



Megan Randall (right), BSN '00, MSN '05, precepts NP student Jaclyn Cook, BSN '05, in the UNC Hospitals Emergency Department.

WORKING TOGETHER TO PROVIDE FIRST-CLASS CARING

UNC Hospitals and the School of Nursing collaborate and innovate in practice, research, and education.

Nurses from UNC Hospitals and the School of Nursing (SON) are working together in many productive ways. For years, nurses from UNC Hospitals have clinically precepted nursing students and guest-lectured in SON classrooms. SON faculty members have held practice contracts in the Hospitals and its clinics. More recently, the two institutions have been forging new and innovative collaborations.

The partnership starts at the top with the leadership for each organization. Dr. Mary Tonges, senior vice president and chief nursing officer of UNC Hospitals and Kristen M. Swanson, SON dean and Distinguished Alumni Professor, build bridges that support nursing research, education, and practice at UNC and nationally. Each also holds a title in the reciprocal organization, with Dr. Tonges serving as the associate dean for UNC Health Care and the School of Nursing and Dean Swanson in the role of associate chief nursing officer for Academic Affairs at UNC Hospitals.

“One thing that is quite magnificent about our working relationship is that while I have generated a theory about what constitutes excellence in nursing, Dr. Tonges has turned that theory into an innovative strategy known as ‘Carolina Care,’” says Dean Swanson. “The theory supports Dr. Tonges and her leadership team’s vision for practice, which empowers nursing throughout the hospital. Patients ultimately realize better care and outcomes as a consequence of Carolina Care.”

Dean Swanson’s Caring Theory is made up of five interrelated caring processes:

1. Maintaining belief — sustaining faith in the capacity of the other to come through a transition and face a future with meaning

2. Knowing — striving to understand events as they have meaning in the life of the other
3. Being with — being emotionally present
4. Doing for — doing for the other as they would do for themselves if possible
5. Enabling — facilitating the capacity of patients and families to care for themselves

“I think Dean Swanson’s theory is probably the most practical theory I’ve seen that has to do with caring,” says Dr. Tonges. “It informs you about what you can do as a nurse that would be demonstrative of caring and the specific components that comprise caring.”

Elements of the theory are implemented through Carolina Care in every unit of UNC Hospitals. Carolina Care embodies practices such as a “moment of caring,” during which each

“I think Dean Swanson’s theory is probably the most practical theory I’ve seen that has to do with caring,” says Dr. Tonges.

nurse sits down and talks with each of his or her patients once every shift. These encounters give patients and their family members a chance to express what’s on their minds, ask about their care, and receive assurance that their hospital experiences matter. “That relates in my view to ‘knowing’ and ‘being with.’ You’re trying to know the patient and you’re emotionally present in the moment,” Dr. Tonges says. In addition, nurses and nurse assistants alternate in doing hourly rounds, during which they check to see if the patient needs anything. This

Dr. Mary Tonges and Dean Kristen Swanson build connections between UNC Hospitals and the School of Nursing in support of nursing practice, research, and education.



way of organizing nurses' time and work allows them to be physically and emotionally present, carrying out the "being with" and "doing for" parts of the Caring Theory. "Doing for" is also implemented with "No Passing Zone" signs that advertise each nursing staff member's commitment to promptly answer a patient's call light even if they are not assigned to care for that patient.

Another component of Carolina Care is "words and ways that work," which gives nurses key points to cover in certain situations such as meeting the patient for the first time. This communication "enables" the patients to be active in their care. Also, blameless apology is used to respond to patient complaints even if the nurse was not involved in what happened. "You listen carefully to the patient's description of events, say you're sorry that it happened, ask what you need to do to fix it, and tell them what you did," Dr. Tonges explains. "Nurses often get complaints about other parts of the hospital because they are at the bedside where everything comes together and affects the patient, and there can be a human temptation to say 'I didn't do that.'" Blameless apology involves the nurse being present and available, listening to the patient, and taking action that resolves the concern. This blameless response gets to the heart



of the matter and enables the patient to feel more control over the environment by taking actions to address the concern.

Magnet Designation Achieved

This past fall UNC Hospitals achieved Magnet Designation for Excellence in nursing services from the American Nurses Credentialing Center's Magnet Recognition Program. Only 378 facilities in the world and 6 percent of all U.S. hospitals have earned the prestigious Magnet designation. While the actual journey of documenting and demonstrating that UNC Hospitals meets or exceeds the 88

magnet standards took about 18 months, the achievement was possible only because of years of prior work and planning, says Dr. Tonges.

Dr. Gwen Sherwood, SON associate dean for academic affairs, works closely with UNC Hospitals in the clinical placement of students. She was part of a group of faculty who met with the Magnet appraisers to discuss ways in which SON and UNC Hospitals work together. "In our conversations we became more aware of the many points of interaction of our faculty and students with UNC Hospitals. This, in turn, inspired other ideas, so we came away quite refreshed from our conversation," she says.

The journey to Magnet recognition forged new relationships between the School of Nursing and UNC Hospitals. For example, Dr. Rumay Alexander, clinical professor and director of the SON office of multicultural affairs provided consultation as special assistant on multicultural affairs to Dr. Tonges. She gave guidance to the hospital in its development and preparation of the cultural competency aspects of the Magnet application. Since all health care encounters are cultural encounters the Magnet Program seeks and insists upon institutional evidence of walking the talk, Dr. Alexander says. She assisted in the unique formation of the diversity council as one of five nursing councils making up the Hospitals Nursing Division shared governance system. "Diversity can be an abstract notion, and she was very helpful in working with us to define what this council could do," Dr. Tonges says.

