skills and project management pieces to vital nursing programs that help augment the puzzle. GHATP Resident/Fellow or Health Systems Management (HSM) trainees can be great resources for all levels of the organization! For more information, visit the program Web site: http://10.190.0.50/succession/Templates/master.aspx?pid=1651

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First Nursing Job: Nursing Assistant in Operating Room, Johns Hopkins University Hospital, Baltimore, MD.

VA Nursing Career Overview:
Associate Chief Nurse, Medical/Surgical—Richmond, VA VAMC; Associate Chief Nurse, Medical/Surgical—Bedford, MA VAMC; Nurse Executive—Wichita, KS VAMC; Nurse Executive—Montrose, NY VAMC; Nurse Executive—Philadelphia, PA VAMC; Nurse Executive—Oklahoma City, OK VAMC.

Most Passionate About:
Nursing Leadership; National ethics issues; National Partnership Council; and nursing labor relations issues.
Emergency Preparedness

Nursing is a critical piece of emergency planning, preparedness, response and recovery. Either at a national or local level, nurses are actively engaged in many ongoing activities in this area. In addition to responding to numerous public health events, nursing is represented on many national committees and emergency preparedness work including:

- VHA Emergency Core Management Group
  - Education and Training
  - Program Evaluation
- 2009 VHA National Planning
  - Pandemic Influenza
  - Patient Movement
  - Federal Medical Shelter
- VHA Capabilities Assessment
- VHA H1N1 Response
- Planning Committee for the Disaster Mental Health webinar
- Disaster Emergency Medical Personnel System (DEMPS)
- Nursing Emergency Management Workgroup
  - Training for non-clinical volunteers
  - 2010 educational training

Important VHA Emergency Preparedness Information & Tools

  - VHA National Exercise Committee Meetings, Discussions and Actions
  - Exercise Development and Key Resource Documents
  - Sample Operational Plans and Procedures
  - Communications and Ethics Information
  - VHA Exercise Builder - Hospital Software
- Office of Public Health and Environmental Hazards
  - H1N1 Information: [http://www.publichealth.va.gov/h1n1flu/index.asp](http://www.publichealth.va.gov/h1n1flu/index.asp)
- Disaster Emergency Medical Personnel System (DEMPS):
  - Registration site to volunteer in a disaster. Chief Nursing Officer (CNO) has requested at least one Nurse Executive/Chief Nurse from each VISN register for the Senior Management Team (SMT) for Federal Medical Stations.
- 2009 Emergency Management Program Guidebook
- 2009 National Emergency Management Training Event (presentations):
- VHA Capabilities Assessment Program: [http://www1.va.gov/EMSHG/page.cfm?pg=133](http://www1.va.gov/EMSHG/page.cfm?pg=133)
  - Consists of several useful VHA Capability Assessment program documents

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First Nursing Job: Camp Nurse at the Madden Open Hearts Camp for children having open heart surgery—Berkshire Hills of Western Massachusetts.

VA Nursing Career Overview: Previous work with VA while on active duty in United States Public Health Service (USPHS), last position as Chief Nurse Officer; hired into VA in 2007 as Intermittent Program Manager.

Most Passionate About: Public health and collaborating with others to develop useful policies, programs and processes to protect the public’s, especially Veterans’ health.

**Structured Language for Nursing Documentation (SLND)**

In February 2009, a transformational initiative was begun to select the most appropriate structured language or languages to enable the standardization of nursing documentation in the Computerized Patient Record System (CPRS) across VHA care settings. Fulfilling the purpose of this initiative—to describe VA Nursing care in a standardized way in CPRS—will support local, regional and national data driven decision-making (clinical and administrative) and facilitate patient care continuity.

**What is it?** Structured languages (SL) are standardized vocabularies used to describe what nursing does; it labels the elements of nursing care and facilitates communication among nurses and between nursing and other health care disciplines to support and enhance:
- Shared Decision-Making
- Patient-Care Delivery
- Evaluation of Clinical Outcomes...and the aggregation of national data that will enable the impact of nursing care to become more visible

**How will this be accomplished?**
- Creation of a National Nursing Practice Council (NNPC) with staff nurses from every VAMC to assist in the selection and championing of a structured language
- Rigorous review by the NNPC to obtain a consensus for the structured language(s) that best supports nursing documentation for all VHA care settings
- Endorsement by the CNO of the NNPC’s recommendation for structured language(s)
- Formal, new service request to VHA Office of Health Information for implementation

**The Clinical Nurse Leader (CNL) Role**

The goal of this initiative is the full integration of the CNL role in every point of care of every VAMC by 2016. As of August 2009, 32 VAMCs employ 87 CNLs in various settings (inpatient, outpatient and long-term care). Sixty-eight (68) VAMCs are affiliated with academic partners that provide a CNL Masters Degree or CNL Post-Masters Certificate, as of October 2008.
ONS Clinical Practice Program (CPP)

This program was launched in late Summer 2008 as a collaborative effort among ONS, Office of Patient Care Services (PCS), and Office of Public Health and Environmental Hazards (OPH&EH) to provide national guidance on clinical nursing practice and to support field-based operations and organizational priorities. The program is designed to ensure the dissemination of efficient/effective standards of nursing practice, and provide nursing practice guidance to VHA program offices in policy development. The structure of the program consists of a Steering Committee, Clinical Nurse Advisors, and Field Advisory Committees (FACs). Program goals include:

- Standardization of practice and coordinated advisory process for other program office initiatives
- Spread of innovations within VHA
- Dissemination of best practices aligned with national strategic initiatives
- Development of nursing-sensitive metrics that complement national performance measures and monitors
- Development and evaluation of nursing-sensitive indicators, care paths, and Evidenced-Base Practice (EBP) standards

Clinical Nurse Advisors

Currently there are seven Clinical Nurse Advisors who are nursing experts selected from high priority clinical specialties. Each Advisor chairs an FAC, which consist of 87 members in total across the system in the designated areas of practice. The current Clinical Nurse Advisors are:

