UPMC St. Margaret Integrated Strategic Plans

UPMC System-Wide Strategic Plan

Our Mission
UPMC’s mission is to serve our community by providing outstanding patient care and to shape tomorrow’s health system through clinical and technological innovation, research, and education.

Our Visions
UPMC will lead the transformation of health care. The UPMC model will be nationally recognized for redefining health care by:

- Putting our patients at the center of everything we do and creating a model that assures that every patient gets the right care, in the right way, at the right time, every time.
- Harnessing our integrated capabilities to deliver both superb state-of-the-art care to our patients and high value to our stakeholders.
- Employing our partnership with the University of Pittsburgh to advance the understanding of disease, its prevention, treatment, and cure.
- Fueling the development of new businesses globally that are consistent with our mission as an ongoing catalyst and driver of economic development for the benefit of the residents of the region.
- Serving the underserved and disadvantaged, and advancing excellence and innovation throughout health care.

Our Values
1. **Customers:** Our patients and subscribers are our first priority and we strive to be responsive to their needs as well as those of the thousands of family members, visitors, and community residents who walk through our doors, e-mail, text, or call us every day.
2. **Peoples:** Our people are our greatest asset. Our workforce is reflective of the many communities and people we serve and we embrace this diversity as a source of vitality and strength. We value the active participation of employed and independent physicians from throughout the organization and recognize the contributions of our caregivers who are among the best in the world.
3. **Excellence:** Our goal is excellence in everything we do and we believe continuous improvement in quality is everybody’s responsibility.
4. **Integrity:** UPMC is built on a foundation of honesty and integrity. We promote, support and demand ethical conduct and compliance with the law throughout the organization.
5. **Teamwork:** We foster and promote a culture that encourages teamwork, embraces change and fosters innovation. We recognize that treating others with dignity and respect is an essential building block of our success.
6. **Leadership:** We believe that as leaders we must be on the forefront of best-in-class governance and business practices. Responsiveness and transparency will always be hallmarks of our operating model and we will continue organizational integration to achieve the highest and best use of our resources.
7. **Community:** We are committed to making the communities we serve healthier, stronger, better places to live and to being effective stewards of the resources that they entrust to us.

UPMC is one of the leading nonprofit health systems in the United States. A $10 billion integrated global health enterprise headquartered in Pittsburgh, Pennsylvania. UPMC develops and delivers Life Changing Medicine by harnessing the power of technology, translating science into cures, and accelerating the pace of innovation worldwide.

A passion for innovation lies at the heart of UPMC’s success. UPMC’s unique strategy of combining clinical and research excellence with business-like discipline translates into high-quality patient care for both western Pennsylvanians and the global community.

By leveraging our clinical and technological expertise to create breakthrough products and services, UPMC is taking a leadership role in transforming the economy of the region by:

- Pioneering new information technology applications to link and integrate electronic medical records across multiple hospitals and care settings
- Nurturing the creation of new companies
- Developing strategic business relationships with some of the world’s leading corporations
- Expanding clinical services and state-of-the-art medical expertise into international markets, including Italy, Ireland, China, and Japan
- Leading research initiative in a variety of new fields, such as regenerative medicine and biosecurity
- Contributing more than $560 million in Fiscal 2010 to charitable organizations and community-based health improvement programs

By creating new jobs, new businesses, and new models for health care delivery and community support, UPMC’s Life Changing Medicine is changing the medical world, as well as the whole wide world.
The Nursing Division’s Mission, Vision, and Values are closely aligned with the organization through an integrated strategic plan and in alignment with the core principles of the Magnet philosophy.

### INTEGRATED STRATEGIC PLAN LEGEND

<table>
<thead>
<tr>
<th>Category</th>
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<td>Safety</td>
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<td>Quality</td>
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<td>Technology</td>
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<td>Interdisciplinary</td>
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<td>Academics</td>
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## St. Margaret Strategic Plan - Organization

### Major Goals and Objectives for FY 2012:

**F** Deliver financial Results and Operational Metrics Established in the FY 2012 Budget

**S** Recruitment of additional Primary Care and placement of Specialty Physicians to expand services to the Allegheny Valley

**Q** Continue to strengthen and build a culture of quality and safety for all patients with a specific focus on the following process measures: Heart Failure discharge instructions, Patient falls and Pressure Ulcers, Patient 30 day readmissions and Hand Hygiene compliance

**Q** Continue to develop and deliver the Ultimate Patient Experience through Quality Initiatives, a focused Patient Satisfaction plan, Physician and Employee engagement and targeted Operational Efficiencies

**NE** Continue NDNQI Reporting; Formulate Strategies for Sustaining Nursing Excellence in Collaboration with Professional Practice Council

**NE** Expand the use of Physician Electronic Documentation and continue working toward HIMSS EMR Adoption Model (Stage 7)

**T** Work collaboratively with Health System leadership to assure appropriate patient access to UPMC facilities and services (i.e. Magee at St. Margaret, Natrona Heights time share)

**A** Continue to Improve Recruitment and Retention Metrics over FY 2011 Results or at UPMC Defined Target

### Nursing Division

**2011-2013**

**Transformational Leadership**

- To be recognized as the premier employer for nurses and the patient’s first choice for care
  - Nurses will be known in the organization and the community as leaders and experts in the practice of professional nursing.
  - Foster the environment of care on safety, quality, and the ultimate patient experience.
  - Advocate for sustainable fiscal resources for professional practice, staff and leadership development, and succession planning.
  - Integrate system philosophy and vision of “life changing” care and practice within the division of nursing.
  - Live the Relationship Based Care Model to strengthen the presence of nursing. Establish framework for nursing leadership succession

**Exemplary Professional Practice**

- To sustain a culture valuing professional accountability and clinical competency.
  - Empower patients and families to become true partners in care delivery and outcomes.
  - Measure and enhance nursing clinical competency while supporting a healthy nursing environment that balances body, mind, and spirit within the professional practice environment.

