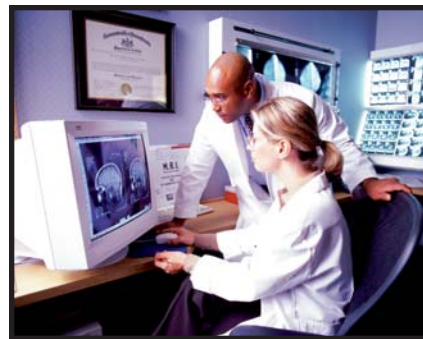




Workforce Strategies Guidebook

A Compilation of New York State Hospitals' Activities Focused on Recruitment, Retention, Staff Engagement, and Culture Change



May 2006



Healthcare Association
of New York State





Introduction

The shortage of staff in hospitals, nursing homes, and home care agencies continues to be one of the most critical issues facing health care providers across New York State as well as the entire nation. The shortage is no longer just about direct caregivers—registered nurses, licensed practical nurses, and aides—but includes a diverse array of positions, such as pharmacists, technicians, housekeeping, and medical records coders. Although there have been frequent, cyclical staff shortages, the current shortage is very different and is expected to worsen over time.

An inadequate supply of health professional faculty exacerbates the situation because without enough faculty, health profession programs are unable to enroll as many students as are seeking admission. According to preliminary data released by the American Association of Colleges of Nursing, enrollment in entry-level baccalaureate nursing programs increased 13% in 2005, but nursing colleges and universities had to turn away 32,617 qualified applicants due to capacity constraints.

Despite these challenges, hospitals in New York State continue to identify new and unique ways to recruit and retain staff. In addition, many members are instituting complete facility- or system-wide culture changes to better engage employees and to make their organizations more desirable places to work. This Guidebook highlights a sampling of members' efforts in the areas of recruitment, retention, staff engagement, and culture change.

The Healthcare Association of New York State (HANYS) and the New York Organization of Nurse Executives (NYONE) are distributing this Guidebook as part of National Hospital Week (May 7-13, 2006) in recognition of New York State hospitals.

This year, the theme of National Hospital Week is "Where Miracles Happen Every Day!" This theme does not just refer to hospitals but also the wonderful things hospital employees do every day. Hospital staff make miracles happen, which is why this Guidebook emphasizes what New York State hospitals are doing to focus on their greatest asset—their staff.

For more information on this Guidebook, please contact Cindy Levernois, Director, Behavioral Health and Workforce, HANYS, at (518) 431-7744 or at cleverno@hanys.org, or Rosanne Raso, R.N., Senior Vice President, Nursing Services, Lutheran Medical Center, and member, NYONE, at (718) 630-8347 or at rraso@lmcmc.com.





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Albany Medical Center, Albany

Quarterly Success Stories Luncheons

Description of Program/Initiative

Albany Medical Center (AMC) managers and co-workers submit entries describing the contribution of either an individual or a small team in achieving a successful outcome or reaching a significant objective. Fifteen entries are selected quarterly and the stories are read at a luncheon by the manager of the individual(s) and are later posted on the AMC intranet site. Honored individuals invite guests to the luncheon.

Significant Results

This program, hosted by AMC's chief nursing officer, started as a nursing retention strategy and now encompasses the entire organization. AMC has found that there are many successes to share and celebrate. AMC never has to struggle to find nominees for this recognition. The luncheon celebrations are eagerly anticipated and well attended by staff.

Lessons Learned

Sharing and celebrating successes is important in any organization and it is especially so in a large, complex organization where there are many staff members making significant contributions on an ongoing basis.

Date Implemented:
1995

Partners:
Internal:
All staff

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Albany Memorial Hospital, Albany

Staff Opinion Survey

Description of Program/Initiative

To assess how employees feel about their work environment, direct manager, work assignment, and the organization as a whole, Northeast Health, the parent organization of Albany Memorial Hospital, contracted with a third-party vendor to survey staff on a periodic basis. Three surveys were completed over a five-year period, with a fourth survey scheduled for 2007. Use of a third-party vendor assures staff that the information is confidential. Results are reported for the organization, the affiliate, the department, and the manager. Each manager is required to meet with his or her staff to discuss survey results and to develop an action plan to improve working conditions based on employee input. Action plans are updated every four months to ensure that action items are acted on.

Significant Results

- ◆ In response to survey results, increased training and self-development courses are offered, such as a series of “brown bag lunches” offered by State Employees Federal Credit Union trainers on various aspects of finance.
- ◆ The organization created a management skills training program of core courses to improve the skills of new managers.
- ◆ The organization now offers additional health benefits such as dental coverage for staff.
- ◆ Survey scores have improved with each survey.
- ◆ Changes instituted because of these surveys helped Northeast Health reduce overall staff turnover rate by 17.7% between 2002 and 2005.

Lessons Learned

- ◆ For this type of initiative to be successful, there must be management buy-in starting at the top of the organization.
- ◆ Management must be prepared to deal with comments and responses they may not like.
- ◆ Management must be prepared to respond in a visible manner to survey results by reporting results back to employees and making changes based on feedback.
- ◆ Employees will provide honest feedback if they feel sure that their responses are confidential.

Date Implemented:
September 2001

Partners:
External:
Corporate Systems
(the survey vendor)

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Amsterdam Memorial Hospital, Amsterdam

Recruitment and Retention Committee

Description of Program/Initiative

Amsterdam Memorial Hospital created the Recruitment and Retention Committee to develop sustainable programs to recruit and retain qualified employees and enhance the work experience to reach optimum job performance.

The Rewards Subcommittee presented “Shining Star” awards to more than ten employees who went “above and beyond” in actions that exemplified the facility mission. This committee also selected “Employee of the Quarter,” which recognized consistent performance excellence.

The Activities Subcommittee organized facility-wide events with employees and family members—Great Escape Day and a bus trip to the Radio City Music Hall Christmas Show. This committee also planned quarterly rewards for all employees—small treats of appreciation that were distributed by department managers.

Significant Results

This program reduced overall turnover in third and fourth quarters 2005 by 22%.

Lessons Learned

- ◆ Recognition and appreciation must be part of the organizational culture.
- ◆ Leadership skills must include recognition of staff’s continuing contribution to the organization.
- ◆ Provide multiple methods to respond to surveys.
- ◆ Always communicate all recognition events and have maximum participation from leadership.
- ◆ Total support of all levels of leadership is required for facility-wide programs to be successful.
- ◆ Define your mission and have specific goals with timeframes.

Date Implemented:

January 2005

Partners:

Internal:

This initiative involved interdisciplinary participation in the Recruitment and Retention Committee and subcommittees among management, clinical, professional, and hourly (union and non-union) staff.

External:

The Recruitment and Retention Committee negotiated with vendors for group or special rates for trips and buying bulk appreciation items.

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Aurelia Osborn Fox Memorial Hospital, Oneonta

Human Resource Policy for Benefit Time Donation

Description of Program/Initiative

The Benefit Time Donation policy/program assists employees in maintaining their income during difficult times. Co-workers may donate accumulated personal, vacation, or holiday time to other employees where the employee or his/her family has a serious illness or other significant life problem that requires the employee to be away from work on an approved leave for an extended period. This enables the affected employee to be away from work if he or she does not have enough accrued benefit time to cover the absence with pay or would use all accrued time to cover the absence.

Significant Results

This program has improved the “esprit de corps.” Through the years, the hospital has referred to itself as the “Fox Family,” which has become conceptually and intellectually more difficult as the organization has grown to approximately 1,000 employees. However, the employees have demonstrated their caring for co-workers and their families by donating considerable accumulated time to others, often to people in other departments. It also enables employees who might not otherwise have the financial resources to do so, to help a colleague.

One of the unanticipated outgrowths of the program occurred when two employees passed away (one several years ago and one recently). Employees were permitted to donate time that was converted to cash value and a check was given to the deceased employee’s family to help with expenses. In both cases, the cash value of the donated time was well in excess of \$10,000.

Lessons Learned

Be sure to check with tax consultants. The Internal Revenue Service wants its share regardless of how benevolent the program!

Date Implemented:

May 7, 1997

Partners:

Internal:

All employees who accumulate paid time off may participate.

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Bassett Healthcare, Cooperstown

Learning Organization Transformation

Description of Program/Initiative

Every organization is a product of how its members think and act. Bassett Healthcare has leveraged culture to achieve things the organization never thought possible. A critical piece of Bassett's journey has been to recognize the interdependencies of individuals, teams, and systems. Bassett selected the framework of a "Learning Organization" to help engage physicians and the workforce, resulting in statistically significant improvement in patient and employee satisfaction.

Using the principles of a Learning Organization, Bassett has developed programs and taken steps to help its employees feel they are doing something that matters to themselves personally and to Bassett. These steps include:

- ◆ Bassett exposed its leaders to the language and disciplines of a Learning Organization—the knowledge, skills, and behaviors that are required of leaders and of all Bassett employees to ensure success.
- ◆ Bassett initiated "Learning Up," which shows each employee how to "learn up" to Bassett's reputation and exposes them to the language of a Learning Organization.
- ◆ Bassett created functional workgroups to improve decision making. Bassett recognizes that people are more intelligent together than they are apart and groups are more creative than single individuals.
- ◆ Bassett has worked to foster mutual respect and trust among all levels of the organization through "conversation groups."

Significant Results

- ◆ Bassett achieved a statistically significant improvement in patient satisfaction.
- ◆ Bassett saw the highest employee satisfaction scores in four years.
- ◆ Employee and physician retention rates were improved.

continued . . .

*Date Implemented:
Summer 2002*

Partners:

Internal:

Bassett's chief executive officer, chief operating officer, senior management, and clinical chiefs are partners in this program.

External:

An executive coach

Contact

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Bassett Healthcare, Cooperstown

Learning Organization Transformation (continued)

Lessons Learned

- ◆ Relationship-based leadership takes time to develop and requires commitment from the highest levels of the organization.
- ◆ Including physicians in decision making increases the ability to learn.
- ◆ Answers to all of Bassett's challenges and problems exist within the organization.
- ◆ Investment of time is greater than originally thought.

Bassett Hospital of Schoharie County, Cobleskill

SHARP Certification

Description of Program/Initiative

The U.S. Department of Occupational Safety and Health Administration's (OSHA) Safety and Health Achievement Recognition Program (SHARP) recognizes small employers who operate exemplary safety and health management systems. Acceptance in SHARP by OSHA is an achievement that singles an organization out among its business peers as a model for work site safety and health.

Significant Results

- ◆ Bassett Hospital of Schoharie County completed a full service safety and health consultation survey of the workplace including a wall-to-wall hazard survey and a complete safety and health program review.
- ◆ Bassett involved employees in the development, operation, and improvement of the workplace safety and health program.
- ◆ Bassett worked with the consultation program for over a year.
- ◆ Bassett staff participated in numerous educational programs.

Lessons Learned

Staff involvement has enhanced communication at Bassett in addition to fostering teamwork and providing a safe work environment.