Dr. Alexander coached a cadre of diverse health care providers in how to be institutionally and individually introspective about what happens at the micro-level in regards to being culturally appropriate and relevant. She focused on achieving understanding by using her model, courageous dialogue, in addition to leading and teaching provocative participatory exercises to diversity council members. She also examined how work is structured in terms of policies, criteria, procedures, and stereotypes that may contribute to disparities in institutional outcomes for patients or agents of the institutions such as nurses, physicians, environmental services employees, chaplains, and social workers. "Ultimately, the representatives on the diversity council were to replicate the exercises with co-workers in their work areas or units, thereby infusing the concepts into the DNA of the hospital," she adds. Dr. Alexander was named the 2010 Faculty of the Year by the UNC Hospitals Nursing Division in recognition of her work. She also received the 2010 American Organization of Nurse Executives Prism Award, which recognizes leaders in the diversity space at the national level.

Advancing Nursing Research

The Magnet Recognition Program also encourages staff nurses to participate in research at all levels, whether they are leading research teams or serving as research team members. "The Magnet initiative has highlighted the need to engage practicing nurses in research," says Associate Professor Dr. Cheryl Jones, who is also the Research Consultant for UNC Hospitals. She says that nurses have an amazing commitment to and curiosity about what they do on a daily basis. It is important to capitalize on these attributes by inspiring and encouraging them to examine the art and science of practice at the point-of-care. "A nursing research idea that evolves from practice might take shape by simply asking 'why do we always do this procedure in this way?' Or it can evolve from a nurse or group of nurses

PARTNERS IN EDUCATION

School of Nursing undergraduate and graduate students spent over 59,000 hours in clinical practica at UNC Hospitals and UNC Health Care facilities over the last academic year. Through these experiences they are mentored in professional caring models, cutting-edge evidence-based practices, culturally-appropriate care, and clinically-relevant nursing research.

During Micah McCanna's final semester as an ABSN student, he spent time in the UNC Hospitals cardiovascular intensive care unit (CICU) and also held a per diem position as a certified nursing assistant in the cardiothoracic intensive care unit (CTICU). He says that these clinical experiences allowed him to tie what he learned in the classroom to real life situations and led him to identify critical care as the area in which he wanted to work. "The clinical aspect of our program is important because no matter how great a teacher in the classroom setting may be, nothing is as valuable as hands-on experience, and I am thankful UNC Hospitals provided me with this."

At UNC Hospitals he became curious about mechanical ventilators and extubation. He pursued this topic in his honors project by performing a literature review and comparative analysis of extubation times in the UNC Hospitals CTICU as related to recovery time and severity of surgeries. "I want to be the best nurse I can possibly be and this project has brought me that much closer." McCanna graduated in May and is excited to be providing post-operative care for patients in the CICU at Pitt County Memorial Hospital in Greenville, NC. ■



Micah McCanna, right, and his preceptor Paul Couch, BSN '08, care for a patient in the cardiac intensive care unit at UNC Hospitals.



Dr. Cheryl Jones is the research consultant for UNC Hospitals, and one of her roles is to mentor teams of nurses who have research ideas.

who identify a recurring problem in caring for a particular group of patients.”

In her consulting role, Dr. Jones has worked with colleagues at the UNC Hospitals and its Nursing Research Council to develop an inquiry agenda and to mentor teams of nurses who have research ideas. In addition, she serves as a liaison between the Hospitals and the School, which involves linking staff nurses in the hospital who are doing research projects in a particular area with School of Nursing colleagues and experts in that same area. In recognition of Dr. Jones’ work, the UNC Hospitals Nursing Division chose her as Faculty of the Year for 2011.

“The nurses at UNC Hospitals are asking important questions that have the potential to help us not only determine ways to change nursing practice and save money in health care organizations but, more importantly, to improve the lives of patients and their families,” Dr. Jones says. “Answering these questions can also improve patient safety as well as the nursing work environment, nurses’ engagement in care delivery, and the health care system at large.”

The School and UNC Hospitals will be working together on research projects centered on patient care. They have received a gift from BD Technologies in Research Triangle Park, N.C., to establish one-year fellowships for staff nurses interested in conducting research. “We are developing an educational program that will guide practicing nurses through the steps of the research process as they carry out a project,” says Dr. Jones. The process is very similar to what School of Nursing faculty members do now as they mentor undergraduate and graduate students in carrying out studies.

For SON faculty, being involved in collaborative projects with UNC Hospitals will help them think about their own research in new ways. “In the School of Nursing we generate a lot of research and disseminate it through publications and presentations, but the next piece is translating it into practice. I see this collaboration as being an enormous opportunity to translate work being carried out by SON faculty into practice,” says Dr. Jones. In addition, as practicing nurses get interested in research they may be more interested in advancing their education. “We have an incredible opportunity to create synergy between academia and practice. As we mentor UNC

“The nurses at UNC Hospitals are asking important questions that have the potential to help us not only determine ways to change nursing practice and save money in health care organizations but, more importantly, to improve the lives of patients and their families,” Dr. Jones says.

Hospitals nurses through projects, they develop relationships with faculty and start to ask questions about what they’re doing and how they might build on the skills they’re learning,” says Dr. Jones. While this synergy benefits the SON and UNC Hospitals, it holds potential to extend beyond Chapel Hill by developing and testing innovative practices that lead to better patient care. ■