### Nursing Units

**3B**

**Transformational Leadership**

- Focus the environment of care on safety, quality, and the ultimate patient experience.
  - Improve 3B HCAHPS and Press Ganey to reach the Magnet Benchmark as evidenced by monthly scores.
  - Increase staff satisfaction as evidenced by improved NDNQI survey results 2013.
  - Fall rates to meet Magnet Benchmarks with a monthly goal of <3 falls and no serious injury
  - Unit acquired pressure ulcers to meet Magnet Benchmarks with a monthly goal of zero.

**Exemplary Professional Practice**

- Sustain a culture valuing professional accountability and clinical competency.
  - Empower patients to become true partners in care by collaborating with the RNs to improve throughput on 3B as evidenced by data collected from the Throughput Improvement Initiative with a goal of one hour transfer from bed assigned.
  - To strengthen interprofessional relationships on 3B as evidenced by continued development and participation of the 3B Interprofessional Committee.

### Nursing Councils

#### Clinical Practice Council

**Transformational Leadership**

- Continue the progress of transforming policy and procedure development and tracking utilizing an evidence-based approach and bring to the forefront those issues related to the bedside nurse’s use of informatics as evidenced by meeting minutes.

**Exemplary Professional Practice**

- Promote patient outcomes by ensuring all nursing policies and procedures have incorporated evidenced based research and an interdisciplinary team approach, including the use of internal and external experts as needed as evidenced by tracking tool completion.

**Structural Empowerment**

- Ensure that all decision making regarding the policy, procedures, and informatics structures include all council members and relevant nursing leadership as evidenced by attendance sheets.

**New Knowledge**

- Support and guide nurses seeking implementation of nursing policy, procedure, and informatics which reflect innovations to enhance the quality of care and the ongoing growth of professional nursing practice as evidenced by educational sessions.
### Leadership positions

Continue to develop strength in key Medical Physicians, risk and engaging private practice and employed Proactively mitigating Highmark risk by Magee at St. Margaret Center.

### Position for Growth and Development

- Continue to strengthen and enhance academics at UPMC St. Margaret through community initiatives, FHC enhancement and resident rotation into the rural communities.
- Improve Community Health Initiatives through partnerships with Foundation for targeted initiatives and employee wellness programs.
- Position for Growth and Development by completing the Master Campus Plan. Completing the A&E for the South Addition, completion of the North Addition, and the opening of the Magee at St. Margaret Center.
- Proactively mitigating Highmark risk by assessing risk and engaging private practice and employed physicians.
- Continue to develop strength in key Medical Leadership positions.

### Structural Empowerment

- **To strengthen and promote shared governance as the basis for nursing accountability, decision-making, and practice.**
  - Utilize available American Nurses Association Resources to guide practice, accountability, competence, and workplace advocacy.
  - Empower nurses on all levels to maximize their talents and expertise and recognize these efforts.
  - Nurses will impact our community through partnering efforts.
  - Build a culture of professional growth and education which values and recognizes advanced certification, advanced education, and lifelong learning.

### New Knowledge

- **To create an environment of inquiry in which all nurses apply evidence-based practices to improve healthcare delivery and patient outcomes.**
  - Develop nursing best practices grounded in research and quality to drive and enhance the profession of nursing at the hospital and system levels.
  - Contribute to the science of nursing through the dissemination of new evidence-based practices.

### New Knowledge and Innovation

- **Create an environment of inquiry in which all nurses apply evidence-based practices to improve healthcare delivery and patient outcomes.**
  - Utilize patient feedback to improve nursing practice through discharge phone calls and Press Ganey comments reviewed at unit based PPC meeting.
  - Develop nursing best practices by one 3B RN completing the Research Fellowship Program and developing an IRB project and 2-3 3B RNs completing their Senior Nursing Project.

### 4A Rehab

- **Transformational Leadership**
  - Further development of staff nurse leaders in clinical knowledge, patient satisfaction, and fiscal accountability.
  - Increase the number of nationally certified nurses on 3B by 3 RNs this fiscal year.
  - Increase the number of BSN prepared nurses on 3B by 2 RNs this fiscal year.
  - Strengthen shared governance on 3B as evidenced by two staff representatives on every hospital shared governance council and increased attendance at the 3B unit PPC meetings.

### Nursing Operations Council

- **Transformational Leadership**
  - Improve inter and intra departmental processes to enhance safe, quality patient care as evidenced by recommendations and action plans to Nursing Leadership Council.

### Exemplary Professional Practice

- **PS**
  - Identify and improve hospital care delivery systems as evidenced by development of structure and processes to solve care issues/problems/concerns.