Bassett implemented a tracking system to monitor program results, including:

- ◆ Reduce employee back injury incidents by 10%.
- ◆ Use 2004 injury/accident rate as baseline to monitor.
- ◆ Remain 100% compliant in annual safety and health audits conducted by OSHA consultants. All findings that were out of compliance in 2005 are now in compliance.
- ◆ Reduce the number of lost work days due to employee injuries by 5%.
- ◆ Implement an "early return to work program."
- ◆ Investigate 100% of all reported employee injuries.
- ◆ Implement an accident investigation team.

Date Implemented:
August 29, 2005

Partners:
Internal:
All staff
External:

*OSHA consultants through
the New York State
Department of Labor*

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Benedictine Hospital, Kingston

Transformational Team Building

Description of Program/Initiative

Through Benedictine's participation in HANYS' workforce grant and utilizing the Workforce Engage™ Survey, one of Benedictine's goals was to create a teamwork model that would be meaningful to the bedside nurse and to improve communication skills globally.

Benedictine's teamwork model equates critical thinking and teamwork with quality outcomes. The Transformational Teamwork Model, based on the work of Dr. Gail Wolf of the University of Pittsburgh Medical Center, is a core element of Benedictine's model.

In fall 2005, Benedictine surveyed the nursing units to see where they assessed themselves in terms of the levels of teams possible. Next, Benedictine embarked on a series of team-building retreats that are ongoing. The retreats begin with units writing their own vision based on the three pillars of professionalism: values (ideal of service), specialized expertise, and accountability in practice. To date, three units have completed this vision statement. Several other units are in the process of completion. Next, Benedictine builds understanding of the individual elements of the team by having participants recognize and respect unique aspects of self and others. The remainder of the retreat focuses on communication skills. Role-playing is used to illustrate the incorrect and then the correct communication required for scenarios supplied by staff. The retreats conclude with staff deciding on a "New Rule" for relationships.

Significant Results

- ◆ Units delight in the creation of their own vision. It inspires much thought and discussion about who they are and how they are perceived by one another, by other disciplines, and by the public.
- ◆ The "New Rules" become the basis for ongoing communication as well as an element for the document on professional expectations in the workplace.
- ◆ Staff are proud of authoring these standards of professional interaction. They plan to create a handout on expected behaviors for all new hires.

Lessons Learned

It takes longer than one would expect to get busy staff into these initiatives. Keeping the inspiration going in the busy day-to-day schedules of nursing units is the real work!

Date Implemented:
Fall 2005

Partners:
Internal:
*Nursing units
and ancillary departments*
External:
*Dr. Gail Wolf of the
University of Pittsburgh
Medical Center*

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Cayuga Medical Center at Ithaca, Ithaca

Recruitment and Retention Council

Description of Program/Initiative

The purpose of the Recruitment and Retention Council is to enhance the recruitment and retention of nurses and clinical staff. This is accomplished by creating a nursing environment that fosters and supports pride in Cayuga Medical Center at Ithaca's nursing division while strengthening positive relationships with employees.

Monthly meetings chaired by the Medical Center's nursing employment specialist are open to all Cayuga Medical Center at Ithaca employees. Topics discussed are open to any aspect of employment and are focused on helping the organization create an environment that attracts and maintains staff.

Significant Results

Cayuga Medical Center at Ithaca has seen increased morale in the nursing division, increased cross-divisional interaction, and a reduction in turnover.

Lessons Learned

It is critical to provide staff the opportunity to develop and implement programs and processes that are designed to have a positive impact on new and long-term employees.

Date Implemented:

June 2005

Partners:

Internal:
All divisions

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Clifton Springs Hospital and Clinic, Clifton Springs

The “Love ‘Em or Lose ‘Em” Leadership Development Program

Description of Program/Initiative

The “Love ‘Em or Lose ‘Em” Leadership Development Program was designed to develop and teach training and leadership practices that managers can use to help retain excellent employees. To do this, the program stresses the need for recognizing the critical link between retention and leadership, the importance of supporting an increase in commitment to leadership development, and tracking employee and patient satisfaction.

Significant Results

The turnover rate at Clifton Springs Hospital and Clinic went from 17% in 2003 to 13.2% in 2004 and to just 9% as of December 31, 2005. There has been a significant increase in Clifton Springs Hospital and Clinic’s percentile ranking among peer hospitals in patient satisfaction since the program was implemented. The hospital’s inpatient percentile ranking rose from 62% to 92% and its emergency department ranking rose from 69% to 99% between November 2004 and November 2005.

Lessons Learned

This year-long program allowed Clifton Springs Hospital and Clinic managers to take information from current retention literature and combine it with their everyday leadership practices to develop an individualized program specific to their departments. The program has three categories: Spreading Enthusiasm, Inspiring Confidence, and Demonstrating Integrity. Within these categories, managers learned steps they can take to be more effective leaders. By stressing simple actions such as connecting with employees on a regular basis, encouraging new efforts, taking responsibility for problems, and demonstrating an upright character, managers finished the program armed with proven techniques to help them succeed in their leadership role, and help their employees succeed in their job.

Date Implemented:

January 2005

Partners:

Internal:

Hospital administration, hospital managers, the education department, the performance improvement department, and the human resources department

External:

Jo Manion, Consultant; the Clifton Springs Hospital and Clinic Board of Directors; The Leadership Pickles educational videos by Bob Farrell; and the book, Love ‘Em or Lose ‘Em, by Beverly L. Kaye and Sharon Jordan-Evans

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Elmhurst Hospital Center, Elmhurst

Baby Friendly Initiative

Description of Program/Initiative

Baby Friendly is a World Health Organization and United Nations Children's Fund initiative to promote breastfeeding as the near perfect form of infant nutrition. Elmhurst Hospital Center patients are primarily low-income, multi-cultural, new immigrants who, in emulating their perceptions of the American way, prefer to bottle-feed their babies. This program offers an opportunity for the nursing staff to positively contribute to the short- and long-term health of mother and baby.

Since the program's inception, over 300 staff have completed an 18-hour core curriculum. Policies were changed to eliminate the routine administration of an initial bottle-feed and formula was relocated to a less accessible area where it would not provide visual reinforcement as the first approach to feeding. A breastfeeding diary (translated into multiple languages) was developed to involve families in newborn care and to enhance knowledge and confidence that the baby was getting sufficient milk.

Significant Results

- ◆ The percent of babies breast fed at discharge increased from 15% to 70%.
- ◆ Eighty percent of the obstetric and pediatric staff, including registered nurses, licensed practical nurses, personal care assistants, and clerks have completed the 18-hour core curriculum.
- ◆ The program was highlighted as one of the best practice examples by the American Nurses Credentialing Center, resulting in Elmhurst Hospital Center being the first municipal hospital to be awarded Magnet designation.
- ◆ There has been enhanced pride and empowerment of perinatal staff at Elmhurst.
- ◆ Elmhurst's breastfeeding policy and adapted core curriculum has been accepted as the model for all New York City Health and Hospitals Corporation (HHC) facilities.
- ◆ Elmhurst has linked with the Department of Health (DOH) to promote and support breastfeeding in the community.

continued . . .

Date Implemented:
Ongoing phase-in since May 2003

Partners:

Internal:

Senior leadership; directors of pediatric and obstetrics; leaders of the women and children's division; and unit-based nursing staff of the labor and delivery unit, neonatal intensive care, mother-baby unit and pediatrics division

External:

DOH and HHC

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Elmhurst Hospital Center, Elmhurst

Baby Friendly Initiative (continued)

Lessons Learned

- ◆ Cultural variation and beliefs may impede early breastfeeding.
- ◆ Support is needed for success, especially in the critical first two weeks.
- ◆ While exclusive breastfeeding is the ultimate goal, breastfeeding of any duration is a success.
- ◆ Changes are needed in human resource policies to allow employees returning to work to continue breastfeeding their infants.
- ◆ The media need to promote breastfeeding.
- ◆ There is a need for access/resources in the community.
- ◆ Knowing the superiority of breast milk, it is medically unethical not to promote it as the best form of infant nutrition.
- ◆ To be baby friendly, facilities must be mother/family friendly.

Faxton-St. Luke's Healthcare, Utica

Catch a Shining Star Program

Description of Program/Initiative

The Catch a Shining Star Program recognizes stellar performance of employees who go "above and beyond." The program is a revised and expanded version of what Faxton-St. Luke's Healthcare once called "CARE" rewards. Although the program was previously in place for managers to reward employees, it was not used as much as it could be. By reorganizing and renaming the reward, it became much more visible and highly utilized.

This program has three types of recognition: manager-to-employee, patient-to-employee, and employee-to-employee.

Shining stars are distributed to all inpatient and outpatient locations, encouraging patients to "catch a shining star" while receiving services. The manager-to-employee and patient-to-employee recognition is redeemed for \$5 in Faxton-St. Luke's Healthcare human resources department.

Employee-to-employee recognition is achieved using a sticker that the recipient wears and the recognized employee's name is put into a monthly drawing for a \$25 gift certificate.

Significant Results

When the "renewed" program was launched, there was a 131% increase in utilization. Press Ganey Scores improved and turnover at year-end decreased 5%.

Lessons Learned

One of the most powerful ways to enhance employee performance is through reward and recognition. By rewarding special behavior, it tends to be repeated.

Employees who feel good about themselves and their managers will perform at a higher level. Most people leave their manager, not the company, and if they feel appreciated by their manager, they are much less likely to look for employment elsewhere. More recognition results in better relationships and the organization becomes more successful in reaching its goals.

Date Implemented:

Manager-to-employee recognition began in 2000. The renewed program began in 2005. Patient-to-employee recognition began in fall 2005. Employee-to-employee recognition was implemented in February 2006.

Partners:

*Internal:
Reward and Recognition Committee, Tomorrow's Work Force Steering Committee, and all engaged leaders*

Contact:

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Finger Lakes Health, Geneva

Relationship-Based Care

Description of Program/Initiative

Finger Lakes Health has incorporated into its operations the Relationship-Based Care model concepts developed by Creative Health Care Management. Relationship-Based Care is a philosophical foundation and operational framework in which care is centered on the needs and priorities of patients, residents, and families.

Relationship-Based Care acknowledges the interdisciplinary nature of care delivery while emphasizing the pivotal role of the registered nurse in establishing a therapeutic relationship with the patient. The model fosters staff engagement and involvement in decisions that affect patient care delivery through the development of unit practice councils.

Staff unit practice councils for each patient care unit/department serve as the vehicle for shared governance. Each council member formulates an elaborate communication network with peers to ensure the dissemination of information and collection of feedback. The councils conduct meaningful dialogue about practice, patient care, work allocation, and communication. The outcome is transformational change in care delivery that supports quality, patient safety, staff satisfaction, and retention.

Significant Results

Finger Lakes Health has achieved a 25% reduction in turnover and vacancy rates. The organization has noted improvement in employee opinion survey scores in all dimensions.