- **Cardiovascular:** Marthe Moseley, PhD RN CCRN CCNS CNL
  South Texas VA HCS - San Antonio, TX
- **Metabolic Syndrome/Diabetes:** Linda Haas, RN CDE
  Seattle, WA VAMC
- **Geriatrics & Extended Care:** Garrett Schreier, RN MSN
  Lebanon, PA VAMC
- **Perioperative:** Lisa Warner, RN BSN MHA
  Phoenix, AZ HCS
- **Mental Health:** Suzanne Thorne-Odem, RN MS
  ONS, VA Central Office (VACO)
- **Polytrauma/Rehab/SCI:** Mary Sue Biggins, RN BSN MBA
  Hines, IL VAMC
- **Oncology:** Christine Engstrom, PhD CRNP AOCN
  ONS, VA Central Office (VACO)

Veteran-Centered “Medical Home” Model for Primary Care

The “medical home” concept is an innovative approach to the delivery of primary care services and supports one of Secretary Shinseki’s new priorities for VA, Veteran-Centered Care. This model will execute the following themes:

- Restructure the Primary Care Organization
- Redesign Primary Care Practices
- Provide Superb Access to Primary Care Services
- Improve Coordination of Care
- Develop New Measurement & Evaluation Tools

The cornerstone of the model is the establishment of an individualized, life-long relationship between the Veteran and his/her primary care provider, including these critical care components: Veteran-driven, team-based, comprehensive, continuous, coordinated, and well communicated. Various nursing roles will be vital to this new model including Nurse Practitioners, RN Care Managers, CNLs, Clinical Nurse Specialists (CNSs), Case Managers, and Licensed Practical/Vocational Nurses (LPNs/LVNs).
Field Advisory Committee (FAC) - Overview of Key Activities

**Cardiovascular FAC** (14 members)
- Representation on VA/HSR&D Stroke & CHF QUERI Cardiovascular Clinical Competency; recommendations made
- Conducted advisory reviews for:
  - Standardized Nursing Surgical Competency List
  - Nursing practice implications for national education endeavor on anticoagulation
  - Standardization of documentation for SNOMED-CT

**Geriatrics & Extended Care FAC** (12 members)
- Review of core nurse competencies for Geriatric Nursing
- PICC Line specialized competency list
- Polytrauma Extended Care Workgroup: integrating OEF/OIF TBI Veterans in the community, VA LTC Centers and providing outreach services
- Collaboration with Office of Dentistry to improve oral care; pilot with Pittsburgh & Greater Los Angeles VAMCs

**Mental Health FAC** (22 members)
- Workgroups for Inpatient/Outpatient Core Competencies
- Development of:
  - Skin Assessment for Mental Health patients
  - Flowchart & narrative for National Directive Guiding Skin Integrity Assessment & Pressure Ulcer Management
- Systems Redesign—MH Collaborative

**Metabolic Syndrome/Diabetes FAC** (10 members)
- Conducted advisory reviews for:
  - Post discharge follow up care
  - Hypoglycemia protocols, foot exams
  - Tools for staff to implement EBP
- Working with VHA High Alert Task Force—part of 5 Million Lives Initiative, Insulin subcommittee
- Assisted with VA/DoD 2009 Diabetes Clinical Guidelines

**Oncology FAC** (16 members)
- Pilot survey development - State of VA Oncology Nursing (environmental scan)
- Workgroups Chartered:
  - Oncology Nursing Quality Indicators: OQP/Oncology Nursing Society
  - Web based Oncology Nursing Handbook/Competencies: EES/Oncology Nursing Society
  - Lippincott Transfusion Workgroup—Transfusion Reaction Management, Blood Administration procedures for currency
- Participation in IT Solutions Workgroup - Reviewing VistA Chemotherapy Manager, CPRS Chemotherapy packages
- Collaborations:
  - Systems Redesign - Cancer Care Collaborative
  - Collaboration with Oncology Nursing Society—National Nursing Quality Indicator Project

**Perioperative FAC** (9 members)
- Evaluation of Pressure Ulcer Assessment in Perioperative setting
- Review of OR staff mandatory training - Briefing process, Time Out, reviewing educational videos
- Development of:
  - Operating Room-specific competencies
  - Standard Operating Procedures & competencies for RME (Reusable Medical Equipment)
  - Orientation program for new graduate nurses
  - Entry-level scrub technician Position Description (targeted GS-6), competitive with community

**Polytrauma/Rehabilitation FAC**
*Under Development*
- New Clinical Nurse Advisor selected; FAC member recruitment ongoing.

**Next Steps:**
- Comprehensive program evaluation targeted for 2010; Strategic Plan (2010)
- Future Nurse Advisor roles being considered
- Systems Redesign Collaboratives: Mental Health, Chronic Disease, Cancer Care
- Several QUERI projects in development

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**First Nursing Job:** Staff nurse on an inpatient oncology unit in a community hospital.

**VA Nursing Career Overview:**
Oncology Clinical Nurse Specialist—Baltimore, MD VAMC; Primary Care/Oncology Nurse Practitioner; VA/DoD Distance Learning Program Faculty & Lead Preceptor—Graduate School of Nursing, Uniformed Services University of the Health Sciences (USUHS)—Bethesda, MD.

**Most Passionate About:** Any and all subjects pertaining to clinical practice, clinical trials and research; however, oncology has been my deepest passion.
Evidence-Based Practice

**Evidence-Based Practice (EBP) national initiatives** focus on creating the infrastructure and processes for VA nurses to consistently apply the best evidence to improve health care delivery and outcomes throughout VA.

**Nursing Research** assists in building capacity for high quality research that informs EBP and nursing science in order to promote health and excellence for our Veterans and the Nation.

**Academic Initiatives** support advancements in our learning environment. Activities in this area include providing VA graduate traineeships and fellowships and strengthening mutually beneficial relationships between nursing schools and VA facilities by expanding faculty and professional development, increasing nursing student enrollment, providing educational and practice innovations, and increasing recruitment and retention of VA nurses.

**EBP Toolkit**
This resource is designed to help nurses at all levels incorporate EBP into their daily work. EBP is important because it improves quality of care and can save health care dollars. Most importantly, EBP is the “right thing to do for patient care.” The toolkit is updated continuously and online instructions are available on the ONS Web site.

http://vaww.collage.research.med.va.gov/collage/N_EBP/

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**First Nursing Job:** Staff Nurse in the General Operating Rooms at Johns Hopkins University Hospital-Baltimore, MD.