### Structural Empowerment

- **Q**
  - Increase engagement of staff nurses on the council as evidenced by attendance, participations, and project completion.

### New Knowledge

- **NE**
  - Promotion of work environment changes to reflect nursing care delivery and promotion of best practices.

### Nursing Quality Council

- **Transformational Leadership**
  - Implement a multidisciplinary safe patient handling task force. Nurture innovation to improve evidence-based practices in safe patient handling to reduce direct care employee injuries by 20%.

### HCAHPS Measures

- **PS**
  - Exceed the 50th percentile of the State average of HCAHPS Measures.

### BSN RNs

- **PS**
  - Increase the number of BSN prepared nurses on 3B by 2 RNs this fiscal year.

### FIM Scoring

- **PS**
  - Improve accuracy FIM scoring on admission.

### Press Ganey Comments

- **NE**
  - Increase Press Ganey Satisfaction scores in the hospital and system.

### Patient Feedback

- **Q**
  - Utilize patient feedback to improve nursing practice through discharge phone calls and Press Ganey comments reviewed at unit based PPC meeting.

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### Research Fellowship Program

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### Senior Nursing Project

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### Transformational Leadership

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<td>Influence the use of technology to promote patient care and nursing development.</td>
<td>Enhance RN professional accountability and clinical competency through unit based partnerships.</td>
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<td>Utilize patient feedback to improve nursing practice.</td>
<td>Strengthen interdisciplinary and interprofessional communication as evidenced by increased participation of physician, nurse, and support staff in daily patient huddles, use of patient whiteboard, and development of reliable rounder program.</td>
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<td>Active participation of all staff on the Unit PPC as evidenced by attendance records.</td>
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<td>Strengthen and promote shared governance as a basis for nursing accountability, decision making, and practice.</td>
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<td>Formal development for unit based resource nurses as evidenced by completed program and attendance records.</td>
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<td>Expansion of clinician role as evidenced by role changes, formal education, and additional responsibilities/opportunities.</td>
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<td>To create an environment of inquiry in which all nurses apply evidence based practices to improve healthcare delivery and patient outcomes.</td>
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<td>4A rehab will develop two unit-based evidenced based quality projects as evidenced by their completion during FY 13.</td>
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<td>Further development of staff nurse leaders in clinical knowledge, patient satisfaction, and fiscal accountability.</td>
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<td>Increase the number of ONC staff nurses by two. Promote one to two staff nurses.</td>
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<th>Professional Practice Council</th>
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<td>Increase nominations for nurse recognition awards throughout the year as evidenced by increased number of nomination submissions.</td>
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<td>HAPU rates that meet or exceed NDNQI benchmark standards.</td>
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<tr>
<td>Develop a transparent culture to share/learn from errors and focus on work redesign and accountability using “Just Culture” approach.</td>
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<tr>
<td>Reduce falls and falls with injury to meet or exceed NDNQI benchmark.</td>
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<td>Create communication system to improve staff understanding of patient outcomes and current initiatives.</td>
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<td>Develop and engage nurses to champion quality improvement as evidenced by unit-based quality projects.</td>
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Improve Press Ganey satisfaction scores in the areas of pain control and overall satisfaction with nursing.
Decrease overtime by 1-1.5% this year as evidenced by fiscal reports

Exemplary Professional Practice
Enhance RN professional accountability and clinical competency through unit based partnerships
Strengthen interdisciplinary and interprofessional communication as evidenced by increased participation of physician, nurse, and support staff in daily patient huddles, use of patient whiteboard, and development of reliable rounder program
Active participation of all staff on the Unit PPC as evidenced by attendance records
Maintain patient fall rate <1 per month and no serious falls as evidenced by quality data. Monthly pressure ulcer rate at or below Magnet Benchmark.

Structural Empowerment
Strengthen and promote shared governance as a basis for nursing accountability, decision making, and practice.
Formal development for unit based resource nurses as evidenced by completed program and attendance records.
Expansion of clinician role as evidenced by role changes, formal education, and additional responsibilities/opportunities.
Restructure unit-based nursing orientation in partnership with Staff Education as evidenced by completed competency based orientation documentation.

New Knowledge
Prepare nurses for the professional engagement survey (NDNQI) as evidence by an increase in our nurse satisfaction scores.

Improve patient satisfaction scores in two or more areas by innovative methods as evidence by increased HCAHPS and Press Ganey scores.

Nursing Education, Research, and Evidence Based Practice

Transformational Leadership
Establish recognition program for nurses involved in EBP and Nurse Driven Research
Thank you cards sent on monthly basis
Publish nursing praise in “Nurse Talk,” “Channel E,” “Unit Newsletters,” as evidenced by publications.
Motivational signage/ideas to encourage enthusiasm about research as evidenced by meeting minutes.