Lessons Learned

- ◆ It is essential that management develop skill sets required to effectively lead and manage an empowered workforce.
- ◆ Visible endorsement by executive leadership is critical for success and sustaining the momentum for transformation.
- ◆ Managing the transformation with mission and purpose requires reinforcement throughout the organization.

continued...

Date Implemented:

The model was phased in over a three-year period beginning in 2003.

Partners:

Internal:

Executive leadership, joint nursing leadership, education department, human resources, and staff

External:

Creative Health Care Management

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Finger Lakes Health, Geneva

Relationship-Based Care (continued)

- ◆ Rolling out the initiative for each area in phases helped to manage the implementation; however, Finger Lakes was challenged to keep every unit engaged and enthusiastic while waiting for their implementation.
- ◆ Use of a “World Café” approach to stimulate dialogue between the units/departments fostered the creation of a shared vision and provided opportunity to share successes.
- ◆ Staff education to develop skills in leadership, communication, conflict management, consensus, and change management must be focused and ongoing.

Glens Falls Hospital, Glens Falls

Glens Falls Hospital Recognition Programs

Description of Program/Initiative

Recognizing and celebrating the contributions of employees is an important part of what makes Glens Falls Hospital a great place to work. Over the years, the hospital has created a variety of programs to provide opportunities to recognize and reward staff and managers:

- ◆ **Annual Recognition Program**—A special night is set aside to honor employees for their years of service. Retirees are also honored.
- ◆ **Service Awards**—When an employee marks a milestone of five, ten, 15 or more years of service, he or she selects a gift from a wide range of selections.
- ◆ **Longevity Prizes**—This program is specifically designed to celebrate and recognize those employees who have been at Glens Falls Hospital for 20 years or more.
- ◆ **Appreciation Telegram**—The Telegrams are a quick and thoughtful way to let someone know you truly appreciate their words or actions.
- ◆ **Award of Excellence**—The Award of Excellence Program provides an opportunity to recognize individuals, teams, or departments for outstanding achievement, performance, or service delivery. To be eligible for the Award of Excellence, the nominee must exemplify the fundamental values of Glens Falls Hospital—respect, responsiveness, and responsibility.
- ◆ **Blue Ribbon Award Program**—This program enables the community to recognize staff/volunteers who have provided outstanding service.
- ◆ **Celebrations Tool Kit**—The Celebration Tool Kit is available to help employees and volunteers acknowledge one another for positive service moments.
- ◆ **Department Celebrations**—A week is set aside to recognize and thank a department for the work it performs.
- ◆ **People Leadership Award**—This award provides an opportunity for managers to be recognized as outstanding leaders. The five key values of the People Leadership Award are recognition, communication, visibility, trust, and proactivity.
- ◆ **Recognition Fund**—Established to recognize an employee or group of employees that go “above and beyond” in responding to the needs of customers and colleagues.

Date Implemented:
Varies by program

Partners:

Internal:

*Human resources staff,
department leaders, staff,
and senior management*

Contact:

Ed Capezzuti

Director, Human Resources

Operations

ecapezzuti@glensfallshosp.org

(518) 926-1809

continued...



Glens Falls Hospital, Glens Falls

Glens Falls Hospital Recognition Programs (continued)

Significant Results

Annual employee voluntary turnover has continued to decline over the last five years and is below the industry average. Employee satisfaction scores for recognition are higher than the industry average.

Lessons Learned

- ◆ Recognition needs to be varied, timely, and unique.
- ◆ You cannot reward staff enough—and you can reward staff with money.
- ◆ The most effective recognition is a simple “thank you.”

Good Samaritan Hospital Medical Center, West Islip

Cultural Diversity Competency Training

Description of Program/Initiative

After a year of Medical Center-wide diversity training using a less than diverse committee, a video—selected to introduce the topic of cultural diversity—generated negative feedback, with staff commenting that although the words spoke against stereotyping, the overall message was not clear. As a follow-up, Good Samaritan Hospital Medical Center invited those who objected to be part of an expanded committee to plan further training programs.

This committee researched a variety of tools available and selected the most appropriate. The committee laid the foundation of what has become the Diversity Council. Each department selected representatives who would be trained and in turn facilitate training in their own departments. They received training, a testing tool, and a teaching curriculum.

This initiative has been an overwhelming success in spreading the message on diversity. In addition, it has given many employees a chance to share and shine as they have learned and grown by this experience.

Significant Results

- ◆ **Engagement:** Energy and interest have been generated throughout the organization on cultural diversity, sparked by line staff and middle managers and unleashed through their participation in the Diversity Council.
- ◆ **Retention:** Committee members are now champions of diversity. They feel a sense of pride and ownership from having developed the process and are excited about its rollout.
- ◆ **Recruitment:** Having staff better understand cultural diversity makes it much easier to recruit staff from a variety of backgrounds. Once here, these more culturally representative staff members are more comfortable with each other and patients.

Lessons Learned

- ◆ Be sure the diversity training planning committee is diverse and includes all levels of staff as trainers.
- ◆ Select teaching materials appropriate for the organizational culture.

Date Implemented:

*Phase I: spring 2005;
Phase II: summer 2005; and
Phase III: first quarter 2006
The clinical members of the
Diversity Council will develop
further training with department
leadership using video tools on
cultural competencies during
2006 and 2007*

Partners:

*Internal:
All departments
External:
CRM Learning video, Patient
Diversity: Beyond the Vital Signs;
and diversity training provided
by New Haven Consulting*

Contact:

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Highland Hospital of Rochester, Rochester

Brilliant Brainstorms

Description of Program/Initiative

Brilliant Brainstorms is designed to support Highland Hospital employees' ideas for improving the hospital's culture of service and excellence and to meet specific goals and objectives. Brilliant Brainstorms enables employees to submit ideas for process improvement through a Web-based Intranet system. Each idea must support one of Highland Hospital of Rochester's six pillars of service and operational excellence in its management plan: people, service, quality, finance, growth, and system.

Ideas are reviewed for implementation and employees are eligible for three levels of awards:

- ◆ implementation of an idea;
- ◆ quarterly award for each pillar; and
- ◆ a yearly award.

Significant Results

Nine months into the program, more than 600 ideas have been submitted and reviewed. Sixty-five ideas have been fully implemented, with more than 225 in different stages of the program. The estimated annual cost savings from implemented ideas is \$30,000. Positive responses to key indicator questions on the Employee Satisfaction Survey have increased.

Lessons Learned

- ◆ It is important to empower employees to participate in implementing an idea from start to finish.
- ◆ Employees are a wealth of information.
- ◆ This program gives employees the opportunity to participate in improving the hospital, and many have chosen to do so.

Date Implemented:

April 1, 2005

Partners:

Internal:

Unit coordinators, core team, administration, and the information services division

Contact:

Donald S. DiVita

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and Engineering*

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Hudson Valley Hospital Center, Cortlandt Manor

Employee Referral Bonus

Description of Program/Initiative

Hudson Valley Hospital Center gives a referral bonus to employees who refer an applicant who is subsequently hired and works for six continuous months. The applicant must include the name of the employee on the application at the time of submission. The amount paid for most positions is \$100 (prorated for part-time and per-diem employees). For the more difficult-to-fill positions, the bonus amount paid can vary from \$1,000 to \$3,000.

Significant Results

In tracking hire sources, Hudson Valley Hospital Center found that its own employees are its best recruitment source. In 2005, 28% of its hires were from employee referrals. The amount paid out in referrals was substantially less than the cost of recruitment advertising.

Lessons Learned

Hudson Valley Hospital Center's own employees are its best source of advertisement. The hospital not only reduced the cost of advertising, but has been able to enhance the teamwork process by getting employees involved in promoting their facility as a "great place to work."

Date Implemented:

June 2002

Partners:

Internal:

All employees

Contact:

Ruth Johnson

Director, Human Resources

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(914) 734-3571

Lawrence Hospital Center, Bronxville

Daily Line-up

Description of Program/Initiative

The Daily Line-up is a scheduled time of about ten minutes every day on every shift in every department at Lawrence Hospital Center. It is a formal opportunity for communication that fosters teamwork. It provides all employees a daily opportunity to hear information related to the hospital's culture—vision, mission, core values, and service standards.

The Daily Line-up is a communication strategy originally used by The Ritz-Carlton Hotel Company, LLC as part of its legendary service. The Ritz-Carlton is a two-time winner of the Malcolm Baldrige National Quality Award and a recognized leader in customer service. A cross-functional service excellence team from Lawrence Hospital Center attended a three-day training program through the Ritz-Carlton Leadership Institute and adopted the Daily Line-up.

Because of the Daily Line-up, every one at Lawrence Hospital Center is aware of not only the hospital's goals, but also how the hospital plans to achieve them. Lawrence Hospital Center also includes a daily census and general announcements to help plan the day's activities and workflow, as well as information about patient satisfaction priorities. Responsibility for "leading" the Daily Line-up rotates and includes all team members.

Significant Results

A recent employee culture assessment survey confirms that the hospital's employees recognize the importance of service excellence. The Daily Line-up has been successful as an effective communication tool that nurtures a service excellence culture while functioning as a platform for information sharing and discussion on the department level every day.

Lessons Learned

- ◆ Communication is key for employee ownership of the organization's goals.
- ◆ Expectations need to be communicated clearly and frequently with an opportunity for discussion; Daily Line-up provides a forum to do so.

Date Implemented:

April 4, 2004

Partners:

Internal:

All employees attend and participate in the Daily Line-up

Contact:

Pat Orsaia

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Long Beach Medical Center, Long Beach

Creating a “Culture of Caring”

Description of Program/Initiative

Recognizing the need to change the culture of the organization as a means to improving patient care and satisfaction, Long Beach Medical Center developed a strategy to create a “Culture of Caring” addressing the following key components:

- ◆ Get the “right people on the bus” (hire staff with the same value system as the organization).
- ◆ Provide employees with the skills necessary for good customer relations.
- ◆ Recognize and retain employees who demonstrate these values in their everyday work.

A program was developed that included:

- ◆ establishing standards of performance;
- ◆ revising the existing general orientation program;
- ◆ an orientation system and a “Buddy System” that pairs new staff members with employees to help socialize new staff;
- ◆ customer care training program to teach “customer relations” skills;
- ◆ “Caught You Caring” program that invites patients, families, and staff to nominate staff who exemplify the standards of performance; and
- ◆ new applicants are interviewed using questions designed to evaluate the candidate's past performance as a predictor of future performance.

Significant Results

- ◆ New employee turnover has decreased.
- ◆ More than 300 “Caught You Caring” nominations were received in the first year.
- ◆ Patient satisfaction scores have shown improvement.

continued...