**VA Nursing Career Overview:** Associate Chief, Nursing Service for Research—Washington, DC VAMC; Deputy Director, Mid-Atlantic Office of Research Oversight (ORO); presently Director, Research and Academic Programs—ONS (VACO).

**Most Passionate About:** Having the best available evidence at the point of care to ensure Veterans receive the very best care.

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Evidence-Based Practice (cont.)

Major Initiatives/Projects

EBP

- Rollout of EBP toolkit to educate VA nurses about EBP in all settings, ongoing revision, and expansion
- Development of an infrastructure for EBP that includes conducting an environmental scan to identify and describe existing resources and champions; developing and providing ongoing training; and developing an educational plan that will engage all staff in EBP
- Creation of an EBP Business Case template that each facility may personalize to justify nursing EBP programs by highlighting nurses’ contributions to quality care and outcomes and providing cost saving measures through implementing evidence-based interventions
- Creation of systematic processes to identify nursing-sensitive measures that impact patient outcomes
- Incorporation of genetic and genomics concepts into VA nursing practice (future goal)

Nursing Research

- The Nursing Research Advisory Group (NRAG), chaired by Jill Bormann and Kathryn Rugen, is working to expand nursing research capacity throughout VA
- Partnerships include the Office of Research and Development (ORD) and Office of Academic Affiliations (OAA)
- Goals include:
  - Increasing capacity for nursing research through mentorship
  - Expanding infrastructure to support nursing research
  - Promoting visibility and value of nursing research
  - Enhancing evidence-based nursing practice
    - Updating a VA nursing research agenda

Academic Initiatives

Partnerships with OAA focus on the following programs:

- Nurse Fellowship Programs
  - Pre- and post-doctoral fellowship programs
  - VA Quality Scholars (with Dartmouth Institute and the Robert Wood Johnson Foundation’s Quality and Safety Education in Nursing initiative) began providing 5 pre- (PhD or DNP) and post-doctoral nurse fellowships in July of this year
- VA Nursing Academy (VANA)—Enhancing Academic Partnerships program (see page 15)
- RN Residency Program for New Graduate Nurses (see page 10)
- American Association of Colleges of Nursing (AACN)/VA Liaison Committee

Uniformed Services University of the Health Sciences (USUHS)

- VA and USUHS have a Memorandum of Understanding (MOU) for their PhD in Nursing program
- Dr. Christine Kasper (ONS) is on faculty at USUHS with rank of Professor and Acting PhD Program Director; in exchange, VA may enroll six (6) qualified applicants in this program; nurses that have graduated from or are currently enrolled are:
  - Christine Engstrom, PhD CRNP AOCN (Graduate)
  - Victoria J. Davey, PhD MPH RN (Graduate)
  - Marina Kearns, MSN FNP-BC (Currently Enrolled)
  - Brenda S. Stidham, RN MSPH (Currently Enrolled)
  - Nancy Gardetto, MSN RNP-C (Currently Enrolled)
  - Mary Pat Couig, MPH RN FAAN (Currently Enrolled)

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Staffing Methodology for VA Nursing Personnel

A significant piece of the patient care picture is the optimal number of nursing staff available to care for patients, our Veterans. A standardized nurse staffing methodology will support a national process to systematically measure the impact of staff levels and staff mix on patient care outcomes. Recent milestones on the path to determining the most appropriate methodology for staffing of nurses include completion of the project’s pilot and evaluation. Evaluation work was comprised of tailored online surveys and focus group sessions at each of the five participating VISNs (1, 5, 15, 16, and 20). An analysis and summary of findings completed in April is available through the Project Manager, Ila Flannigan.

Next steps in project timeline:
- Development of a national survey of Nursing Hours per Patient Day (NHPPD) in various care settings
  - The Technical Advisory Group (TAG) will provide content expertise for survey development, data interpretation, and reporting
- Comprehensive implementation guidebook
- Coordination with EES for series of Microsoft LiveMeeting training for national rollout
- Final pilot evaluation report

VHA RN Residency Program Pilot

A 12-month RN Residency Program that began in January 2009 is currently being piloted at 8 sites: Bay Pines, FL; Boise, ID; Houston, TX; Long Beach, CA; Minneapolis, MN; Shreveport, LA; Tampa, FL; and Fort Harrison, MT. Numerous anecdotal and research studies published in the nursing literature report positive outcomes of similar programs to address the three most prominent issues facing graduate nurses today: 1) higher rates of turnover; 2) competitive recruitment; and 3) variation in hiring practices across the organization. The program’s curriculum focuses on refinement of graduate nurse (GN) clinical competencies, and development of professional nursing skills/behaviors and leadership characteristics. The program utilizes a variety of educational strategies structured by phases throughout the year, as follows:
- Phase I: classroom education & precepted clinical experiences
- Phase II: monthly new graduate meetings, group clinical debriefings & one-on-one mentoring
- Phase III: evidence-based practice project

Tools for validating the program’s effectiveness consist of the Casey-Fink Graduate Nurse Experience Survey, Resident Competency Assessment Tool, and Overall Participant Program Evaluation. Evaluation data will include some the following measures: turnover, retention, recruitment, new graduate nurse practice improvement and career advancement, and staff satisfaction.

Next steps in project timeline:
- Evaluation of pilot, January—March 2010
- Program modification, March—April 2010
- National implementation, May 2010

First Nursing Job: Staff RN—Pittsburgh, PA VAMC.

VA Nursing Career Overview:
Nurse Manager for Surgery, Associate Chief Nurse for Geriatrics & Extended Care, Clinical Applications Coordinator—Pittsburgh, PA VAMC.

Most Passionate About:
Nurse Professional Standards Board processes and promotions; staffing methodologies/issues; and educating staff.

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The *Let’s Get Certified!* campaign was designed in 2008 to offer guidance to support facility efforts in increasing the number of certified nurses at VA patient care facilities.