Exemplary Professional Practice
To promote and engage nurses at UPMC St. Margaret to participate in Evidenced Based Practice (EBP) at UPMC St. Margaret through:
Development and implementation of educational programs to support EBP as evidenced by program flyers and attendance.
Development of an “EBP Toolkit and Workshop”
EBP project development at the unit level with the support of unit nursing
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<td>To create an environment of inquiry in which all nurses apply evidence based practices to improve healthcare delivery and patient outcomes.</td>
<td>To promote nursing educational endeavors that result in enhanced patient outcomes and nurse satisfaction.</td>
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<tr>
<td>4B Ortho will develop two unit-based evidenced based quality projects as evidenced by their completion during FY 13. Complete One IRB approved nursing research study. Expansion of the Geriatric Fracture program within the 4B culture as evidenced by educational opportunities, community involvement, and patient/family educational activities and instructions.</td>
<td>Annual UPMC St. Margaret Nursing Education Survey Journal Club (explore electronic option) as evidenced by attendance. Establish mentorship programs within the community as evidenced by completion of program and participants. Establish mechanism for council reps to identify unit education needs and a process to communicate with nursing education department.</td>
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<td><strong>5A</strong></td>
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<td>Transformational Leadership</td>
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<td>Focus the environment of care of safety, quality, and the ultimate patient experience.</td>
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<td>Unit goal of less than three falls monthly without serious injury.</td>
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<td>Transparent reporting of unit and hospital data at all unit meetings, weekly updates, and PPC. Engage and empower 5A nurses to act as leaders to ensure high quality patient care related to peer review of falls, pressure ulcerations, and medication errors (5A PPC report). Through the Patient Experience Council utilize Press Ganey comments and patient feedback as a forum for receiving feedback about ways to improve the quality of care and patient safety with a goal of improving satisfaction scores in 2013.</td>
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<td><strong>New Knowledge</strong></td>
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<tr>
<td>To promote nurse driven research at UPMC St, Margaret by providing:</td>
<td>Sustain a culture valuing professional accountability and clinical competency.</td>
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<tr>
<td>2013 Nurse Research Fellowship Program as evidenced by completed projects.</td>
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<td>2013 Annual Clinical Research Forum, as evidenced by flyer and attendance records</td>
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<tr>
<td>Development of a “Research Process Toolkit and Workshop” as evidenced by completion.</td>
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<td>Increase usage of white board communication by all members of 5A interdisciplinary team to improve partnership with patients and families in daily goal setting and care as evidenced by UD rounding.</td>
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<td>Strengthening of the 5A Patient Experience Council by adding interdisciplinary partnerships with the addition of representation of environmental services, nutrition, and physician as evidenced by unit meeting minutes.</td>
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<td>Community involvement by 5A staff that foster a positive image of professional nursing in the community as evidenced by verified service.</td>
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<td>Development of nurse shift handoff to ensure safe transfer of care of all patients on 5A as evidenced by managerial observation and reduced Riskmaster events.</td>
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<td><strong>Transformational Leadership</strong></td>
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<td>Increase educational advancement opportunities and recognition for direct care nurses in accordance with IOM recommendations, assist our nurses to advance in the “My Nursing Career” clinical ladder, increase number of staff nurses attending national and international conferences, increase professional certification and developing/implementing professional contributions to their units as evidenced by flyers for sessions, attendance records, certificates completed, and professional contribution projects.</td>
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| **Exemplary Professional Practice** |  |
| Encourage and promote interdisciplinary care and collaboration for all nurses and to promote autonomy and workplace advocacy as evidenced by informational sessions, educational programs, and attendance records. |

| Structural Empowerment |  |
| Promote professional engagement through increased attendance and consistent participation in our Shared Governance councils, educational offerings, and retention activities at the unit and hospital level as evidenced by attendance records and meeting minutes. |
### 5A Creation of 5A nursing education series
Promoting continuing professional growth and education in the field of med-surg/oncology as evidenced by educational calendar and attendance records.
Utilization of conference calling for unit meetings and PPC to increase staff participation and engagement of 5A staff.

### 5B Transformational Leadership
To demonstrate professional nursing through expert patient care and professionalism involving nursing education, nurses, and all members of the interdisciplinary care team.
Increase number of RNs with medical-surgical certification by 3 within the 2013 fiscal year.
Develop staff in unit specific areas and care needs with monthly in-services in the areas of CHF and COPD.
Increase the HCAHPS in the areas of “Help as soon as you wanted it” and “Nurses were friendly and courteous” as evidenced by an average 5% increase from 2012.

### Exemplary Professional Practice
To sustain a culture valuing professional accountability and competency.
Decrease fall rate with injury to 0 and patient falls to 1-2/month; decrease unit acquired pressure ulcers to an average of 1/quarter for fiscal year 2013.
RN to perform 10 follow-up calls after discharge to home patients with CHF and COPD weekly.
Provide patient education on CHF to 100% of

### New Knowledge
- Recognize nurses who have contributed to elevating Evidence Based Practice, Nursing Research here at SMH, design, and implementation of innovative care, and process ideas and those nurses involved in advancing safe nursing and quality nursing initiatives.
patient population prior to leaving the hospital to ensure a safe transition to home.

**Structural Empowerment**

To strengthen and promote shared governance as basis for nursing accountability, decision making, and practice. Implement bedside reporting and nurse accountability with rounds on shift change daily as evidenced by managerial and resource nurse observation. Utilize monthly councils and staff suggestions to implement unit changes and innovating care delivery as evidenced by meeting minutes.

**New Knowledge and Innovation**

To create an environment of inquiry in which all nurses apply evidence based practices to improve healthcare delivery and patient outcomes. Implement one to two quality based initiatives yearly as evidenced in QI reports. Give quarterly reports on financial impact of readmissions on health system during unit PPC meetings as evidenced by meeting minutes. Reduce linen expense by 5% as evidenced by linen usage reports. Each staff member to attend four continued education seminars a year as evidenced by attendance records.