Date Implemented:

Summer 2003 – March 2005

Partners:

Internal:

*Senior and middle management,
human resources, staff
development personnel,
and employees*

External:

*Gillman Performance Systems,
The Ritz Carlton*

Contact:

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and

Michelle Levine

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Long Beach Medical Center, Long Beach

Creating a “Culture of Caring” (continued)

Lessons Learned

- ◆ Performance standards clarify corporate expectations for staff and set standards for measurement.
- ◆ The behavioral interview process has been successful in hiring staff that possess the personal and professional ethics that support the organizational values of care, competence, and compassion.
- ◆ The “Caught You Caring” program has promoted a culture in which recognizing the efforts of staff has become a norm rather than an exception.
- ◆ Meeting with new staff early in their employment provides management an opportunity to learn whether staff expectations of working in the organization have been met.

Lutheran Medical Center, Brooklyn

Labor/Management Committee for Staffing, Recruitment, and Retention

Description of Program/Initiative

This is a negotiated, collaborative effort between the Federation of Nurses/United Federation of Teachers (UFT) and Lutheran Medical Center's nursing department to address staffing, recruitment, and retention issues. Monthly meetings are held with representatives from the Federation, staff, and management from each of Lutheran Medical Center's clinical divisions, nursing education and nursing recruitment staff, and the senior vice president of nursing.

Significant Results

The following were achieved through joint problem-solving, negotiation, and resolution:

- ◆ elimination of mandatory overtime;
- ◆ development and evaluation of staffing guidelines and practices on the patient care units;
- ◆ reduction in reported staffing "incidents";
- ◆ reduction of registered nurse (RN) termination rate to less than 7% in 2005;
- ◆ reduction of 90-day turnover by over 50% from 2002 to 2005;
- ◆ successful recruitment initiatives including an enhanced Student Nurse Technician Program, Employee Referral Program, Web postings, and "internal" open houses;
- ◆ successful recognition activities including Nurse of Distinction Awards and preceptor appreciation;
- ◆ reduction in the RN vacancy rate by 40% despite adding over 50 positions from 2003 to 2005;
- ◆ improved staff satisfaction as reported by the Federation of Nurses/UFT; and
- ◆ introduction of appropriate lingual hiring practices to support cultural competency.

Lesson Learned

Collaboration and partnership achieves the most successful results!

Date Implemented:

March 2003

Partners :

Internal:

Nursing, human resources, and external affairs departments and the Federation of Nurses/UFT

Contact:

**Rosanne Raso, R.N., M.S.,
C.N.A.A.**

*Senior Vice President,
Nursing Services
and*

Anne Goldman, R.N.
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Massena Memorial Hospital, Massena

FISH!

Description of Program/Initiative

The FISH! program, developed by ChartHouse Learning and adapted by Massena Memorial Hospital, encourages staff input into programs and processes and recognizes employees for their contributions to the hospital's success. The program increases staff's awareness of customer service and the impact each person has when interacting with patients and their family members, visitors, and each other. FISH! stands for "Fun in Small Hospitals" and it strives to make work fun and encourage staff to take an active role in finding ways to improve patient care and how they perform their work.

The program includes:

- ◆ designing teaching modules to be fun activities, such as using scavenger hunts;
- ◆ the executive staff serving staff a picnic lunch on hospital grounds;
- ◆ staff recognizing each other by passing a bouquet of flowers around to each other with a note of thanks;
- ◆ displaying staff pictures along the main hallway;
- ◆ a variety of activities suggested by employees that give staff an opportunity to take a break from work and have fun; and
- ◆ staff personalizing their work areas.

Significant Results

The program is voluntary for employees and as more staff have embraced the concepts of FISH! a decrease in turnover has been noted. Specifically, over the past three years, the turnover rate for registered nurses has decreased by 10.6%. The program has also been successful in breaking down departmental barriers and encouraging staff to interact with each other in resolving concerns.

Lessons Learned

Respect needs to be shown from both sides—those who embraced the concept and those who did not. Those who did not accept the program were asked not to dampen the spirits of those who did; and employees who did accept the program were asked not to be overbearing about the program when talking with employees who did not wish to participate.

Date Implemented:
2001

Partners:
Internal:
*All employees—
union, non-union,
and management*

Contact:
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MediSys Health Network, Jamaica

“The Heart of Health Care”—Disaster Medical Response Initiative

Description of Program/Initiative

Starting in the mid-1970s, Jamaica Hospital Medical Center (JHMC), with one of the busiest Level I trauma centers in New York City, developed tremendous expertise in treating the victims of large-scale disasters, including airplane crashes. JHMC realized it could use its experience with local emergencies to assist other communities. Since 1992, JHMC has operated a formal Disaster Relief Team including counselors, paramedics, physicians, and a Mobile Medical Van, which can immediately mobilize and bring the volunteer services of medical and mental health professionals to the victims and survivors of disasters.

JHMC has not hesitated to ask its staff to assist in disaster situations including the crash of TWA Flight 800, the devastating ice storm in upstate New York in 1998, and the crash of Egypt Air Flight 990 in 1999. In the aftermath of the September 11, 2001 terrorist attacks, the three hospitals in the MediSys Health Network—Jamaica, Flushing and Brookdale Hospitals—provided a major on-site response at the World Trade Center.

In the summer of 2005, almost 400 staff from each of the three hospitals volunteered to help the victims of Hurricane Katrina. About 20 were deployed to Mississippi and Louisiana, some for one week and others for as long as a month.

Significant Results

- ◆ Volunteering in disaster situations has become ingrained in the MediSys culture and is seen as a natural extension of the health care professional role.
- ◆ Employees who have been deployed are grateful for the personal and professional growth gained from these unique life experiences.
- ◆ The expertise gained in responding to disasters led to MediSys’ designation as one of four New York City Centers for Bioterrorism Preparedness Planning.
- ◆ MediSys’ Emergency Preparedness Team has opportunities to test response protocols in real life situations and to improve response systems.
- ◆ MediSys volunteers have helped thousands of victims of disasters over the past 14 years, offering them hands-on assistance from a corps of highly skilled health care professionals and support staff.

continued...

Date Implemented:

1992

Partners:

Internal:

Senior management, physicians, trustees, staff

External:

HANYS, American Hospital Association, Greater New York Hospital Association, Federal Emergency Management Administration, and U.S. Public Health Service Commissioned Corps

Contact:

Bruce J. Flanz

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(718) 206-6934*

MediSys Health Network, Jamaica

“The Heart of Health Care”—Disaster Medical Response Initiative (continued)

Lessons Learned

- ◆ If asked to volunteer, many health care professionals will. They appreciate the opportunity to volunteer because helping people is one of the main motivations for working in the health care field.
- ◆ “The Heart of Health Care” also includes those who work behind the scenes at the hospitals, generously donating their time and money to facilitate these deployments.
- ◆ Many prospective employees are drawn to MediSys organizations precisely because MediSys affords them these unique opportunities.
- ◆ MediSys’ Disaster Medical Response Initiative is successful because senior staff lead by example: senior staff members volunteer and are deployed in all responses to disasters.

Metropolitan Hospital Center, New York

Developing Leaders through Grass Roots Initiatives

Description of Program/Initiative

Metropolitan Hospital Center conducted Developing Leaders through Grass Roots Initiatives (GRI) workshops to focus on the organization's journey toward Magnet status, which involves implementing a primary model for changing a culture with sustained results.

Significant Results

- ◆ Through this initiative, Metropolitan Hospital Center created a high performance team of employees who unleashed the full potential of their thinking to solve problems and generate innovative solutions.
- ◆ This initiative focuses employees' thinking about innovation, learning, and change toward patient care.
- ◆ This initiative helped channel employees' improvement ideas to enhance job satisfaction.

Lessons Learned

Nurses can be engaged in a way that gives them more control over their work.

Date Implemented:
December 2004

Partners:

Internal:

*Training, development,
and nursing staff*

External:

*Consultants Tony Dottino
and Evelyn Walker*

Contact:

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Montefiore Medical Center, Bronx

Adopt-a-Unit

Description of Program/Initiative

Adopt-a-Unit is designed to foster a relationship of trust and facilitate open-door communication between staff and nursing management. It is an accountability tool used to measure interaction between management and associates using a mentoring model. The program is designed to foster teamwork with accountability among staff, units, and care centers and demonstrates shared governance and staff participation in identifying and solving problems. The program is meant to boost morale of the associates and increase productivity.

Significant Results

This program has resulted in improved communication between labor and management at Montefiore Medical Center and the establishment of activity programs for patients on the off-shift that are completely staff-driven. Increased staff participation in the unit decision-making process has resulted in increased regulatory compliance. There has been a noticeable improvement in staff morale in their daily patient care.

Lessons Learned

- ◆ Take time to listen to associates' concerns and act on the issues with feedback.
- ◆ It is important to treat all customers (patients and staff) with respect and understanding.
- ◆ Leadership is about managing people to achieve institutional goals.

Date Implemented:

March 2005

Partners:

Internal:

*Assistant director of nursing,
nurse managers, and unit staff*

Contact:

Emmanuel Ojofeitimi
*Director of Nursing/Senior
Assistant Director of Nursing
ojofeitimi@montefiore.org
(347) 387-1113*

Mount St. Mary's Hospital and Health Center, Lewiston

“The Mission Made Me Do It”

Description of Program/Initiative

The goal of this program is to recognize and affirm “core value” behaviors at Mount St. Mary's Hospital and Health Center. As a faith-based hospital, Mount St. Mary's is guided by Ascension Health's core values of:

- ◆ service to the poor;
- ◆ reverence;
- ◆ integrity;
- ◆ wisdom;
- ◆ creativity; and
- ◆ dedication.

When a co-worker is observed exhibiting core value behavior, the employee who witnessed the deed gives a “Mission Made Me Do It” recognition reward ticket to the employee and explains to the person getting the ticket why it is being bestowed. The core value behavior viewed may be anywhere in the hospital or its outreach facilities and may be given by any employee.

The employee who receives a recognition ticket may redeem it in the cafeteria for a free beverage or ice cream novelty. Names of those employees receiving “Mission Made Me Do It” tickets are displayed on a recognition board in the hospital's main lobby. Additional prizes are awarded to employees who receive several tickets.

Significant Results

The program has made staff more aware of how their actions positively affect others. It has also made them realize that people do notice when they are gracious and caring.

Lessons Learned

- ◆ All people need affirmation.
- ◆ Those who are noticed doing something positive are more likely to repeat the favorable accomplishment.
- ◆ The facility's core values are held before all employees as being very important and all are responsible to live them and support them in others.

Date Implemented:

This program was initiated in 2004 and is now fully in place.

Partners:

*Internal:
All staff*

Contact:

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*Vice President, Mission
Integration
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New York City Health and Hospitals Corporation, New York

Nursing Information Systems Advisory (NISA)

Description of Program/Initiative

In 2003, a partnership was formed with New York City Health and Hospitals Corporation's (HHC) corporate information technology and nursing leadership. NISA was initiated as a corporate nursing forum to give facility-based clinical nursing staff throughout the corporation a direct voice in the development and implementation of electronic patient care tools. The goals included enhancing nursing knowledge and competencies in the area of information technology (IT) and patient safety, avoiding duplicative documentation, and assuring ergonomically usable IT solutions for an aging workforce.

