In preparation for the 10th biennial Nursing Staff Bylaws Convention, more than 150 nurses from Vanderbilt University Medical Center convened on July 31 for the Nursing Bylaws Delegate Retreat.

The delegates are charged with communicating proposed bylaws amendments with their nursing colleagues and representing them during the Convention in November.

“What really impresses me about Vanderbilt is the ability to give a voice to everyone in nursing,” said Avni Cirpili, DNP, RN, NEA-BC, chief nursing officer at Vanderbilt Psychiatric Hospital, as he addressed the crowd at the half-day retreat. “At every level, there is an opportunity to participate in changes and innovation. A lot of other hospital systems don’t have this richness.”

During the half-day retreat, the group learned about the history and structure of the Nursing Staff Bylaws as well as the process for submitting and reviewing amendments. Most of the agenda was dedicated to reviewing two kinds of amendments: 1) editorial amendments, which are typically updates to terminology and titles, without changing meaning, and 2) substantive amendments, where the meaning or function of a given bylaw changes.

“We have had very thoughtful amendments proposed this year, and are grateful to the delegates for being so engaged. Shared governance is such an important part of Vanderbilt nursing, and these bylaws help us define those processes and the legacy we aspire to,” said Marilyn Dubree, MSN, RN, NE-BC, executive chief nursing officer.

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The delegates also reviewed Robert’s Rules of Order and viewed skits that simulated the proceedings in November. “Our delegates have been tasked with taking proposed amendments back to their colleagues so they can be informed about what has been proposed. We want them to share what we’re doing, get input and decide how to vote in November,” said Erin Tickle, MMHC, BSN, RN, director of Shared Governance.

The 2014 Bylaws Convention will address 15 editorial amendments and 16 substantive amendments. The substantive amendments covered the following topics:

- Director level participation in unit/clinic boards
- Revising and updating the composition of the Nursing Executive Board, Nursing Administrative Board, Medical Center Nursing Board, and Entity Nursing Leadership Boards
- Updating roles in categories of staff
- Clarifying the wording and process for reappointments and corrective action
- Updating composition of some of our councils

For additional information and bylaws resources visit www.VanderbiltSharedGovernance.com.

Shared Governance in Action

The VUH Nursing Staff Council just provided an annual update of their work and accomplishments for 2013-2014. Staff Council members were able to provide direct feedback on hot topics, including:

- Standard medication times
- Clinical Staff Leader (CSL) model
- Workflow redesign
- Clinical labs
- Patient transport

Co-chairs Amy Moore, RN3, BSN, EMT-IV, and Angela Mitchell, RN, BSN, said, “Our open, candid conversations with executive leadership is one that our council members are very proud of. Having the trust built to ask some of the hard questions is empowering.”
Staffing project management team convened July 24 to address critical nursing staffing needs in order to meet patient demand in Vanderbilt University Hospital (VUH).

“We’re acutely aware that we have not been able to meet all the needs for nurse staffing. We have heard the concerns, understand the need and are working quickly to alleviate the problem,” said Marilyn Dubree, MSN, RN, NE-BC, executive chief nursing officer.

“I know our nurses and the entire care team are working hard and want to thank them for their commitment to caring for patients.”

The Staffing team is led by Sabrina Downs, MSN, MBA, RN, NE-BC, director of VUMC Nursing Professional Practice and Magnet, and Jason Mathisen, administrative fellow in Hospital and Clinic Administration.

“We want nurses to know there is an effort to increase the staffing numbers to meet the patient care models. We have devoted resources to identifying the problems and implementing solutions,” said Robin Steaban, MSN, RN, chief nursing officer for Vanderbilt University Hospital and Clinics.

The effort is first focused on VUH because it is experiencing significant staffing challenges.

“We recognize that the outpatient areas and Children’s Hospital have specific need areas and we will be moving to address those as we are able to analyze the data,” Steaban said.

The Staffing team is considering short-term and long-term solutions related to daily staffing, recruitment, and retention. Vanderbilt has implemented bed closures when staffing is low, and the immediate goal is to keep beds open.

“Our priority is patient safety, and closing beds is a positive response to that,” Steaban said. “We’re having bed huddles every 12 hours and strategically deploying staff, including float nurses and travelers, in order to meet the need.”

One of the key actions in improving staffing was to adjust the staffing models for patient census; where the actual daily census exceeded the budget. Sixteen of 24 units qualified for this adjustment and have received additional nursing staff positions.

In the next 30 days, the goal is to fill known vacancies. A job fair in August resulted in 21 nurse hires, and 124 Nurse Residents started in July; 85 of those in VUH.

On Aug. 20, an incentive pay program began at VUH, giving staff the opportunity to schedule extra shifts on their home or partner units above current work hours and on-call hours. Nurses receive an additional $10 per hour, medical receptionists and care partners receive an additional $3 per hour, and paramedics receive an additional $5 per hour.

In the next 60 days and beyond, the goal is to stabilize the vacancy rate and create plans for long-term recruitment. Nursing leaders are rounding with nursing retention in mind and are working with Vanderbilt Human Resources to streamline the process for hiring new nurses.

“I know that nurses want to look to their left and right and see colleagues ready to care for patients,” Steaban said. “I recognize that our nurses are working hard, and I want them to understand we are trying to meet this need quickly.”

Octoberfest
Oct. 29-30
presented by Nursing Education and Professional Development in collaboration with The Education Event Planning Committee
Contact hours available
Click for full schedule and to register
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<td><strong>Care Team Communication</strong></td>
<td>Jason Mathisen, Kristy Kummerow</td>
<td>Perform time studies on current communication processes and identify a recommendation for new tool or device to be used by nursing and house staff.</td>
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<td><strong>Right Equipment, Right Time, Every Time</strong></td>
<td>Matt Mulvey, Karen Morlan</td>
<td>Close the missing equipment gap and implement “5S” organizational strategies by partnering with quality consultants in 7RW, 6N, 10T3, 4E and 4N.</td>
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