**Transformational Leadership**

Focus the environment of care on safety, quality, and the ultimate patient experience. Improve 6A’s HCAHPS and Press Ganey results to reach and exceed the Magnet Benchmark as evidenced by monthly scores. Fall rates to be less than the Magnet Benchmarks with a goal of zero falls as a direct
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<td>Empower patients and families to become true partners in care delivery through the enculturation of relationship based care facilitation by daily interdepartmental collaboration during bed huddle and usage of whiteboards.</td>
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<td>Maintain nursing clinical competency through 6A’s annual mandatory educational day with a focus on the bariatric and surgical populations.</td>
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<td></td>
<td>Increase nurse satisfaction to be greater than the Magnet benchmark as evidenced by NDNQI survey results through the SOAR algorithm. Further enhance a culture for ongoing peer review.</td>
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</table>

| S | Structural Empowerment | Strengthen and promote shared governance as a basis for nursing accountability, decision-making and practice. |
Increase Medical/Surgical or Bariatric certified nurses on 6A by two in 2013. Incorporate a method for disseminating information from SMH share governance councils to 6A’s Professional Practice council on a monthly basis.

Organize and complete one yearly community project as a unit. Build a culture of professional growth and education by ensuring monthly participation in journal club, grand rounds, and any additional advanced educational presentations.

Increase educational status through degrees, certification, and career ladder.

New Knowledge and Innovation
Create an environment of inquiry in which all nurses apply evidence-based practices to improve healthcare delivery and patient outcomes.

Build an environment that embraces evidence-based practice through the enculturation of Lippincott online procedures.

Apply unit-based evidence-based practice to decrease surgical site infections thorough utilization of hibicians as monitored by a 6A Senior Professional Staff Nurse.

Utilize patient feedback to improve nursing practice and patient satisfaction through discharge follow up phone calls, as reflected in HCAHPS and Press Ganey scores and monitored by a 6A Senior Professional Staff Nurse. Senior Professional Staff Nurse will track and trend patient satisfaction data at unit based professional practice council meeting, ultimately providing the metrics for current and new projects.
6B

Transformational Leadership
Nurses on 6B will transform the care environment and be fiscally responsible.

- Elevate 6B HCAHPS and Press Ganey to Magnet Benchmarks
- Adaptation of reliable/variable rounder model for delivery of care on Stroke Unit
- Staff nurse participation in performance improvement initiatives as evidenced by Unit based PPC meeting minutes.
- Decrease med/surg costs by 1-2% in FY13

Exemplary Professional Practice
Nurture 6B nurses’ quest for knowledge and spirit of curiosity in an environment in which nurses apply evidence based practices to improve healthcare delivery and patient outcomes.

- Participation in unit-based Stroke Caregiver Research Study during FY 13 as evidenced by completed IRB project.
- Initiation of Unit Journal Club with emphasis on neuro/stroke population as evidenced by attendance records.
- Utilizing RN staff nurse as PI in research study on falls in patients with neurological deficits as evidenced by completed IRB project.
- Provide at least four educational learning programs for staff of topics of their choice for the care of 6B patients as evidenced by attendance records/program flyers.

Structural Empowerment
Create an environment of optimal patient outcomes through quality initiatives and interprofessional collaboration.
**New Knowledge and Innovation**

Strengthen and promote professional engagement and professional development

- Increase the number of nationally certified 6B RNs by three in FY13
- Increase attendance at unit based Professional Practice Council meetings as evidenced by attendance records.
- Development of 6B scheduling committee and patient satisfaction committee FY13
- Development of mentoring program for nurses with less than 1 year experience.

**Intensive Care Unit**

**Transformational Leadership**

To focus the environment of care on safety, quality, and the ultimate patient experience.

- Improve ICU HCAHPS and Press Ganey to reach the Magnet benchmark as evidenced by monthly scores.
- Increase staff satisfaction as evidenced by improved NDNQI survey results 2013.
Unit acquired pressure ulcers to score below the Magnet Benchmarks
Initiation of the Hospital Engagement Network—Pressure Ulcer Initiative as evidenced by a decrease in monthly nosocomial pressure ulcers.

**Exemplary Professional Practice**
To sustain a culture valuing professional accountability and clinical competency.

- Empower patients/families to become true partners in care by collaborating with the RNs to develop daily goals as evidenced by written goals on the white board.
- Empower families to become true partners in care with the initiation and involvement in the Partner program.
- Strengthen Interprofessional Relationships in ICU as evidenced by continued development and participation in the Critical Care Committee as evidenced by attendance records and meeting minutes.

**Structural Empowerment**
To strengthen and promote shared governance as a basis for nursing accountability, decision making, and practice.

- Increase the number of nationally certified nurses in ICU by 1-2 RNs in FY13.
- Increase the number of BSN prepared nurses in ICU by 1-2 RNs in FY13.
- To strengthen shared governance on ICU as evidenced by two staff representatives on every hospital shared governance council and increased attendance at the ICU Unit PPC Meetings.
New Knowledge and Innovation
To create an environment of inquiry in which all nurses apply evidence-based practice to improve healthcare delivery and patient outcomes.