Registered nurses from the seven networks, 11 acute care facilities, and four long-term care facilities participate. NISA meets monthly to review progress, plan, and prioritize nursing IT initiatives. NISA regularly reports its progress through corporate nursing meetings and shares information with the other IT advisory groups.

Significant Results

- ◆ NISA conducted a documentation gap analysis and prioritized recommendations gathered from this analysis.
- ◆ NISA's nursing leadership presented, as part of an interdisciplinary team, at the Health Information Technology Summit in Washington, D.C. in October 2004.
- ◆ NISA has taken a leadership role in the following corporate initiatives:
 - medication administration rollout with continuing education units awarded for staff attendance;
 - staffing and scheduling systems upgrades and planned standardization;
 - prioritization of nursing documentation assessment tools; and
 - NISA's chair was elected vice chair of the Mysis software regional users group.

Lessons Learned

Nurses have enjoyed the opportunity to work together, network, share best practices, and mentor one another. These benefits have contributed to systems improvements and efficiencies.

Date Implemented:

April 29, 2003

Partners:

Internal:

Nadia Sultana, M.B.A., R.N., B.C., Senior Director, Information Systems; Marie Ankner, M.S., R.N., C.N.A.A., Assistant Vice President, Corporate Nursing Services; Louis Capponi, M.D., Chief Medical Information Officer; facility nursing executives, Physicians Information Systems Advisory, Pharmacy Information Systems Advisory and network IT representatives

External:

Multiple vendor partners

Contact:

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New York University Medical Center, New York

Faculty and Staff Wellness Program

Description of Program/Initiative

The mission of New York University Medical Center's (NYUMC) Faculty and Staff Wellness Program is to establish a workplace environment that encourages employees to preserve and enhance their well being. The program takes a multi-dimensional approach, focusing on employees' physical and emotional well being and improving lifestyle behaviors.

NYUMC's multi-site program serves 12,000 staff and faculty from the New York University School of Medicine, NYU Hospitals Center (inclusive of Tisch Hospital, Rusk Institute of Rehabilitation), and Hospital for Joint Diseases Orthopaedic Institute.

This program includes:

- ◆ health awareness lectures – monthly lectures on current health topics;
- ◆ health fairs – provide employees an opportunity to speak with health experts, participate in screenings, and obtain health educational materials;
- ◆ early disease detection screenings – a variety of screenings held throughout the year to encourage early detection and prevent illness;
- ◆ cultural programs – year-round service exchange program with major cultural center; and
- ◆ a health/lifestyle improvement program – designed to help achieve and maintain healthier lifestyle behaviors.

Significant Results

- ◆ On evaluations, participants say they are “very satisfied” with the program.
- ◆ Presenters and hospital departments express interest in volunteering their time and expertise to conduct programs.
- ◆ Disease detection screenings have resulted in early diagnoses and facilitating medical treatment with improved clinical outcomes and quality of life for employees.
- ◆ The success of the program led to the establishment of the Center for Corporate Wellness, which provides similar wellness services to businesses and corporations at reasonable cost.

Date Implemented:
2000

Partners:
Internal:
*The talent and expertise of
the health professionals of
NYU Hospitals Center*

Contact:
Ilene Masser
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ilene.masser@nyumc.org
(212) 404-3833

continued...



New York University Medical Center, New York

Faculty and Staff Wellness Program (continued)

Lessons Learned

- ◆ Wellness programs can be implemented in a cost-effective manner by using the expertise of internal health professionals.
- ◆ Wellness programs advance an organizational goal of supporting a healthy workforce.
- ◆ Employees are viewed as consumers of health services and wellness programs provide a venue to market departments, services, and health professionals within the organization.
- ◆ Galvanizing senior leadership support is essential to the success of the program.
- ◆ Effective and creative marketing is essential.

North Bronx Healthcare Network, Bronx

Improving Patient Safety in the OR

Description of Program/Initiative

Retention of foreign objects is a common and costly problem. To address this, North Bronx Healthcare Network developed a program to reinforce the Association of Perioperative Registered Nurses' standards for correct counts, patient safety as everyone's responsibility, and to reduce risks to patients.

Significant Results

- ◆ This program identified opportunities to improve the operating room (OR) count process.
- ◆ Standardized count sheets were developed for the OR and labor and delivery area across the network's two acute care facilities.
- ◆ All lap pads are required to have rings.
- ◆ A copy of the count sheet is now maintained in the OR.
- ◆ Communication between physicians and nurses was revisited.
- ◆ In the event of a missing lap pad or sponge, the physician will stop the case and assist with the search.
- ◆ Personnel were offered assertiveness education and encouraged to escalate any variations in the count.
- ◆ Instrumentation was reviewed with all OR staff.
- ◆ Competency requirements were added for nursing personnel.

Lessons Learned

Interdisciplinary collaboration, staff education, and a focus on patient safety are drivers for prevention of near-misses.

Date Implemented:
2005

Partners:

Internal:

Perioperative, maternal, and child nursing leadership; and medical and quality management staff

External:

National standards, patient safety initiative

Contact Name:

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North Shore-Long Island Jewish Health System, Great Neck

Critical Care Nurse Fellowship

Description of Program/Initiative

The Critical Care Nurse Fellowship program provides new graduate nurses with skills and practical knowledge to transition into the role of a critical care nurse. The program supports and enhances the socialization process of these nurses as fully functioning members of the health care team. The curriculum is designed to enhance the new graduate's critical thinking skills by using the American Association of Critical Care Nurses Essentials of Critical Care Orientation. The program provides additional support via nurse graduate peer group coaching and a master preceptor. Additional professional development sessions are provided throughout the first year of employment. The Nurse Fellows participate in activities that simulate the clinical environment through computer-controlled simulation mannequins and interactive videos. The program is also adaptable to the experienced nurse who may need additional support to successfully transition into a tertiary care critical care unit.

Significant Results

National survey data continue to report that critical care and the emergency department are the most difficult nursing positions to fill. The vacancy rate for nurses in Nassau and Suffolk counties as reported by HANYS in April 2005 was 14%. Critical care nursing shortfalls at North Shore-Long Island Jewish Health System's tertiary care centers resulted in a 16.2% vacancy rate in April 2005. The tertiary care facilities had 64 vacancies in critical care specialty areas. The system was able to successfully recruit and hire 54 nurses into its program within 30 days. The vacancy rate for all of its critical care units is now at an all-time low of 8.3%, with a total of 27 vacancies as of December 2005. North Shore-Long Island Jewish Health System currently has more than 90 critical care Nurse Fellows working in its tertiary care centers.

Lessons Learned

- ◆ Didactic education and clinical application need to be aligned to increase nurse competency levels; clinical time needs to be in greater proportion to didactic.
- ◆ Small group learning facilitates asking questions, becoming part of the unit culture, and forming professional relationships.
- ◆ Preceptors receive mentoring and coaching from the program directors, which includes education in adult learning concepts.

Date Implemented:

June 24, 2005

Partners:

*Internal:
Center for Learning and
Innovation, Patient Safety
Institute, and nursing
education staff*

Contact:

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Talent Acquisition
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Northern Westchester Hospital Center, Mount Kisco

Integrative Medicine Program

Description of Program/Initiative

Northern Westchester Hospital Center launched an innovative new patient care service focusing on non-traditional therapies to complement conventional medical care. The Integrative Medicine Program incorporates healing of the body, mind, emotions, and spirit into the daily care of patients.

Integrative medicine services are provided under the nursing scope of practice to patients requesting these services or to patients referred by their direct care providers. The goal is to create a healing partnership between the patient and the caregiver and to encourage patients to become actively involved in choosing therapies. Holistic therapies support the healing process by increasing patient comfort and decreasing stress levels.

Aligning with the Planetree philosophy, the Integrative Medicine Program promotes the nurturing and support of staff. Staff members have access to integrative sessions, in the form of “healing breaks.” Education and mentoring of staff is another important part of the Integrative Medicine Program. Competency workshops are offered to nurses to promote integration of holistic modalities into direct patient care. The Holistic Nursing Council, chaired by the clinical coordinator for the Integrative Medicine Program, has grown in membership to include nurses from any units within the hospital.

Significant Results

Patient Testimonial: “This program is absolutely fabulous! The pre-birth Reiki session brought peace and tranquility into a room that was previously filled with stress, distress, pain, and discomfort. The session really turned the room and the whole birthing experience into the beautiful experience everyone wishes it could be. You have wonderful people—very talented individuals running this program. I offer my most sincere gratitude to your Reiki Masters.”

Employee Testimonial: “As our shift progressed, we were starting to feel tired and frustrated. I gave one of the nurses a Reiki treatment right at the nurses’ station. Everyone at the station benefited from the session. The energy of all the staff relaxed, and we were able to come together and focus on helping each other to help the patient. Very wonderful!”

Clinical Outcomes: Patients reported a mean average reduction of 3.1 points (n=147) on the visual analogue pain scale following intervention using the integrative therapies. Patients reported a mean average reduction of 3.9 points (n=74) on the visual analogue tension scale.

Date Implemented:

April 2004

Partners:

Internal:

Collaboration and support from nurses, physicians, and hospital administration

External:

Foundation support for funding the program coordinators and nursing education initiatives

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and*

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continued...



Northern Westchester Hospital Center, Mount Kisco

Integrative Medicine Program (continued)

Staff Perceptions: Employee surveys conducted before implementation of the program and 18 months after implementation demonstrate a positive change in thinking about the usefulness of the integrative therapies.

Utilization and Staff Training: In the latter half of 2005, the program averaged over 200 integrative therapy interventions per month. Nurses provided over 50% of these interventions during routine patient care.

Patient Satisfaction Data: The patient satisfaction surveys have consistently shown high satisfaction.

Lessons Learned

- ◆ Communication and buy-in from all levels of the organization were key to its success.
- ◆ When selecting the integrative modalities to be introduced in the hospital environment it is essential that all clinicians and physicians be consulted and have input into the selection process.

Olean General Hospital, Olean

Using Process Innovation to Improve Employee Satisfaction

Description of Program/Initiative

Olean General Hospital believes that process innovation is a necessity to survive in the health care world of today. “Lean manufacturing” and Six Sigma principles—commonly used tools for process innovation in manufacturing—have proven challenging to implement in a hospital setting. However, Olean General Hospital’s hiring of a manufacturing industry-trained engineer to help translate these tools into the health care setting has proven successful and has helped boost employee satisfaction. Several key process innovations have led to time saved by numerous departments within the hospital, and managers are “lining up at the door” for more.

Significant Results

- ◆ Illegible patient demographic information on physician orders to the pharmacy have been eliminated.
- ◆ Manually generated form sets for endoscopic procedures have been automated.
- ◆ Standard work principles have been implemented to reduce variation in performing daily tasks.
- ◆ New staffing models match patient admission patterns.

Lessons Learned

Improper use of manufacturing principles to drive process innovation in health care can sometimes do more harm than good with regard to employee satisfaction and retention. This can be rectified by using an engineer who is well versed in the numerous tools available and can work with the staff who perform the work, to harvest process innovation ideas and see them through implementation. The result is happier employees, and in turn, happier patients.

