Shared Governance

2011 Nursing Annual Report

Shaping the future of healthcare in the Four States through innovative, evidence-based quality patient care
It’s been an exciting first year for Shared Governance at Freeman Health System. Through the work of steering and development committees, we laid the groundwork for an initiative that is improving both patient care and employee satisfaction. We held elections, made recommendations, implemented improved practices in the nursing units, and watched Freeman grow through the insight, experience, and wisdom of caring nurses. As we celebrate the nursing profession and our fabulous nurses, I encourage you to take a moment to reflect on the past year’s nursing accomplishments.

The contributions of the individual nurses and groups highlighted in this report have been many and varied. While all outstanding Freeman nurses are not specifically noted here, it is the phenomenal teamwork and combined contributions of the entire nursing team that allow us to live our mission—improving the health of the communities we serve through contemporary, innovative, quality healthcare solutions—every day at Freeman.

With a goal of providing excellent care to each patient and family we serve, our focus on service and quality continues. Many evidence-based practices have been implemented, including hourly rounds, multidisciplinary care rounds, use of communication boards in patient rooms, focused work on fall prevention, patient safety huddles, operating room safety, improved pressure ulcer prevention practices, and many others.

Our commitment to continuous improvement will advance our professionalism and our commitment to carry on the Freeman tradition of person-centered care. These efforts will result in nursing excellence—for every patient, every day.

Thank you to our nursing staff for an outstanding first year of Shared Governance. Your ongoing professional commitment, flexibility, and teamwork to transform care to meet the needs of our community continue to guide us on a journey of excellence!

Jeffrey Carrier, RN, NE-BC, FACHE
Chief Clinical Officer
Freeman Health System
Overview

Which comes first—employee satisfaction or patient satisfaction? For hospitals that practice Shared Governance, employee satisfaction and patient satisfaction go hand in hand.

Nurses are happiest when they can give the best patient care possible, and patients are happiest when they receive the best nursing care. Shared Governance gives nurses a voice to help them achieve the ownership and the motivation necessary to provide the best patient care, which improves patient and staff satisfaction simultaneously.

Shared Governance provides a structural model to help the bedside nurse work collaboratively with nursing leaders, giving them an equal voice in decision-making processes. It empowers nurses to take the lead and creates a decentralized method of decision-making. This empowerment allows nurses to control the content and implementation of their practices and outcomes.

For nursing staff, participation in Shared Governance means making a commitment to improving Freeman for staff and patients alike. Many benefits have been seen throughout Freeman in the last year because nursing staff have been empowered to take the lead, contributing to increased quality of patient care and improved outcomes.

Shared Governance goals:
- Improve quality
- Recognize and promote the value of staff
- Support staff awareness and involvement in unit-based decision-making

Shared Governance benefits:
- Shared responsibility and accountability at all levels of the organization
- Improved quality of care, resulting in increased patient satisfaction
- Equally shared power, authority, and decision-making
- Increased staff motivation
- Increased sense of ownership by nurses
- Nurse empowerment
- Development of new knowledge and skills
- Increased employee satisfaction, which helps with recruitment and retention

“We’ve seen many benefits from Shared Governance in the last year because nursing staff have been empowered to take the lead, contributing to increased quality of patient care and improved outcomes.”

Paula Baker, MS
Freeman President and CEO
Our Model for Shared Governance

A variety of models for Shared Governance exist. These include the Practice Model, in which all disciplines participate; the Unit Model, which comprises independent units; the Research/Development Model, and the Councilor Model, driven by nurses. Freeman uses the Councilor Model.

Hospital-based Councils—Process Improvements

**Nurse Practice Council** - implements and maintains standards of clinical nursing practice and patient care. This council reviews standards of practice, researches material relating to specific healthcare issues, and reads articles about evidence-based practices. With research and education as a focus moving forward, the Nurse Practice Council met with Missouri Southern State University (MSSU) to develop a relationship with the school’s library to make research materials available to Freeman. Research conducted at MSSU will help members of the council create and update health system policies and procedures. MSSU Dean of the School of Technology Tia Strait and her team met with council members in August 2011. At that time, the council toured the MSSU library and received instruction on how to access materials related to healthcare. Additionally, Freeman received a generous gift of $200 from MSSU to cover the cost of printing research materials.

**Nurse Quality Council** - comprises elected individuals from all hospital inpatient units. The Nurse Quality Council’s goals include ensuring compliance with system policies and procedures, making recommendations to enhance continuous quality improvement and safety, and developing action plans in collaboration with other councils to ensure quality patient outcomes.