- Utilize patient feedback to improve nursing practices through follow phone calls based on Press Ganey comments and follow-ups from Partner Program.
- Develop nursing best practices by one ICU RN completing the Research Fellowship program and developing an IRB-approved nursing research project.

Intermediate Care Unit

Transformational Leadership
To focus the environment of care on safety, quality, and the ultimate patient experience.

- Improve IMCU HCAHPS and Press Ganey to reach the Magnet Benchmark as evidenced by monthly scores.
- Increase staff satisfaction as evidenced by improved NDNQI survey results 2013.
- Unit acquired pressure ulcers to score below the Magnet Benchmarks.
- Fall rates to score below the Magnet Benchmarks.

Exemplary Professional Practice
To sustain a culture valuing professional accountability and clinical competency.

- Empower patients/families to become true partners in care by collaborating with the RNs to develop daily goals as evidenced by written goals on the white board.
- Improve throughput through IMCU stay as evidenced by continuation of the ICU partner program.
<table>
<thead>
<tr>
<th>To strengthen interprofessional relationships on IMCU as evidenced by continued development and participation of the Critical Care Committee as evidenced by attendance records and meeting minutes.</th>
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</thead>
</table>
| **Structural Empowerment**  
To strengthen and promote shared governance as a basis for nursing accountability, decision making, and practice. |
| Increase the number of nationally certified nurses in IMCU by 1-2 RNs in FY13.  
Increase the number of BSN prepared nurses in IMCU by 1-2 RNs in FY13.  
To strengthen shared governance on IMCU as evidenced by two staff representatives on every hospital shared governance council and increased attendance at the IMCU Unit PPC Meetings. |
| **New Knowledge and Innovation**  
To create an environment of inquiry in which all nurses apply evidence based practice to improve healthcare delivery and patient outcomes. |
| Utilize patient feedback to improve nursing practices through follow phones calls based on Press Ganey comments and follow ups from Partner Program.  
Develop nursing best practices by one IMCU RN completing the Research Fellowship program and developing an IRB-approved nursing research project. |
Care Management

Transformational Leadership
To live the Relationship Based Care Model to strengthen the presence of care managers. Nurses will be known in the organization and community as leaders and experts in the practice of professional nursing.

- To increase and improve hospital staff’s knowledge of the roles of Care Management as evidenced by the attendance at educational sessions related to this topic.

- To increase the patient and family’s participation in the discharge process as evidenced by Press Ganey results.

- Increase number of MSN and ACM certified nurse within the Care Management Department by one to two this year.

- Increase membership to local and national nursing organizations by two to three this year.

- Increase staff attendance at local ACMA events and conferences as evidenced by attendance records.

Exemplary Professional Practice
Enhance nurses’ participation on interdisciplinary teams throughout the hospital and system.

- Primary Care Coordinators will collaborate during unit based daily throughput huddles as evidenced by managerial observation and unit based staff feedback.

- Initiation of Project RED on 5A and 5B as evidenced by care manager and staff participation and reduction in patient readmission rates.

- Care Management Department representative will hold membership on all Shared Governance Councils as evidenced by meeting attendance records.
Structural Empowerment
To support and elevate the professional engagement of care management staff. Empower nurses on all levels to maximize their talents and expertise and recognize these efforts.

Develop and empower nurses with continual peer review process as evidenced by completion of formal and informal peer review process.

Care management staff will continue to identify issues that delay service and discharge as evidenced by participation in hospital interdisciplinary groups and documentation of avoidable days.

New Knowledge and Innovation
Develop nursing best practices grounded in research and quality to drive and enhance the profession of nursing at the hospital and system level.

Initiation of Project RED on 5A and 5B

Emergency Department
Transformational Leadership
Deliver safe, effective, quality nursing care by providing the right patient care every time.

Nurses will advance the ultimate patient care experience through inter-professional practice reflecting Relationship Based Care and the Magnet core principles.

Increase Data accessibility at the unit level by sharing Press Ganey, Quality Benchmarks, and Quality Chart Audits. Data presented at PPC, Unit Director Staff meetings, Education boards, and Electronic communication.

To maintain and decrease LOS of Emergency Room patients to the benchmark.
**Exemplary Professional Practice**
Sustain a culture valuing professional accountability, safety, quality, and clinical competency.

Measure and enhance nursing clinical competency as evidenced by quality and safety survey data improvements and completed competency projects.

**Structural Empowerment**
Strengthen and promote shared governance as the basis for nursing accountability, decision-making, and practice. Utilize available American Nurses Association and Emergency Nurses Association resources to guide practice, accountability, competency, and workplace advocacy.

Nurses will impact our community through partnering efforts as evidenced by activities, completed projects, and attendance records.

**New Knowledge and Innovation**
Create an environment of inquiry in which all nurses apply evidence-based practices to improve healthcare delivery and patient outcomes.

Implement 3 Unit-Based Evidenced Based quality projects:
1. EBP-Research Project: Management of Chronic Pain Patients in the Emergency Department
2. EBP-Family Presence at the Bedside
3. EBP-Stroke Education

**GI/Medical Procedure Unit**

**Transformational Leadership**
To influence an environment of care that focuses on
safety, quality, and the ultimate patient and staff experience as evidenced by improved quality and patient satisfaction data.