Date Implemented:
August 2004

Partners:
Internal:
*Nursing services, pharmacy,
human resources, information
systems, and administration*

Contact:
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Phelps Memorial Hospital Center, Sleepy Hollow

Health Care Career Pathway Program

Description of Program/Initiative

Phelps Memorial Hospital Center collaborated with a local high school and community college to create the Health Care Career Pathway Program. The program promotes the nursing profession through education, hands-on field experience, and formal training. A high school career fair brings freshman students to the hospital, where employees set up a “mini-village.” Each station offers a hands-on activity and representatives from each professional area talk about their role and answer questions.

The collaborative group developed a summer camp to target high school sophomores. Students are invited to knowledge-based learning in areas such as medical technology and skills training in first aid and cardiopulmonary resuscitation. Students also shadow employees in each clinical department. Students have the option to volunteer at the hospital after completing the camp. High school junior or senior students can participate in a formal internship at the hospital for one semester.

The program provides high school seniors mentoring assistance with collegiate applications and preparatory courses for entrance exams. Opportunities are also available for the high school graduates interested in a nursing career. The hospital offers patient care assistant (PCA) training and upon graduation from the program, participants are eligible for employment at the hospital. Once employed at Phelps, they are eligible for tuition reimbursement benefits. Additional financial support is provided with scholarships of \$5,000 per year, awarded in return for a commitment to one year’s employment as a registered nurse.

Significant Results

- ◆ About half of the 27 students who participated in the summer camp volunteered at the hospital afterwards.
- ◆ Ten students have completed the formal internship program.
- ◆ All but one of the 17 participants who completed the PCA training secured employment.
- ◆ Seven students are currently enrolled in the tuition reimbursement program and report having an advantage over their peer group because they can relate what they are learning in school to what is happening with their patients at the hospital. Six have scholarships.

Date Implemented:
September 2002

Partners:

External:

*Dr. Howard Smith,
Superintendent, Tarrytown
School District; the local
community college; the local
Rotary, and corporations that
provide program funding*

Contact:

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(914) 366-3500*

continued...



Phelps Memorial Hospital Center, Sleepy Hollow

Health Care Career Pathway Program (continued)

- ◆ The program fulfilled the hospital's objective of filling unlicensed positions with mature, dedicated employees.
- ◆ Hospital employee morale has improved and support for the program is hospital-wide.

Lessons Learned

- ◆ The program requires a coordinator and a designated contact at each site.
- ◆ The estimated cost of the program has been \$21,000 to \$25,000 annually, funded partially by the hospital and partially by local support.
- ◆ Collaborating and gaining consensus between three organizations can be challenging; one individual must “own” the initiative and be responsible for planning, communication, and collaboration.
- ◆ One representative from each facility must be a designated contact person, responsible for implementation detail.

Samaritan Hospital, Troy

Bid-A-Shift

Description of Program/Initiative

This program provides opportunities for nursing staff to place a bid for open shift positions through Samaritan Hospital's Web site. The program offers convenience in scheduling wanted shifts, provides staff autonomy over work schedules, and increases pay to staff to cover extra shifts over their regularly scheduled hours.

Significant Results

Increased staffing efficiency provides greater scheduling controls and aids management in ensuring the highest quality of staffing at a competitive cost. Agency expenditures were reduced 16.8% in 2004 and an additional 4.2% in 2005.

Lessons Learned

- ◆ Bid-A-Shift is most effective at increasing quality and continuity of care, not cost savings—overall savings are minimal and most agency savings are used to pay increased rates to staff for coverage.
- ◆ The program requires close monitoring of participating staff' time to ensure compliance with overtime rules.
- ◆ Some more experienced staff feel "left out" because junior staff are willing to work for less and submit lower bids.

Date Implemented:

June 2003

Partners:

Internal:

All hospital and residential affiliates, and the hospital's information services staff

Contact:

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Sea View Hospital, Rehabilitation Center, and Home, Staten Island, and Coler-Goldwater Specialty Hospitals and Nursing Facilities, New York

Nursing Recruitment, Retention, and Education Initiatives

Description of Program/Initiative

In 2003, New York City Health and Hospitals Corporation's (HHC) corporate nursing strategic plan was initiated to address increased nursing demand, diminishing registered nurse (RN) supply, decreased length of stay, increased patient complexity, the nursing shortage, and aging workforce issues. Nurse recruitment meetings were initiated to develop a plan to enhance nurse recruitment and retention and address workplace issues. Plans were developed to actively participate in the nursing marketplace, expand HHC staff participation in publishing nursing practices, enhance registered nurse recognition, partner with HHC's academic affiliates to promote new clinical experiences and opportunities, participate in programs to address the shortage, and partner with HHC's workforce development staff.

Significant Results

- ◆ Nurses have benefited in the area of professional development through networking, mentorship, and continued professional education.
- ◆ HHC and its facilities are active in recruitment and affiliation outreach programs, resulting in a decreased usage of overtime and foreign recruitment or placement firm usage, and a stable nursing personnel count.
- ◆ Nurses at HHC have received corporate, public, and professional recognition.
- ◆ New affiliation partnerships were initiated with nursing schools.
- ◆ HHC RN credentialed staff are encouraged to participate as clinical adjuncts to enhance clinical affiliation placements.
- ◆ Opportunities for sharing best practices, networking, and mentoring have been expanded throughout HHC.
- ◆ HHC was awarded the opportunity to participate in HANYS' Nurse Engage™ Project. Queens Hospital Center is the demonstration site.
- ◆ Nursing orientation was refined to add additional support for new RNs hired at HHC facilities.

Date Implemented:
July 2003

Partners:

Internal:

Facility nursing executive leadership; Marie Ankner, M.S., R.N., C.N.A.A., Assistant Vice President, Corporate Nursing Services; nurse recruiters, nurse educators, staff development leaders, and HHC's human resources and workforce development staff

External:

Academic affiliates, HANYS, and Greater New York Hospital Association

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(212) 442-4068*

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Sea View Hospital, Rehabilitation Center, and Home, Staten Island, and Coler-Goldwater Specialty Hospitals and Nursing Facilities, New York

Nursing Recruitment, Retention, and Education Initiatives (continued)

Lessons Learned

HHC RNs are highly committed, professional, and dedicated. More than 60% of direct care RNs have more than ten years of service. The average age of an HHC RN is consistent with the New York State average. The turnover rate for new RNs is 16% in the first two years, which is on par with national trends.

Seton Health System, Troy

Retaining Our Workforce—Developing Front-Line Managers

Description of Program/Initiative

Seton Health System recognizes that the relationship between a manager and his/her associates is a key driver in employee retention. Seton believes that providing comprehensive training to associates who are promoted into management positions is key to their success and developing managers into leaders is vitally important to maintaining a satisfied workforce. Driven by this objective, Seton conducts a comprehensive leadership development program annually.

The program includes sessions on principles of supervision, interviewing and selection, communication and conflict management, coaching, legal issues and labor relations, employee improvement and absence management, time management, delegation, recognition and motivation, the budgeting process, and performance management.

Seton recognizes that assessing workforce satisfaction during the first six months of employment is crucial for long-term retention. The vice president of human resources and the vice president of mission integration invite new associates, who have completed six months of employment, to an informal meeting to gain insight on how their new work experience is going. This helps Seton gain insight on whether the organization and managers have delivered what was promised.

Significant Results

- ◆ The program has been so successful, Seton is considering adding a series of more advanced level programs for those looking to continue developing their skills.
- ◆ Turnover was reduced from 10.4% to 9.5% in 2005.
- ◆ Seton's scores on its associate satisfaction survey surpassed national benchmark data and exceeded Seton's own previous years' scores.
- ◆ Seton has experienced an annual re-hire rate of about 10.3%.

continued...

Date Implemented

Seton Health System began this program several years ago, but it has evolved significantly over the past year into a formal, interactive program.

Partners:

Internal:

The educational resources and human resources departments coordinate the program.

Presenters include members of the human resources, education, and finance departments.

External:

Last year, Seton Health System invited a speaker, Jo Manion, for a one-day on-site seminar on retention as a complement to Seton's annual leadership development program.

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Seton Health System, Troy

Retaining Our Workforce—Developing Front-Line Managers (continued)

Lessons Learned

- ◆ Constantly evaluate and revise the program to keep it fresh and interesting.
- ◆ Sessions that include more interactive methods of teaching and that encourage discussion scored higher levels of satisfaction.
- ◆ Seton's director of education works closely with all presenters to help them develop their presentations into lively, interesting sessions. Attendance has improved as a result.
- ◆ Ongoing communication with managers and associates is key to evaluating the program and for developing future programs.

Sound Shore Health System, Inc., New Rochelle

Scholarship Program for Nursing Students

Description of Program/Initiative

Sound Shore Health System implemented a scholarship program that offers registered nurse (RN) students a \$5,000 or \$10,000 scholarship for a one- or two-year employment commitment after graduation.

The scholarship program has grown to offer three additional types of scholarships: scholarships for employees, for dependents of employees, and work-deferred scholarships.

Significant Results

- ◆ There have been significant improvements in staffing since the program's inception. The vacancy rate decreased from 23% in January 2002 to 7% in December 2005. Agency usage decreased from a high of 35 full-time employees (FTEs) in April 2002 to 2.4 FTEs in December 2005. Cost of agency RNs in 2002 was \$3,245,000, while in 2005 this dropped to \$265,741.
- ◆ Forty-three scholarships between \$5,000 and \$10,000 have been paid. Of these, 30 RNs remain employed in the system.
- ◆ Sixteen employees received scholarship money; of these, 13 remain employed. Ten additional employees are attending school now, with a two-year work commitment after graduation.
- ◆ Three dependents of employees are currently attending Hopfer, with a two-year commitment after graduation.
- ◆ Three work-deferred scholarships have been paid; of these two remain employed. An additional ten students are attending Hopfer on a work-deferred scholarship with a two-year commitment after graduation.

continued...

Date Implemented:
2002

Partners:

Internal:

*Sound Shore Medical Center,
Shaffer Extended Care Center,
and Mount Vernon Hospital*

External:

Hopfer School of Nursing

Contact:

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Sound Shore Health System, Inc., New Rochelle

Scholarship Program for Nursing Students (continued)

Lessons Learned

- ◆ Early on, the scholarship money was paid up-front upon signing the contract. This process was changed to paying by semester installments after the student provides his or her grades.
- ◆ Because many of these students were from nursing schools other than Hopfer, it was not as easy to keep track of them. It is important to maintain contact with the students and build a sense of loyalty and responsibility to the institution.
- ◆ The employee scholarships were originally set up to be “work part-time, be paid full-time” while in school. This was problematic for many departments; therefore, the employee scholarship is now only offered as a part-time/full-time alternative if the employee actually works within the nursing department; the decision can be made on a case-by-case basis within other departments.