NEW THIS YEAR…

- Expansion to DoD partners (Army, Navy/Marines, Air Force, Coast Guard, Uniformed Public Health Services, etc.)
- Expansion of certifications
- Increase in discounts
- Monetary awards attached to national campaign


**Professional Standards Board (PSB)**

**Nursing Career Paths National Roll-Out**

Nurse Qualification Standards (NQS) are generic criteria defining the education, experience, and performance requirements for each grade and level. The NQS provide a basis for a peer review process (PSB) to be appointed, retained, promoted, and/or advanced/rewarded. The 9 Dimensions of Nursing Practice that support this have been collapsed into 4 dimensions as follows (Dimensions of Practice, VHA Handbook 5005 Appendix G6):

- **Practice**—Practice, Ethics, Resource Utilization
- **Professional Development**—Education/Career Development, Performance
- **Collaboration**—Collaboration, Collegiality
- **Scientific Inquiry**—Quality of Care, Research

The Dimensions of Practice have now been applied to specified career paths. These paths support nursing in the diversified environments that are available. The paths include:

- Clinical
- Supervisory
- Advanced Practice
- Consultant

The Career Path workbooks provide examples to assist the employee in application of the Dimensions of Practice to their specific role. The examples are not conclusive, but serve as an all-inclusive guide for application that should not be limited to only those that are provided.

**Magnet Journey for VHA**

Many medical centers across the system have been on the journey to obtain Magnet designation to promote the benefits of this prestigious recognition, which includes organizational excellence, professional nursing practice, quality outcomes & a healthy work environment.

- National efforts include: annual VHA Magnet conference, ongoing communication strategies, national certification campaign (*Let’s Get Certified!*)

- Currently certified sites:
  - Tampa, FL VAMC ⇒ 3rd designation
  - Portland, OR VAMC
  - Houston, TX VAMC ⇒ 2nd designation
  - Atlanta, GA VAMC ⇒ New Site! Congratulations!
  - Madison, WI VAMC ⇒ New Site! Congratulations!


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First Nursing Job: Medical/Surgical Staff Nurse—Philadelphia, PA VAMC.

VA Nursing Career Overview: Telemetry Step-Down nurse—Southern Maryland Hospital; Vaccine Adverse Reporting System (AERS) - CDC/FDA project team; Health Services Research development—HSS QUERI; Clinical Data Specialist, Associate Director of Career Development & Workforce Management - ONS (VACO).

Most Passionate About: On-the-job education, professional practice experience, and career development.

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Introduction of the ONS Chief Nursing Informatics Officer (CNIO)

The CNIO serves as the principal informatics advisor to the Chief Nursing Officer. In this capacity, the CNIO’s primary role is to direct a comprehensive Nursing Informatics Program consisting of: the VA Nursing Outcomes Database (VANOD) and Information Technology/Systems Design.

Information Technology/System Design

National Patient Assessment Nursing Documentation Package:
ONS is committed to providing standardized nursing documentation tools throughout VA for the purpose of decreasing fragmentation of documentation, lessening the disruption in workflow connected with documentation, and providing nursing with a mechanism for tracking patient outcomes as they relate to nursing care delivery. To accomplish this goal, ONS is currently leading the development and pilot testing of a Patient Assessment Documentation tool which will provide a standardized format for recording the initial and ongoing nursing observations of, and interactions with, patients from admission to acute care settings to discharge. The tool consists of four components that support routine responsibilities of staff nurses and includes a tool to support patient hand-off communication. The components are:

1. Initial Admission Patient Assessment Template
2. Shift Reassessment Template
3. Care Plan
4. End of Shift Report

The benefits of utilizing these tools to the VA health care system as well as nursing include:

- Documentation of all key information in one location
- Cognitive support (memory jogger) for what the nurse should document
- Avoidance of redundant documentation
- National, VISN and facility level reports
- Improvement in the ability to evaluate the impact of nursing care on patient outcomes

NEW! Simulation Learning Enhancement & Advanced Research Network (SimLEARN)

This national initiative seeks to establish a systematic approach for simulation training education, and research to coordinate existing local efforts and create greater efficiency in employee education and training.

Simulation training and education can not only have an impact on clinical staff, but has the potential for health care support and administrative employee education also. Over the last two decades, technological advancements have laid the foundation for the ability to create simulated learning environments for a variety of purposes.

ONS will be collaborating with the offices of the Employee Education System (EES), Health Information (OHI), Patient Care Services (PCS), and Academic Affiliations (OAA) in the design phase and ongoing program operations. This innovative new project is still in its infancy, and more information will be shared as it becomes available.
Nursing Informatics (cont.)

VANOD provides data to support all ONS programs. Over the course of 2009, integration of the Technology strategic thread and VANOD was initiated to better meet the needs of Nursing Informatics as a whole. The updates below present more detail on these and other VANOD initiatives.

**VANOD Reports:**
- Nurse Executive Reports: Executive-level, dashboard style report with data compiled from multiple sources, including the VANOD Administrative Indicator Cube for Demographic and Financial nursing data, and clinical data from the VANOD Skin Risk Reports; capability to include new reports as data become available; report along with education and resource documents can be found on the VSSC VANOD Products page; no software downloads required to access facility data.
- Nursing Hours Per Patient Day of Care (NHPPD) from DSS reports.
- RN Satisfaction:
  - RN Practice Environment Survey (PES) - October 2009 — will use standardized inpatient unit types and names for unit level reports.
  - All-Employee Survey data for nursing skill mixes.
- Skin Risk Indicators: Clinical indicators for skin risk nursing processes and patient outcomes developed and posted in VANOD; indicator results available as of January 2008 and reported monthly for the prior month.
- Staff demographics and fiscal data from Human Resources and Payroll files (PAID).

**Technology & Data Infrastructure:**
- Mandatory Overtime: Project in development to capture mandatory vs. voluntary overtime.
- Nurse Location: Project in development to standardize nurse locations and types of unit to provide unit level reports.
- Patient Falls template (Risk Assessment and Post-Fall Note) released to the field in Summer 2009.
- Terminology Standardization: VANOD is facilitating a project to create enterprise clinical observation terms to be utilized in all clinical documentation systems in VA. Those terms will be included in the Patient Assessment, Patient FlowSheets (Clinical Observation Database – ClIO), Clinical Information Systems (CIS) Commercial off the Shelf (COTS) and Anesthesia Record Keeping (ARK) COTS software.