Ensure staff attendance at the regulatory champion meetings
Initiate routine rounding for regulatory compliance
Encourage staff members to become involved in quality initiatives
Monitor Press Ganey results as they become available for our department
Daily leadership rounding along with monthly staff and PPC meetings
Engagement activities and increased autonomy to develop a more cohesive department

Exemplary Professional Practice
To develop an active unit-based professional practice council, to promote nursing accountability, nursing practice, and decision making as evidenced by meeting minutes, attendance records, and completed mission and vision for the council.
Encourage staff to become a part of the newly formed unit based PPC. Will continue to have representative on the hospital based PPC
Develop mission and vision of the PPC and determine the projects to be evaluated.

Structural Empowerment
To support and elevate the professional engagement of nursing staff as evidenced by completed peer reviews, one to two staff to complete Senior professional nurse status and more than two new professional organization memberships.
Develop the peer review into a honest and meaningful process
1. Identify and orient professional staff for
<table>
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<th>New Knowledge and Innovation</th>
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<tr>
<td>To drive a culture of innovation and process improvements, utilizing evidence based practice.</td>
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<th>IV Team</th>
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| Transformational Leadership | To be recognized as the premier employer for nurses and the patient’s first choice for care.  
| Focus our care on safety, quality, and the ultimate patient experience in how it related to the individual patient’s vascular care as evidenced by increased number of IVT consultants. |  

| Exemplary Professional Practice | To sustain a culture valuing professional accountability and clinical competency.  
| Empower patients and families to become true partners in care delivery and outcomes through the enculturation of Relationship Based Care by increasing the number of IVT RNs participating in interdisciplinary teams, councils, and throughout the hospital as evidenced by meeting minutes. |  

| Structural Empowerment | To strengthen and promote share governance as the basis for nursing accountability, decision-making, and practice. |
### One IVT RN to achieve professional certification
IVT Department to complete a minimum of 20 hours of community service.

### New Knowledge and Innovation
To create an environment of inquiry in which all nurses apply evidence based practices to improve healthcare delivery and patient outcomes.

- Complete an evidence based project based upon patient outcomes utilizing the Sapiens Technology as evidenced by completed project.
- Reduce costs associated with PICC insertion by 1-3% as evidenced by financial reports, by increasing skill of PICC insertions, thus reducing second attempts.
- Complete education and training of IV team RNs on Midline catheter Insertion as evidenced by attendance records and improved patient satisfaction related to less needle sticks (Press Ganey survey).

### Nursing Education
**Transformational Leadership**
To promote education, participation, and engagement in nursing educational endeavors that result in enhanced patient outcomes and nursing satisfaction.

**Mentoring**
- Preceptor Development
- New Hire support and Development
- Shared Governance

**Structural Empowerment**
Build a culture of professional growth and education which values and recognized advanced certification, advanced education, and lifelong learning.
My Residency Program
Partnerships with School of Nursing
Promoting National Certification
Continuing Education Offerings that are unit/specialty specific

Exemplary Professional Practice
Enhance nursing clinical competency in the professional practice environment.
  Competency Plan
  Nursing Orientation
  Unit Based Patient Care Educational Initiatives
  Advanced Concept Series
  Integrate Informatics into Bedside Nursing Practice

New Knowledge and Innovation
Develop nursing best practices grounded in education, research, and quality to drive and enhance the profession of nursing.
  Advance Formal Education
  Advance Nurse Driven Research
  Advance EBP
  Informatics Collaboration

Operating Room
Transformational Leadership
To provide safe, high quality, surgical care based on evidence.
  Adopt and maintain evidence-based standards in delivery of care by changing to a surgeon led “time out” process as evidenced by procedural records.
Exemplary Professional Practice
To create an environment to improve patient outcomes through quality initiatives.

Increase in on all SCIP initiatives scores related to surgery as evidenced by quality improvement data.

1. Antibiotics within one hour of incision
2. Appropriate antibiotics discontinued after 24 hours
3. Appropriate hair removal
4. Appropriate temperature management
5. Beta Blocker therapy prior to surgery
6. Appropriate VTE Prophylaxis

To improve customer service for surgical services as evidenced by Press Ganey scores.

1. Incorporate PFCC ideology in our daily workflow
2. Daily leadership rounding when there are delays in the surgical surgery
3. Continuous education on the “pink sheet” to increase communication to families regarding surgical times.

Structural Empowerment
To create and sustain a culture fostering individual accountability and team responsibility.

Incorporating an ongoing peer review process as evidenced by peer review completions and staff survey on peer review process.

New Knowledge and Innovation
Provide a culture of teaching, learning, and questioning for staff by encouraging staff development through education and mentoring. Provide safe care to the operative patient through evidence based research.

Compliance to AORN recommended standards as evidenced in policy and procedures.

Education of staff on all new equipment and
procedures as evidenced by attendance records. Participation of new staff (without OR experience) in UPMC system wide Peri-op 101 and the OR Residency as evidenced by attendance records. Provide a dedicated twice a month educational in-service.

**Perianesthesia**

*Transformative Leadership*
To focus the environment of care on safety, quality, and the ultimate patient experience.