**Professional Development Council** - focuses on recruiting and retaining nurses, demonstrating appreciation to nurses, and providing education on best practices. During 2011, the members of this council have worked diligently on several projects. Some of the smaller projects include creating an electronic informational form for 96-hour hold patients on rules and restrictions, working with the Professional Development Department to make fire extinguisher training sessions more friendly for those working the night shift, crafting an educational program on central line bundle practices, and working with the Nurse Practice Council to develop and educate staff on a discharge checklist to ensure core measure completion prior to discharge. Larger projects include developing an Employee of the Month program for units and the health system, creating and carrying out several activities during National Nurses Week to celebrate nursing staff, and creating The Advancing Professional Program. Each of these projects has been created and completed by outstanding, dedicated nurses from a variety of units. Their commitment to Shared Governance has made the success of this council possible.
Technology Council - ensures technology and computerization meet the demands of the nursing staff. In their first project, members of this council collaborated with the Freeman IT Department to replace computer on wheels (COW) units. The Technology Council was very impressed with IT’s responsiveness to nursing staff feedback. As a result, new COWs will have batteries with much longer life, energy-conserving features, larger wheels for easier navigation, and an improved bar code scanner. Also, the new COWs will be leased rather than purchased to allow timely upgrades to newer models and newer technology. The Technology Council also helped with the health system’s conversion to a new health information computer platform, Meditech 6.06. This $14 million upgrade helps Freeman meet the U.S. government requirement for meaningful use of an electronic medical record and impacts nearly every person working at Freeman. Members of the Technology Council have served as some of the first users, or superusers, of the new system and have assisted with staff education. They’ve also provided a conduit for feedback to IT from nursing units across the health system. Assisting with the implementation of Meditech 6.06 will continue to be the main priority of the Technology Council in 2012.

Nurse Coordinating Council - provides leadership and direction to all councils. It serves as a clearing house for issues, disseminates recommendations for action to the appropriate council, and provides final approval for all nursing council recommendations.

Unit-based Councils - provide representation for nurses across the health system. These councils relay ideas from nursing units to the Nurse Coordinating Council. Conversely, they also communicate information from the Nurse Coordinating Council back to the nursing units.

“Freeman’s participation in Shared Governance demonstrates a commitment to provide our nurses with a voice and integrate them into the decision-making processes of our health system.”

Richard Schooler, DO
Freeman Chief Medical Officer

“Shared Governance empowers the bedside nursing staff to work side by side with physicians to participate in process improvements.”

Lee Harwell, MD
Freeman Chief Medical Information Officer

Shared Governance visits MSSU Library

Decision-making Hierarchy
Heroes in the Wake of the Storm

Everything changed in the four-state area on May 22, 2011, as an EF-5 tornado, nearly a mile wide, ground its way across the community, destroying almost everything at the center of its 13.2-mile path. Joplin, Mo., lay in ruins, and thousands of people needed medical care. Freeman staff members rose to the challenge that night. Those already at the hospital when the tornado struck worked for hours on end, treating patients with unspeakable injuries, and comforting families. Because so many telephone poles and towers were down, many of those working at Freeman that night had no way of knowing if their own loved ones had survived the storm. Many of those who survived the storm crawled out from the rubble of their homes and found their way to Freeman, whose generator-supplied electricity provided the area’s only light, a beacon of hope, in a dark swath of destruction. And, despite disaster protocol that called for them to stay home until called, clinical and medical staff members who were not on duty that night walked, jogged, and hitched rides to Freeman Hospital West. They knew there was a need, and they knew they had to help.

First Year Highlights

Shared Governance excelled through a challenging first year at Freeman. Elections and planning sessions produced promising results. On January 31, a historic blizzard hit the area, crippling transportation and communications for a few days. Day-to-day operations soon returned to normal, and Shared Governance began implementing a number of new practices, programs, and systems. Then, on May 22, one of the worst tornadoes on record narrowly missed Freeman and changed Joplin and the surrounding communities forever.

Even after the first critical influx of tornado patients subsided, demands on the health system increased and continue to this day. Because the other hospital in our community was destroyed in the storm, Freeman has been operating at full census. Shared Governance has played a big role in helping the health system decide how to best meet the healthcare needs of the community in the wake of disaster.

Two immediate needs arose after the storm—the need for more patient beds and the need for more personnel, including nurses, to staff those beds. By the middle of July, Freeman opened a Transitional Care Unit at Freeman West to increase the health system’s capacity to care for patients with critical needs. Today, Freeman is in the process of finishing out the top two floors of Gary & Donna Hall Tower, which were left empty when the wing was built in 2007. This move will give Freeman 58 new patient rooms to better care for more patients. To help make this expansion the best it could be, Shared Governance nurses researched and selected a new call light system that will be used on the new floors. And, as Freeman continues to grow to meet the healthcare needs of the community, Shared Governance will be involved every step of the way.
Habitat for Humanity Partnership

In fall 2011, Habitat for Humanity completed an ambitious 16-day building project to construct 10 houses for 10 families affected by the May 22 tornado. To help, Freeman accepted an invitation to provide medical care for the Habitat for Humanity staff and volunteers. On-site Freeman nurses not only provided the exceptional medical care needed, but demonstrated the Freeman spirit of “taking care of Joplin with hearts and hands” by building the houses alongside Habitat for Humanity staff and volunteers. For more information about this project and the families chosen, visit tenforjoplin.org.