Mimi Haberfelde, RN-BC MS  
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Nursing Informatics Specialist  
Alicia.Levin@va.gov

Diane Bedecarré, RN-BC MS  
Nursing Informatics Specialist  
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Bonny Collins, PA-C MPA  
Director, Office of Nursing Services Informatics  
Bonny.Collins@va.gov


VA Career Overview: Physician Assistant in Ambulatory Care  
Grand Junction CO VAMC; Facility Quality Manager; VISN 19 Quality Management Officer; VACO Office of Quality and Performance (OQP); first VANOD Program Manager, 2005 ONS (VACO); currently Director, Office of Nursing Services Informatics.

Most Passionate About: Developing the capability to extract system information to improve processes and patient outcomes without adding burden to front line nurses.
Advanced Practice Nursing Advisory Group (APNAG)

The Advanced Practice Nursing Advisory Group (APNAG) strives to strengthen and sustain advanced nursing practice, knowledge, education, leadership, and professional collaboration. The group's focus is on the establishment and implementation of strategic initiatives for Advanced Practice Registered Nurses (APRNs) such as workforce and career issues, and clinical issues related to licensure, role utilization, prescriptive authority and outcome measurement.

APNAG serves in an advisory capacity to the National Nurse Executive Council (NNEC) related to strategic planning and VHA organizational activities that impact advanced practice nursing in VA. APNAG's primary aim is to improve communication between ONS, NNEC, and APRNs. APNAG also works closely with the APRN Liaison group to identify and address concerns raised by APRNs throughout VA. In 2009, APNAG has conducted work in the following areas:

- Assisted with the development of an evidence-based practice toolkit and a standardized admission template for CPRS.
- Collaborated on the development of a CNS scope of practice and functional statement template, and an NP scope of practice and peer review process.
- Enhanced the APN COLLAGE Web site with FAQ document addressing 22 issues, an updated APRN directory, and quarterly newsletters.
- Continued the development of a national APRN mail group.
- Reviewed multiple care models pertaining to mental health, chronic care management and the Planetree model for APRN practice consideration.
- Collaborated with the APRN Liaison Group to address APRN pay, reward and recognition issues.
- Initiated strategies to support completion of doctoral education for APRNs.

Jan Elliott, RN-BC MSN
AOCN
APNAG Chair, Clinical Nurse Specialist
VA Palo Alto, CA HCS

Nursing Research Advisory Group (NRAG)

VA Nursing Research Agenda:

The VA Nursing Research agenda is congruent with the mission, vision and goals of VHA and its identified priorities of care. Within an interdisciplinary context, VA Nursing Research focuses on identifying, testing and/or implementing nursing interventions that enhance health and prevent disease in Veterans across the care continuum. These nursing interventions are patient-centered, culturally congruent, cost-effective and outcome-driven. The following are some areas of work accomplished by NRAG in 2009:

- Development of VA Nurse Scientist Toolkit: http://vaww1.va.gov/nursing/docs/nr_toolkit.html
  The purpose of this toolkit is to assist the new nurse scientist in the orientation to VA focusing on resources for research and for building a program of research.
- Increasing visibility of VA nurse researchers: contacted journal editors with plans to have VA themed manuscript in Journal of Cardiovascular Nursing; draft manuscript (Nursing Outlook) of history of nursing research in VA.
- Collaborations towards addressing psychometric issues related to VANOD database.
- Development of Nursing Informatics White Paper.
- Development of priorities for Nursing Research Agenda.
- Development of recommendations for policy, such as issues related to Research vs. Quality Improvement or Evidence-Based Practice vs. Research.
- Grant-Writing Workshop for emerging VA Nurse Scientists, held in August 2009.

Jill Bormann, PhD RN
NRAG Chair, Research Nurse Scientist
San Diego, CA HCS
Federal Collaborations/Professional Affiliations

VA/DoD Electronic Nursing Summary

Electronic medical information from the Department of Defense (DoD) about severely wounded troops is now being transferred to four VA special treatment centers utilizing an Electronic Health Record (EHR) technology solution. The VA-funded project is the result of collaboration among VA and DoD nurses—led by VA/DoD Polytrauma Rehabilitation Nurse Liaison, Brenda Stidham, RN MSPH—and information technology professionals. The patient information to be shared between DoD and VA involves electronic notes based on the SBAR communication framework:

- **S**=**Situation** (includes patient demographic, diagnoses, allergies, vital signs, etc.);
- **B**=**Background** (includes mental and physical status at the time of transfer);
- **A**=**Assessment** (identifying needs and issues to be addressed; key nursing diagnoses); and
- **R**=**Recommendation** (plan of care, documentation, fields required by joint commission, etc.)

A successful pilot project was completed, sharing patient information between Walter Reed Army Medical Center and the James A. Haley VAMC’s Polytrauma Unit in Tampa, FL, in September 2008. Walter Reed now shares enhanced data with VA’s four Polytrauma Centers in Tampa, FL; Richmond, VA; Minneapolis, MN; and Palo Alto, CA.

In a collaborative effort between Army and Navy nursing, this initiative is also being looked at to facilitate the flow of information in the same manner for communication between Landstuhl Regional Medical Center (LRMC), Walter Reed and National Naval Medical Center. Landstuhl’s approval to fully implement the note is pending LRMC command approval. In May 2009, the handoff template was shared with the National Trauma Nurse Coordinator, Canadian Forces Health Services Group Headquarters. This uniform, standard method of communicating patient information will ensure that Veterans receive high-quality care immediately after being transferred, and that this information is readily available and accessible to health care providers.

VA Nursing Academy (VANA)

In 2007, VA established a VA Nursing Academy (VANA) five-year, $59 million, pilot program: *Enhancing Academic Partnerships & Programs*, that aims to address the nursing shortage within VA, as well as the Nation. VANA is intended to address this in the following ways:

- Expanding teaching faculty in VA facilities and affiliated nursing schools
- Increasing VA recruitment and retention by enhancing clinical experiences for nursing students and expanding teaching and research opportunities for VA nurses
- Establishing scholarship programs for nursing students

Since its inception, a total of 15 VA/Nursing School partnerships have been established:

<table>
<thead>
<tr>
<th>VA Site</th>
<th>Nursing School Partner</th>
</tr>
</thead>
<tbody>
<tr>
<td>Charles George VAMC—Asheville, NC</td>
<td>Western Carolina University School of Nursing</td>
</tr>
<tr>
<td>Birmingham VAMC—Birmingham, AL</td>
<td>University of Alabama at Birmingham School of Nursing</td>
</tr>
<tr>
<td>VA Pacific Islands HCS—Honolulu, HI</td>
<td>University of Hawaii at Mānoa School of Nursing &amp; Dental Hygiene</td>
</tr>
<tr>
<td>VA New York Harbor HCS—New York, NY</td>
<td>Pace University Lienhard School of Nursing</td>
</tr>
<tr>
<td>VA Pittsburgh HCS—Pittsburgh, PA</td>
<td>Waynesburg University</td>
</tr>
<tr>
<td>Ralph H. Johnson VAMC—Charleston, SC</td>
<td>Medical University of South Carolina</td>
</tr>
<tr>
<td>Edward Hines, Jr. VAMC—Hines, IL</td>
<td>Loyola University of Chicago</td>
</tr>
<tr>
<td>Michigan Consortia—(Ann Arbor, Battle Creek, Detroit, Saginaw)</td>
<td>University of Detroit; Mercy; and Saginaw Valley State University</td>
</tr>
<tr>
<td>Oklahoma City VAMC—Oklahoma City, OK</td>
<td>University of Oklahoma Health Sciences Center</td>
</tr>
<tr>
<td>Providence VAMC—Providence, RI</td>
<td>Rhode Island College</td>
</tr>
<tr>
<td>James A. Haley VAMC—Tampa, FL</td>
<td>University of South Florida</td>
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<tr>
<td>North Florida/South Georgia HCS—Gainesville, FL</td>
<td>University of Florida</td>
</tr>
<tr>
<td>VA Salt Lake City HCS—Salt Lake City, UT</td>
<td>University of Utah</td>
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<tr>
<td>VA San Diego HCS—San Diego, CA</td>
<td>San Diego State University</td>
</tr>
<tr>
<td>VA Connecticut HCS—West Haven, CT</td>
<td>Fairfield University</td>
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Counting the Pieces: Nursing Demographics & Data

Important Updates to VHA Nursing Data…

In the 1st quarter of FY2009, assignment codes for Registered Nurses (RNs) were revised nationally and each facility tasked to review and update all RN assignment codes. Assignment codes are used to determine Nursing Role, e.g. Administrative, Direct Care, Hospital Support, etc. This revision of assignment codes in the first two quarters of FY2009 creates a shift in data such that “Nursing Role” data should not be trended by quarter in FY2009, nor compared to previous years. These data are believed to be stable by the end of FY2009 (see “Distribution of Nursing Hours by Role” chart).

Nursing Workforce by Skill Mix - FY2009*

Registered Nurse (RN) Gender by Age Group - FY2009*

Registered Nurse (RN) Gender by Age Group - FY2009*

Nursing Staff Reported Injury Rate - FY2009

Quick Facts Table FY2009*

| Professional Nursing Personnel Total | 76,334 |
| # of Direct Care Nursing Staff (RN, LPN/LVN, UAP) | 62,354 |
| # of Direct Care RNs | 36,685 |
| % of Direct Care staff who are RNs | 59% |
| % of Direct Care RNs with at least a Bachelors Degree | 57% |
| % of Direct Care RNs eligible to retire (including early) | 24% |
| % of Direct Care RNs with less than 5 yrs service | 40% |
| # of Certified Registered Nurse Anesthetists (CRNAs)** | 632 |

*Source: 9/2009 (pay period 19); VA Nursing Outcomes Database (VANOD), PAID File by Budget Object Code (BOC) - all skill mix.

**Fiscal PAID cube, by Budget Object code, pay period 19

Registered Nurse (RN) Gender by Age Group - FY2009*

*Source: 9/2009 (pay period 19); VA Nursing Outcomes Database (VANOD) PAID File by RN Budget Object Code (BOC).
Rate of Nursing Staff Leaving VA – These rates describe nursing staff losses to the Department of Veterans Affairs (VA).

- **VA Total Loss Rate** – Any loss, retirement, death, termination or voluntary separation that removes an employee from VA (does not include transfers within VA).
- **VA Quit Rate (Regrettable Losses)** – Voluntary resignations and losses to VA. This turnover rate is especially important to analyze since these losses are voluntary and potentially preventable (does not include transfers within VA).
- **Other** - The difference between the Total Loss Rate minus the Quit Rate.
Newest Pieces of the Puzzle:
Recently Appointed VA Nurse Executives & Associate Directors, Nursing/Patient Care Services

Cynthia Heidt, RN MSN
Philadelphia, PA—VISN 4
Mentored By: Pat Troy, RN MSN

Sallieann Hoffer, RN MSN
Walla Walla, WA—VISN 20
Mentored By: Judy Murphy, RN MSN

Teresa Kumar, RN MSN
Bay Pines, FL—VISN 8
Mentored By: Ceci McVey, BSN MHA CNA

Bonnie Pierce, RN MSN
Muskogee, OK—VISN 16
Mentored By: Beth Ann Taylor, RN BSN MBA

Tracy Weistreich, PhD RN NEA-BC
Roseburg, OR—VISN 20
Mentored By: Mary Walters, RN MS

Mary Wideman, RN MSN
Columbia, MO—VISN 15
Mentored By: Frankie Manning, RN MA

Donna Yarnell, RN MSN
Erie, PA—VISN 4
Mentored By: Mary Fraggos, RN MS CNOR

Alesia Coe, RN MSN
Danville, IL—VISN 12
Mentored By: Pamela Thompson, RN MSA MSN NEA-BC

Nancy Schmid, RN MSN
Syracuse, NY VAMC—VISN 2
Mentored By: Kathy Cole, RN BSN MS NEA-BC

Penny Holland, RN MSN
Saginaw, MI VAMC—VISN 11
Mentored By: Karen Robinson, PhD RN

Shella Stovall, RN MSN
Salt Lake City, UT—VISN 19
Mentored By: Kathy Chapman, RN MSN FACHE

Ronald Fought, RN MSN
Chicago, IL—VISN 12
Mentored By: Deborah Clickner, RN CNA BC

Sarah Williams, RN MA NEA-BC
Salisbury, NC—VISN 6
Mentored By: Rebecca Garcia, RN MSN

LeAnne Whitlow, RN MSHSA MBA
Gainesville, FL VAMC—VISN 8
Mentored By: Kathryn Ward-Presson, RN BSN MS