- Continue to improve Press Ganey scores by utilizing the principles of PFCC in order to create the ideal patient experience as evidenced by patient satisfaction scores.
- Increase staff satisfaction as evidenced by improved NDNQI survey results 2013.
- Staff nurses participation in the ASU beautification and New Visitor respite area projects as evidenced by meeting minutes.
- Continued staff nurse involvement in quality improvement activities as evidenced by data collection records and unit-based PPC meetings.

**Exemplary Professional Practice**
To sustain a culture valuing professional accountability and clinical competency

- Increase staff ASPAN/PAPAN memberships by one to two
- Increase the number of staff who hold professional nurse certifications by one to two
- Continue to cross train staff to IV insertions/OR/and Harmar as evidenced by education records.
**Structural Empowerment**

To strengthen and promote shared governance as a basis for nursing accountability, decision-making, and practice.

- Promote the importance of our unit based Professional Practice Council, incorporate new members, and increase the autonomy of the group as evidenced by meeting attendance records and minutes.
- Elicit feedback from staff as well as the Anesthesia providers to determine any capital needs for the upcoming fiscal year as evidenced by survey results.
- Incorporate staff feedback into ongoing departmental process improvement initiatives evidenced by meeting minutes, survey results, and managerial discussions.
- Improve staffing efficiencies by creating innovative strategies to maintain budgeted worked hours as evidenced by MRS.

**New Knowledge and Innovation**

To create an environment of inquiry in which all nurses apply evidence based practices to improve healthcare delivery and patient outcomes.

- Elicit former ASU patient to PFCC working group to promote the ideal patient/visitor experience.
- Develop nursing best practice by two Perianesthesia Services nurses completing the Research Fellowship Program and developing an IRB.

**Family Health Centers**

**Transformational Leadership**

Nurses in the FHC’s will transform the practice environment.
<table>
<thead>
<tr>
<th>PS</th>
<th>To improve Press Ganey scores/HCAHPS to meet or exceed benchmark as evidenced by monthly scores.</th>
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<tr>
<td>Q</td>
<td>Focus the environment of care on safety and quality as measured by departmental quality scores.</td>
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<tr>
<td>NE</td>
<td>Increase the number of staff nurse certifications by 1-2 and participation in nursing division councils as evidenced by attendance records.</td>
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**Exemplary Professional Practice**
Enhance professional nurse accountability and clinical competency through unit based partnerships.

| I   | Empower patients and families to become true partners in care delivery and outcomes through the enculturation of relationship based care and medical home concept as evidenced by managerial observation and improved compliance with medical treatments. |
| NE  | Increase the number of educational opportunities for staff at the FHCs as evidenced by attendance records and support of a healthy lifestyle as evidenced by completed initiatives. |
| NE  | Improve patient care outcomes as measured by governmental and health care organizations. |

**Structural Empowerment**
To strengthen and promote shared governance as a basis for nursing accountability, decision making, and practice.

<p>| R   | Development of staff nurses participation in departmental PPC as evidenced by completed projects and meeting minutes. |
| C   | Nurses will impact our community through partnering with community groups and schools as evidenced by program participation and educational efforts. |</p>
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<thead>
<tr>
<th>New Knowledge and Information</th>
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<tr>
<td>To create an environment of inquiry in which all nurses apply evidence based practices to improve healthcare delivery and patient outcomes.</td>
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<tr>
<td>Implement two evidence based quality projects related to improving patient flow and/or care in the FHC.</td>
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<td>Influence the use of technology to provide outcomes for medical home treatment using supportive technology.</td>
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<thead>
<tr>
<th>Harmar</th>
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<tr>
<td>Transformational Leadership</td>
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<tr>
<td>Focus the environment of care on safety, quality, and the ultimate patient experience.</td>
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<tr>
<td>Regulatory champion will conduct monthly walkthrough of department and will report to the UD with the findings.</td>
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<tr>
<td>Staff will continue to use the AIDET model as evidenced by Press Ganey Reports.</td>
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<tr>
<td>Incorporate the PFCC ideology in daily work process as evidenced by managerial observations.</td>
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<td>Daily leadership rounding for patient/procedure/surgery delays as evidenced by on-time data.</td>
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<td>Increase SCIP initiative scores as evidenced by results.</td>
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<thead>
<tr>
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<tbody>
<tr>
<td>To strengthen and promote shared governance as a basis for nursing accountability, decision making, and practice.</td>
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<tr>
<td>Improve communication between pre/post/OR/GI Lab as evidenced by Press Ganey scores and peer review compliance.</td>
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Empower nurses to call condition stop as evidenced by monthly rates
Continue peer review process as evidenced by completed RN peer reviews
Review cases/trends as evidenced by monthly presentations
Representation on all nursing shared governance councils
Support attendance from Harmar on councils meetings as evidenced by attendance records.
Clinicians will continue ANA bulletin boards as evidenced by managerial observation.
Adhere to regulatory compliance/policies as evidenced by QA, Regulatory, and Safety data results.

New Knowledge and Innovation
To drive a culture of innovation and process improvements, nurses will implement practice changes based on research and evidence, provide culture for teaching and learning for staff education, and provide safe care to patients through evidence based research.

At least one professional nurse to submit for research fellowship program as evidenced by completed IRB approved research.
Increase the number of senior professional RNs by one to two as evidenced by completed project.
Educate on EBP as evidenced by attendance records.
Compliance with national organizations recommended standards as evidenced in policy and procedural development.