St. Catherine of Siena Medical Center, Smithtown

“Growth from Within”

Description of Program/Initiative

“Growth from Within” is a multifaceted program to increase recruitment and decrease the registered nurse (RN) vacancy rate. Toward the end of 2004, the hospital faced an RN vacancy rate of about 14% and relied heavily on agency personnel and foreign recruitment. The nursing leadership team looked at the current ancillary staff and nursing students and employed three strategies:

- ◆ Hired nursing students to work as nursing assistants and clerical assistants while completing their nursing program:
 - provided each student nurse with an RN mentor and clinical educator while providing an opportunity to work in areas of interest;
 - enabled student nurses the opportunity to get to know staff and facility; and
 - sponsored several get-togethers and an internal nursing open house with the nursing leadership team to discuss employment positions after graduation.
- ◆ Increased the number of clinical rotations available to nursing programs, thereby increasing the number of senior semester student experiences:
 - sponsored meetings with professors and students to identify progress and issues; and
 - sponsored several get-togethers with the nursing leadership team to discuss positions after graduation.
- ◆ Collaborated with Suffolk Community College to send staff through the nursing program:
 - funded tuition and fees in exchange for commitment to work at the hospital for a predetermined period.

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Date Implemented:
January 2005

Partners:

External:

Suffolk Community College, Adelphi University, Molloy College, St. Joseph's College, State University of New York (SUNY) at Stony Brook, SUNY at Farmingdale, and the Board of Cooperative Educational Services

Contact:

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St. Catherine of Siena Medical Center, Smithtown

“Growth from Within” (continued)

Significant Results

As a result of these efforts:

- ◆ The RN vacancy rate has decreased from 14% to 5%.
- ◆ The reliance on agency personnel has decreased by about 50%.
- ◆ There will now be a graduating class of nurses each year who have agreed to and wish to work at the facility.

Lessons Learned

- ◆ The reason a nurse comes to work and stays in the community hospital setting is the people with whom and for whom they work.
- ◆ Look inward to your own staff to identify the nurses of the future. Offering them the opportunity to go to nursing school will yield a wonderful pool of nurses who are loyal to the hospital and staff.

St. Francis Hospital and Health Centers, Poughkeepsie

Nurse/Physician Forum

Description of Program/Initiative

The Nurse/Physician Forum is a group of nurses and physicians who meet to discuss how they interact. Any nurse or physician in the hospital can attend. This forum was started by physicians who wanted to improve the way they interacted with St. Francis Hospital's nursing staff.

Significant Results

- ◆ Because of these meetings, St. Francis Hospital now has a more inclusive telephone listing for physicians that includes beeper, cellular telephone, and home numbers. Before this change, the nursing staff were frequently complaining that they could not reach physicians. St. Francis Hospital also identified a process for providing staff with guidelines to use when calling physicians with patient issues so that the important information is conveyed.
- ◆ The first issue that was addressed was how nurses and physicians address each other. The nurses and physicians in the forum were very open about how the manner of address affected their relationship. Cultural, generational, and gender issues were all discussed and the result was a determination of what would be considered professional versus social interactions and how each situation would be handled.
- ◆ St. Francis has initiated a project to identify a process for dealing with inappropriate communications between nursing and physicians, i.e., hostile interactions.

Lessons Learned

Physicians and nurses all want the best for patients and can openly discuss differences, identify roadblocks, and develop interventions to improve communications.

Date Implemented:
Spring 2005

Partners:
Internal:
*Nurses and physicians—
both private physicians
and hospitalists*

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St. Joseph's Hospital Health Center, Syracuse

New Hire Support Program

Description of Program/Initiative

The New Hire Support Program was launched because research told St. Joseph's Hospital Health Center that it had a disproportionately high turnover rate within the first 18 months of employment. The New Hire Support Associate was hired to support and guide new hires for the first 18 months of their employment. The New Hire Support Associate assists in the new hire's orientation; introduces new hires to staff; facilitates communication between the new hire, manager, and educator; and transitions new employees to St. Joseph's Hospital Health Center.

The New Hire Support Associate makes rounds to track progress of new hires and organizes the following activities for new hires:

- ◆ lunch with New Hire Support Associate on Day 1;
- ◆ lunch with managers on Day 2;
- ◆ get-together/support meetings at three months, one year, and at 18 months;
- ◆ graduation party at six months after regular employment status has been achieved; and
- ◆ posts pictures of new employees.

Significant Results

The organization's retention rate has significantly improved. The high turnover rate within the first 18 months of hiring employees has declined markedly since the implementation of this program, and is now in line with industry benchmarks.

Lessons Learned

- ◆ The New Hire Support Associate must have a friendly, nice personality, and empathetic manner.
- ◆ The New Hire Support Associate must maintain good inter-departmental working relationships; maintain knowledge of organizational structure; be cooperative, positive, and professional in interactions with others; and be an excellent listener and communicator.

continued...

*Date Implemented:
October 2002*

*Partners:
Internal:
All members of the
management staff of
St. Joseph's Hospital
Health Center*

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Frank Panzetta
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St. Joseph's Hospital Health Center, Syracuse

New Hire Support Program (continued)

Lessons Learned (continued)

- ◆ The New Hire Support Associate must maintain current and accurate knowledge of relevant mandates, policies, and regulations.
- ◆ The New Hire Support Associate was an experienced manager who was ready to leave her current assignment and help the facility develop this new program. Her experience, expertise, and credibility coupled with the high level of respect that this individual gained throughout her career, proved an invaluable asset to this program.

St. Luke's Cornwall Hospital, Newburgh

Introduction of a Shared Governance Model

Description of Program/Initiative

St. Luke's Cornwall Hospital's model for shared governance with nurses has improved nurse satisfaction and retention. The hospital established a Nursing Task Force in early 2005 to research a shared governance model that would be based on research and at the same time be unique to St. Luke's Cornwall Hospital's culture. After an extensive literature search, the Task Force recommended a model.

Consultant Tim Porter O'Grady was invited in November 2005 to speak to the hospital's nurses about a shared governance structure. Following his visit, the Task Force requested a vote of confidence to move forward with a shared governance model for nursing at St. Luke's Cornwall Hospital. A Council Fair was conducted at both campus cafeterias to encourage enrollment for the newly formed Nurse Practice Council, Research Council, Quality/Education Council, and Resource Council. All councils report to the Executive Council. The councils are comprised of predominantly staff registered nurses at the bedside and two or three managers. In addition, councils will be formed on each unit.

Significant Results

Councils have been formed, with excellent staff nurse and management participation and attendance at all meetings.

Lessons Learned

Never underestimate the power of few people to evoke change. The success of this program is due in a large part to the sense of commitment and knowledge of the Nursing Task Force, comprised of nine staff nurses, a clinical nurse educator, and a member of the facility's human resources team.

Date Implemented:

*February 2005:
task force developed
December 2005:
shared governance
structure initiated*

Partners:

Internal:

*Registered nurse staff,
nursing leadership, department
heads, medical executive team,
executive team, and the
St. Luke's Cornwall Hospital
Board of Trustees*

External:

*Tim Porter O'Grady, R.N.,
Ed.D., Ph.D., F.A.A.N.,
a shared governance "guru,"
and Vickie George, R.N., Ph.D.,
F.A.A.N., a consultant
from American Nurses
Credentialing Center.*

Contact:

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St. Mary's Hospital, Amsterdam

Minimal Lift Program

Description of Program/Initiative

In 2005, St. Mary's Hospital participated in an ergonomic survey through Ascension Health. The results illustrated that the hospital has the largest bariatric population of all Ascension hospitals. The hospital's Workers' Compensation claims rose over 50% due to injuries resulting from lifting and/or moving patients.

To improve the health and well-being of hospital staff and patients, St. Mary's Hospital purchased \$425,000 worth of patient transfer lift devices. This program is designed to help make transfers and lifting of patients easier to perform and safer for both staff and patients.

With the aging population of the workforce and the continued workforce shortage in clinical areas, St. Mary's Hospital is committed to the Minimal Lift program, which allows the clinical staff to perform patient lifting without risk of injury and with minimal assistance.

Significant Results

- ◆ The excitement and support of the clinical staff has attributed to the success of the program.
- ◆ The hospital is confident that it will see a reduction in Workers' Compensation claims, a reduction in lifting-related injuries, and increased recruitment and retention of staff.
- ◆ St. Mary's Hospital is committed to preventing workplace injury and increasing safety. This effort is only the beginning of reaching the facility's pledge to provide a safe, healthy, incident-free environment for staff and patients.

Lessons Learned

People really do accept culture change!

Date Implemented:
December 2005

Partners:
Internal:
Ascension Health
External:
Barton Medical Corporation

Contact:
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St. Peter's Health Care Services, Albany

Sustaining Cultural Transformation

Description of Program/Initiative

In March 2004, St. Peter's Health Care Services implemented Values in Practice (VIP), an ongoing organizational commitment to creating a culture of excellence. Developed in collaboration with Catholic Health East, VIP is an ongoing strategic framework designed to create and sustain a values-based culture of service and operational excellence.

To implement VIP, St. Peter's committed to three cornerstones required for success: service excellence teams, leadership development, and accountability structures and processes. Twelve Service Excellence Teams were created and each team leader forms the Steering Committee, which reports directly to senior leadership. Examples of teams include communication, diversity and inclusion, employee satisfaction, rewards and recognition, leadership development, and patient satisfaction. The teams bring together experts at the point of care to develop and implement policies and procedures that improve patient, employee, and physician satisfaction. The new system empowers and rewards front-line staff, flattening the organizational hierarchy and building individual accountability.

To assist with the journey to becoming a high performing organization, three full-time positions were created: organizational development specialist, leadership development specialist, and employee relations specialist. The organizational development specialist is responsible for increasing organizational effectiveness through the development of structures, systems, processes, and programs related to culture, values, and behavior. The leadership development specialist develops learning opportunities for St. Peter's current and future leaders. The employee relations specialist supports an interactive environment and helps to keep a pulse for the organization, facilitating two-way communication, and problem resolution at the lowest level possible. Simultaneously, the position of professional practice specialist was created within the Research and Quality Initiatives Office of Patient Care Services to develop strategies for point of care nurses to engage in evidence-based practices.

Professional development and recognition of accomplishments is crucial to St. Peter's cultural transformation. A professional performance plan for nursing staff has been in affect for just over a year. It consists of four levels, with the top requiring a Bachelor's degree in nursing. This four-tiered approach allows nurses to be rewarded and promoted for their skills, dedication, and leadership without removing them from direct patient care.

continued...

Date Implemented:

March 2004

Partners:

Internal:

*All employees, physicians,
and those served by St. Peter's*

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Director of Education

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St. Peter's Health Care Services, Albany

Sustaining Cultural Transformation (continued)

Description of Program/Initiative (continued)

St. Peter's cultural transformation is still in its infancy. The organization continues to identify methods to evaluate the effect of the changes that have been made. In the meantime, St. Peter's has anecdotal evidence of success based on staff participation on various committees, an increase of staff-driven activities throughout the organization, and the numbers of nurses achieving promotions through the four-tiered professional performance plan.