Gloria Bays, RN MSN ARNP NE-BC
West Palm Beach, FL—VISN 8
Mentored By: Pearl Washington, RN MSN

Marlene Brewster, RN MS
Los Angeles, CA VAMC—VISN 22
Mentored By: Rachel Crossley, RN MSN NEA-BC

Carol Gouty, PhD RN MSN
Hines, IL VAMC—VISN 12
Mentored By: Ira Richmond, RN MSN

Judith Burke, RN
Eastern Colorado HCS—VISN 19
Mentored By: Sue Hudec, RN MSN
2009 Secretary’s Award Winners for Excellence in Nursing

- Registered Nurse (Staff Role) - Aneita Morgan, RN BSN
  James J. Peters VAMC (Bronx, NY)
- Registered Nurse (Expanded Role) - Margaret A. Mikelonis, RN NP - James A. Haley VAMC (Tampa, FL)
- Licensed Practical Nurse - Michael A. Martinez, LPN
  Eastern Colorado VA HCS (Denver, CO)
- Nursing Assistant - La'Shon Rivera, HT - Wilmington VAMC (Wilmington, DE)

2009 Secretary’s Award Winners for Advancement of Nursing Programs

- Director - Steven P. Kleinglass, Medical Center Director, Minneapolis VAMC (Minneapolis, MN)
- Nurse Executive – Cecelia McVey, RN MSN, Associate Director for Patient/Nursing Services, VA Boston HCS (Boston, MA)

2008 ONS Innovations Award Winners: Professional Practice Environment for Nursing Excellence

Technology Based Nursing Systems Redesign
Primary Author: Ginger Potts, RN BSN
Team Members: Kay Fox, RN | Sydney Wertenberger, RN MSN NEA-BC
Janice Vernon | Delinda Bounds Clay Franklin, DPH MS
Lynda Frey | Gary Cates

Patient Centered Shift Handoff
Primary Author: Mary Hartmann, RN MSN
Team Members: Beverly Priefe, PhD RN | Jacalyn Sutton, RN BSN
Susan Clearfield, RN BSN | Sarah Schroeder, RN ADN
Dennis Clapp, RN MSN | Molly Brunner, RN ADN
Teresa Van Wagoner, RN BSN | Laura Pafford, RN ADN
Donna Miller, RN BSN | Mary Schmidt, RN MSN

Minneapolis Heart Failure Telehealth Clinic
Primary Author: Connie Jaenicke, FNP-BC
Team Members: Judy Wagner, NP-C | Anne Steckler, RN BSN

Striving For Excellence on a National Level (IHI Initiatives on Reducing Central Line Infections and Ventilator Associated Pneumonias)
Primary Author: Suzanne Brungs, RN MSN MBA
Team Members: Rachael Hasselbeck, RN MSN MBA | Marta L. Render, MD

Intensive Cultivation of an Exportable Skin Management and Pressure Ulcer Prevention Program
Primary Author: Susan S. Thomason, MN RN APRN-BC
Team Members: Christine Bennett, MSN APRN-BC | Paula Boyle, RN CWOCN
Anne Dammers, RN CWOCN | Heidi Lacko, RN CWOCN
Jane Nichols, MSN RN CWOCN | Anna Resulta, RN CWOCN
Candice Watkins, RN CWOCN

Genie in a Bottle: The Magic of Nursing Brilliance (Glycemic Control Protocol)
Primary Author: Candace Cunningham, RN
Team Members: Mary Rudy, RN NEA-BC | Joyce Ewing, MHPM CCRN
R. Harsha Rao, MD PRCP

Improving the Early Detection and Case Management of Colorectal Cancer
Primary Author: Nicole Hicks, MSN CRNA
Team Members: Joann Moorhead, RN BSN | Joan Zolko, RN BSN
Kimberly Toland, MPA | Robert Monte, RPh MBA
Frederick DeRubertis, MD

Applying Evidence Based Practice through Shared Governance Structure
Primary Author: Diane Mayes, RN MSN
Team Members: Patricia A. Quigley, PhD MPH ARNP CCRN FAAN

Use of Restorative Nursing Assistants in the Critical Care Units
Primary Author: Mari Kelley, RN CNN CHTP
Team Members: Brooks Kabo, RN MS | Abbas Ardehali, MD
Margaret M. Kohn, RN MSN | Cathy A. Bradish, RN
Adina Katz

Centralizing Nursing in a Care Line Model: Creating the SAVAHCS Culture of Caring
Primary Author: Sheila Thompson, RN MSN FACHE
Team Members: DJ Smith, RN MS | Charles Silveri, RN MS
Martha Kates, RN MSN CNL
2009 ONS Innovations Award Winners

Improving Programs and/or Access to Services for Specified Populations: OEF/OIF, Rural Communities, Mental Health

A DoD/VA Collaborative Initiative: Development, Implementation, and Evaluation of a Nursing Electronic Hand-Off Communication Tool
Primary Author: Laureen Doloresco, MN RN NEA-BC
Team Members:
Brenda Stidham, RN MSPH
Margaret Veneman, BSN RN CRRN NE-BC CBIS
Lea Rashka, RN MSN | Maureen Merkl, RN MSN CEN

Grow Our Own RNs - Improved License Staffing in Mental Health Units
Primary Author: Sharon Valente, PMHCNS-BC ANP PhD
Team Members:
Ileen Wright, RN CNS | Michelle Kendall, PharmD BCPP

The Veteran's Resource Book: An Individualized, Interactive, Evidence-Based Educational Tool for Mental Health Recovery
Primary Author: Carol Hawthorne Rumpler, MS APRN BC
Team Members:
William D. Burmeister, RN MSA | Scott Hutton, PhD RN
Joyce Seltzer, MSN M.Ed. | John M. Backsneider, MS CTRS
Darcel Bolser, MSN APRN BC | Constance Boehner, PhD
Patricia Bender, RN | Charlene Bradley, LPN | Sandra S. Brown, NA
Mary Blunt, NA | Amy L. Carter, LSW | Darrell Cooper, LPN
Richard Cohen, RN | Sheila Cowherd, LPN | Cynthia Doherty, RN
James Faddis, LSW | Stacy Fischer-Samuel, RN
Sharra Harper, RN | Peter Hess, RN | Jennifer Hosler, RN
Jeanette Larry-Dillard, RN | Claudia McRoberts, RN
Ahmad Namakydoust, RN | Jeffrey Osborne, RN
Alan L. Rowe, RN | Constance Schitoskey, OTR
Bobbie J. Sloan, RN | Suzanne Simon, RN | Mainerd Sorenson, RN
William Tomko, RN | Jane A. Wansky, LSW
Linda Wood, Med RD | Joyce Williamson, LPN