“Shared Governance is very important to Freeman because it involves bedside nurses in important decisions that affect the way we care for patients.”

Bruce Wilcox, RN  
Technology Council Chair

“It’s very important to have a research team among nursing staff so we can identify problems and solve them. We are the ones who see problems as we care for patients, so we should be solving those problems. It’s really exciting to see the team come together to use research to solve our problems.”

Karen Stoner, RN  
Nurse Practice Council Chair

Shared Governance on-site at Ten for Joplin
Innovative Focus on Improving Patient Care

Daniel W. Davenport once stated, “The greatest problem in communication is the illusion that it has been accomplished.” Recognition of this challenge at Freeman stimulated interest in installing a new nursing call light system on the fifth and sixth floors at Freeman West, with plans to install this system throughout the rest of the facility in the near future. The goal is to enhance communication, thereby improving efficiency, collaboration, and quality of patient care.

Throughout the process of researching nursing call light systems, Shared Governance was given the opportunity to have a voice. Three nurses traveled with Freeman CCO Jeff Carrier to Batesville, Indiana, and Chicago, Illinois, to evaluate different call light systems available. Hill-Rom and Rauland-Borg, vendors of nursing call light systems, hosted the site visits.

This new nursing call light system will include touch screen audio stations within patient rooms that interface with staff phones. Shared Governance work groups collaborated with others to determine the functionality of the buttons, or touch points, on the audio stations. Technology of this nature will allow for greater efficiency in numerous workflow processes, enhanced communication across multiple disciplines, and increased satisfaction among staff and patients.

“I’m excited about Shared Governance because it puts nurses on the front line in making decisions that positively affect patient care and HCAHPS scores.”

Theresa Fort, RN
Nurse Quality Council Chair

“Shared Governance is an amazing opportunity for nursing staff to work together to improve patient care!”

April Bennett, RN
Freeman Cardiac/Medical Unit Assistant Director
Professional Development Council Chair

“Shared Governance empowers our nursing staff, giving them a voice in the decision-making process. This empowerment is a benefit that helps us attract and retain quality nurses.”

Jeffrey Carrier, RN, NE-BC, FACHE
Freeman Chief Clinical Officer Nurse Coordinating Council Chair

Shared Governance site visit
The Advancing Professional Program (TAPP) was born at Freeman from collaboration between Shared Governance clinical staff and members of the administrative team. An exciting opportunity, TAPP encourages professional development through continuing education, community service, active participation in Shared Governance, and a commitment to the health system by involvement in process and quality improvements. TAPP provides a shared method of investment, by both the nurse and health system, with the ultimate purpose of improving patient care and the nursing culture.

Nurses participating in TAPP may progress through three levels of advancement—Clinical Nurse I, Clinical Nurse II, and Clinical Nurse III. At each level, the nurse is rewarded and recognized for his or her commitment to Freeman, the nursing profession, the community, and patients. Those demonstrating the commitment it takes to apply for, gain acceptance into, and progress through the program receive rewards. These include hourly increases in wages—$1.75 for Clinical Nurse I, $2.50 for Clinical Nurse II, and $3 for Clinical Nurse III.

Please note, this program is not like the clinical ladder from days past. TAPP is very competitive, highly selective, and challenging for participants. It promotes high quality bedside nursing care by rewarding those who continually strive to be the best of the best.

**TAPP Benefits**
- Increased quality of patient care
- Retention of high-quality, professional nurses, making Freeman the employer of choice
- Goodwill stemming from community service provided by nurses
- Clinical expertise gained by nurses while pursuing the program
- Nurses who model the Freeman 5-Star Promise (communication, compassion, ownership, teamwork, and professionalism) in all they do

Nurses interested in joining TAPP may apply from November 1 – December 31 each year. The Shared Governance Professional Development Council serves as the review and appeal board.
In an example of evidence-based nursing practice at its best, a team of Freeman Maternal Services nurses created a plan for improving oxytocin (drug used to induce labor) safety measures. This team, working collaboratively with physicians, developed a standardized protocol and an education plan. Driven by bedside nurses, the project has produced amazing results—reducing Freeman Neonatal Intensive Care Unit elective inductions admissions and keeping mothers and babies together following childbirth. Freeman Perinatal Information Coordinator Cathy Waggoner, BSN, RNC-OB, was selected to present her team’s research findings at a Philips User Group Meeting November 9-11, 2011, in Baltimore, Md.

Shared Governance Impacts Quality

As illustrated, nurses participating in Shared Governance at Freeman have made a positive impact on system quality measures.

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