Significant Results

- ◆ Reduced organizational turnover in 2005 compared to 2004.
- ◆ Nursing vacancy decreased to 2.27%.

Lessons Learned

There is a natural resistance to change, especially when balancing the many day-to-day challenges in health care.

Staten Island University Hospital, Staten Island

Retention Workgroup

Description of Program/Initiative

The Retention Workgroup is a group of nursing leaders who gather monthly and discuss, develop, and implement initiatives with retention of staff as its driving force. This group includes staff nurses, nurse managers, assistant nurse managers and associate vice presidents who bring original ideas, topics for discussion, and proposals to this forum.

Significant Results

- ◆ A number of ideas have stimulated change in the institution. Staten Island University Hospital now provides a “Welcome Breakfast” and banner as a way of greeting new employees as they begin their assignments on a new unit.
- ◆ Efforts to develop the management staff are in progress and will have a positive effect on retention of staff nurses.
- ◆ The Retention Workgroup will address concerns revealed by examining exit interviews.

Lessons Learned

The dynamic nature and flexibility of a workgroup can generate innovative and new ideas for the workplace if nurses at all levels of the organization are involved. Staff nurses are an essential part of all workgroups and committees, particularly those aimed at retention.

Date Implemented:

This group began meeting in November 2005 in response to an increasing nursing turnover rate and the results of the employee input survey that identified opportunities for improvement.

Partners:

Internal:

The human resource department (nurse manager of recruitment) chairs the workgroup and is joined by the other workgroup members to review and discuss topics of the month.

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Ph.D.**

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SUNY Downstate Medical Center, Brooklyn

Recruitment and Retention: A Four-Part Approach

Description of Program/Initiative

An intensive analysis of recruitment and retention was undertaken by SUNY Downstate Medical Center's nursing and human resources departments in 2004. Statistics showed a vacancy rate of 16% in 2003 and a general turnover rate of 16%, with turnover in some units as high as 21%. To address the problems comprehensively, SUNY Downstate Medical Center took a data-driven approach. The nursing department analyzed hospital data and reviewed literature on nursing shortages. The facility identified four major areas needing improvement: salary, 12-hour shifts, programs to attract senior nursing students and new graduates, and the need to shorten the hiring cycle.

Salary: In conjunction with human resources, an aggressive proposal was adopted to bring salaries and experience differential in line with regional competitors and to change the Civil Service Salary Structure to extend compensation for post-licensure experience from five to ten years.

12-Hour Shifts: The organization identified the lack of 12-hour shifts on its two medical units as a major cause of dissatisfaction. The staff was empowered to develop their own 12-hour schedule. The absenteeism rate decreased from an average of 20 sick calls per month to 11 sick calls per month after implementation.

Summer Internship Program: This ten-week internship program was marketed extensively to all local schools. Twenty nurse interns were accepted into the program. The unique features of the program are the combination of classes and support sessions integrated with clinical experiences. An educator who planned various clinical observations according to the student's preferences followed each participant. Following the program, part-time positions were created for these students.

Hiring Cycle: The recruiting cycle was as long as six to eight weeks from initial contact to first day of work. To shorten this period, wherever possible, communication was conducted online. The nurse recruiter focused solely on filling nursing positions, dedicated administrative support was provided, and there has been a heightened focus on moving the process along more quickly. A total of 69 nurses were hired in the third and fourth quarters of 2005.

continued...

Date Implemented:
August 2004 through
December 2005

Partners:
Internal:
Human resources department

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SUNY Downstate Medical Center, Brooklyn

Recruitment and Retention: A Four-Part Approach (continued)

Significant Results

Initial vacancy and turnover rates of 16% in 2003, were reduced to 5.88% and 9.64%, respectively.

Lessons Learned

- ◆ Solving the nursing shortage and improving nursing retention is an ongoing process for SUNY Downstate that is grounded in continuing data collection and a multi-dimensional approach to solutions. There is no one solution that will solve the nursing shortage for every hospital.
- ◆ SUNY Downstate assessed its own strengths and weaknesses, allocated considerable human and financial resources, improved internal processes, engaged and empowered front-line nursing staff, and formed strong working relationships with other departments, particularly human resources.
- ◆ To be successful, it is imperative that senior hospital and nursing leadership be aligned and jointly recognize the strategic importance and business impact of addressing recruitment/retention in a multi-dimensional way.

Thompson Health, Canandaigua

403(b)/401(k) Vendor Transition and Consolidation

Description of Program/Initiative

By switching retirement savings plans, Thompson Health was able to increase employee participation in the plan. This program was a transition from two separate plan providers to one provider. A request for proposals was performed by an outside investment advisor. This narrowed the selection to three vendor finalists presenting to Thompson Health's pension and finance subcommittees.

Significant Results

- ◆ Seven weeks before implementation, 40 on-site (non-mandatory) main campus education sessions were provided over a six-day period. In addition, visits to all nine satellite locations were completed.
- ◆ Talking points were provided in advance to system leaders, managers, and supervisors.
- ◆ Seventy-eight one-on-one consultations were provided during the 25 days following the initial group meetings.
- ◆ Eighty-eight one-on-one consultations were provided during the next six months following implementation.
- ◆ Participation increased from 471 to 566 within the first month of new plan implementation (20% increase). After nine months, Thompson Health had over 590 participants (25% increase since inception of new program).

Lessons Learned

- ◆ Use incentives for early deadline submission—Thompson Health offered 50 prizes with +\$700 value.
- ◆ Invite associates to participate in the vendor selection process.
- ◆ Get buy-in from system leaders/managers in advance.
- ◆ Set up an in-house “hotline” voicemail extension.
- ◆ Offer quarterly financial education sessions by a local broker.
- ◆ Continue to offer on-site visits twice per month.

Date Implemented:

April 1, 2005

Partners:

Internal:

*Benefits and payroll staff,
long-standing associates' feedback,
and system board subcommittees*

External:

*Alesco Investment Advisors,
Canandaigua Financial Group,
P&A Administrative Services,
and Nationwide Financial Group*

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Jennifer DeVault

Director, Associate Services

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United Health Services Hospitals, Inc., Johnson City

Registered Nurse Education Incentive Program

Description of Program/Initiative

To help combat the current and projected nursing shortage, United Health Services Hospitals (UHS) began an aggressive program to attract registered nurses (RN) by creating the RN Education Incentive Program. In this program, UHS uses a competitive process to select the best and brightest nursing students in the area. Those students selected into the program receive full tuition payment and a generous stipend for books for the achievement of an Associate's or Bachelor's degree in nursing. In return, for each year of tuition paid, students are required to work a year for UHS, with a minimum of a two-year commitment.

An important part of the RN Education Incentive Program is a requirement that participating students work at least per-diem for UHS while going to college. This requirement acclimates the students to the UHS culture and standards of performance and further develops their clinical experience, better preparing them to succeed upon graduation.

In 2003, the program was enhanced by the addition of shadowing, which allows students to spend time on a unit with an experienced RN to gain first-hand knowledge. The benefit of this program is that students make more informed choices about where they want to work when they graduate.

In 2005, the program was further enhanced by adding mentoring. This addition was the direct result of feedback provided by students. While this program allows the students to benefit from the knowledge and experience of current nurses, it also provides nurse mentors with credit toward their Clinical Ladder certification.

Significant Results

The program has been in existence for over ten years, with a significant increase in enrollment starting in 2005. To date, UHS has paid the education expenses and hired over 100 nursing students who might otherwise not have had the opportunity or the means to attend college. UHS currently has over 80 students enrolled in the RN Education Incentive Program.

Lessons Learned

- ◆ Demographic analysis of UHS's workforce indicates that the current nursing shortage will become more acute in the years to come. To meet the demand, UHS is establishing strong relationships with local schools and starting the recruitment of future nursing students in the pre-college years.
- ◆ A process of "continual improvement" is necessary to ensure the program is meeting the

Date Implemented:

The program started in the early 1990s and is reviewed and updated on an as-needed basis.

Partners:

Internal:

*Employment department,
nursing leadership, RN staff,
and unit assistants*

External:

*Colleges/universities in
New York and Pennsylvania*

Contact:

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Vassar Brothers Medical Center, Poughkeepsie

Bridge to Practice Program

Description of Program/Initiative

The Bridge to Practice Program is a five-week course designed to help prepare the new or inexperienced nurse to work in the acute care health care arena. It is also geared for registered nurses with less than one year of experience and for those who are returning to practice, who wish to refresh and update their skills. The course includes didactic and clinical practicums. Learning is self-directed and is facilitated by clinical faculty and preceptors in various specialty areas. Clinical rotations help increase the learner's exposure to different patient populations, as well as acquaint the learner with the various specialty units that he or she may encounter once orientation ends. The goals of the program are to increase retention of nurses during a time of workforce shortage, and to increase their clinical and professional confidence so that they can provide the best quality care to patients.

Significant Results

- ◆ Nursing recruitment increased. Since 2001, Vassar Brothers Medical Center has recruited 211 nurses.
- ◆ Nursing retention went from 20% to 83%.
- ◆ Vassar Brothers Medical Center has had a waiting list of new recruits over the last five years.
- ◆ The facility is able to select the best and brightest for the program.
- ◆ There has been increased nurse satisfaction during a time of workforce shortages.
- ◆ The hospital is able to anticipate and fill vacancies quickly.

Lessons Learned

- ◆ It is necessary to recruit enough preceptors, train preceptors, and partner with them.
- ◆ You must assist individuals in the steps for attaining licensure.
- ◆ Refine the interviewing criteria and selection process for both internal and external candidates.
- ◆ Start with a grant to get the program up and rolling.

Date Implemented:

July 2001

Partners:

Internal:

Staff development, nursing staff/preceptors, nurse recruiter, and nursing leadership staff

External:

Mount Saint Mary College, Service Employees International Union Local 1199 Workforce Retraining Grant, and a HANYS/Northern Metropolitan Hospital Association grant

Contact:

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Westfield Memorial Hospital, Westfield

Tuition Assistance Program

Description of Program/Initiative

This program assists full-time and part-time associates with costs while attending an accredited institution to enhance their professional development as well as the work environment. Another goal is to improve morale and retain associates within the health system.

Significant Results

- ◆ Two licensed practical nurses (LPNs) have become registered nurses.
- ◆ Two LPNs are currently in the process of obtaining their registered nurse degrees.
- ◆ One associate received an Associate's degree in Health Care Administration and is taking courses toward understanding quality assurance and statistical analysis.
- ◆ Other associates are taking health care-related courses.

Lessons Learned

Associates develop a greater sense of self-worth through achievement of personal and organizational goals. In addition, this initiative has improved relations between associates and the facility while creating a positive work environment and maintaining staff retention.

Date Implemented:
2003

Partners:
Internal:
*Saint Vincent Health System,
Erie, Pennsylvania*

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