Teleconference Support for Family Caregivers of Veterans with Dementia
Primary Author: Kathleen Warren, MSN ARNP
Team Members:
Jill Bormann, PhD RN | Arlene Klinefelter, LCSW
Laura Regalbuto, LCSW | Robert West

Delivering High Quality Preventive Health Care for Rural Veterans
Primary Author: Denise Bohm, RN MSN
Team Members:
Mary Virginia Rudy, NEA-BC | Timothy R. Burke, MD
Deborah Mitchum, RN CRNP

Expanding Rural Home Care: Point of Care Testing for Anticoagulation Management
Primary Author: Debra Walls, RN-BC MSN
Team Members:
Jennifer Wengryn, MSW LCSW | Judy Plowman, MD
Jodi Gutzik RN BSN | Robin Westlake, RN | Jill Meyers

Metabolic Assessment Group Intervention Clinic (MAGIC)
Primary Author: Lori Cranwell, RN MSN NP-BC
Team Members:
Stephanie Bayton, CNS | Tammy Richardson, NP
Elizabeth O'Connor, NP | Carolyn Tucker, RN

Road to Hope – Transition from Battlefield to Homefront: Nursing Led Initiative to Provide Seamless Transition for OEF/OIF Veteran Combating Homelessness
Primary Author: Mary Frances Pilarski, RN MSN
Team Members:
Susan Byerly, CRNP | Frances Dannenberg, MD
Thomas Matusky | Joseph Savino, LCSW

The Patient Access Center
Primary Author: Dennis Ellis, RN MSN NEA-BC
Team Members:
Divina Abella, RN BSN | Chris Kawakami, RN BSN
Linda Morn, RN BSN | Marcia Muskrat
Sarah Nuttbrock, RN BSN | Tammy Pidde, RN BSN CRRN
Georgia Shaw-Holden, RN BSS | Shirley Taylor, RN ADN
Kathy Jones-Sublette, RN ADN

Future Innovations Award Themes:
Items are submitted on a voluntary basis by the field; recipients listed may/may not represent the full scope of accomplishments by VA Nurses, as this list is representative of the period from 4/08 – 8/09; only nationally-recognized awards and achievements are included.

- **Washington, D.C. VAMC**—2009 winner of the “Medallion of Excellence,” highest honor presented for organizational achievement by the U.S. Senate Productivity and Quality Awards of Virginia (SPQA); SPQA uses the National Malcolm Baldridge Award criteria to rate organizations in all segments of enterprise -- manufacturing, health care, service industries, education and government; the judging committee has not recognized an organization with its highest achievement award since 2006.

- **Atlanta, GA VAMC**—designated as an American Nurses Credentialing Center (ANCC) Magnet® hospital

- **Michael E. DeBakey VAMC (Houston, TX) & James A. Haley VAMC (Tampa, FL)** – redesignated as ANCC Magnet® hospitals.

- **Audrey Nelson, PhD RN FAAN**—Service to America Medals finalist, Career Achievement Award - for Prevention of Back Injuries.

- **Janet Kemp, PhD RN**—Service to America Medals winner, Citizen Services - for Suicide Hotline

- **Marla Weston, PhD RN**—formerly part of ONS, was selected as Chief Executive Officer of the American Nurses Association (ANA), effective June 14, 2009.

- **Tammy Jones, RN, Dayton, OH VAMC**—Interventional Radiology Department, 2009 recipient of the Association for Radiologic and Imaging Nursing’s (ARIN) “Nurse of the Year Award” (the highest award given by ARIN), in recognition of her outstanding radiology nursing practice.

- **Susan Carlson, MSN APRN ACNS-BC GNP-BC**—Neurology Nurse Practitioner, Audie L. Murphy VA Memorial Hospital, San Antonio, TX; President-Elect of the National Gerontological Nursing Association Board.

- **Joy Edvalson, RN MSN FNP CWOCN**—recipient of AMSUS 2008 Clinical Nursing Excellence Award. Her performance in clinical nursing has a substantial impact on the mission of the Federal Health Agency.

- **Connie Uphold, PhD ARNP FAAN**—Associate Director of Education/Evaluation, North Florida/South Georgia VA HCS (Gainsville, FL); received 2008 Outstanding Research Award for the National Organization of Nurse Practitioner Faculties.

- **Karen Griffin, RN MSN NEA-BC**—Associate Chief of Nursing Services, South Texas VA HCS; elected President of American Academy of Ambulatory Care Nursing (AAACN), April 2008.

The following nurses were selected for Fellowship in the American Academy of Nursing (AAN):

- **Sandy Janzen RN MS NEA-BC FAAN**—Director, Clinical Executive Consultation & Development, ONS/VISN 8; **James Harris, DSN APRN-BC MBA CNL FAAN**—Deputy Chief Nursing Officer, Office of Nursing Services, Washington DC; **Ann Busch, RN FAAN** Clinical Nurse Specialist—Surgery, Portland, OR VAMC; **Eileen Collins, RN FAAN**—Nurse Researcher, Hines. IL VAMC; and **Bonnie Wakefield, RN FAAN**—Research Health Science Specialist, Iowa City, IA VAMC.

- **Christine Kasper, PhD RN FAAN FACSM**—Professor, USUHS, recipient of Best Research Award at (AMSCON) Medical Services Corps poster session.

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*Vernice Ferguson, RN MA FAAN FRCN* was awarded the **FREDDIE Lifetime Achievement Award**, becoming the first nurse recipient in the history of the award. Ms. Ferguson was the Assistant Chief Medical Director for Nursing Programs and Chief Consultant for the Nursing Strategic Healthcare Group in VA Central Office from 1980 to 1992.
The Office of Nursing Services would like to thank everyone who contributed to the development of this year’s annual report (near and far). This work could not have been produced without all of your dedication and hard work.

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Veterans Health Administration, Central Office
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