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Nursing	2015-201	7						
Status	Ref#	Goals	Pillar	Council		Leaders	Target Date	Complete
•	1.	NURSING STRATEGIC GOAL: Improve Medication Management Across the Continuum for safe care transition leading to reduced readmissions and improved population health	Quality	Quality & Safety Nursing		Joanne Reich	12/31/17	
Status	Ref#	Priority Initiatives				Leaders	Target Date	Complete
0	1.1.	Review literature for evidence based practices for safe care transitions through interdisciplinary medication mngt. Implement the plan in accordance with Organization's Mission, Vision and Magnet standards.			Joanne Reich; Mabel LaForgia	3/30/16	3/30/16	
Status	Ref#	Tactics		Start Date	As Of	Leaders	Target Date	Complete
<u> </u>	1.1.1.	Literature review completed		7/1/15	2/29/16	Mabel LaForgia	2/1/16	2/29/16
<u> </u>	1.1.2.	Present to Barnabas Health Nursing Leadership 1/		1/1/16	2/11/16	Mabel LaForgia; Joanne Reich	2/29/16	2/11/16
Status	Ref#	Priority Initiatives		Leaders	Target Date	Complete		
0	1.2.	Design and implement the high risk readmission assessment inclusive of the LACE tool and Pharmacy screening for Medical Surgical patients.			Mabel LaForgia; Sandy Liu	12/31/15	9/28/15	
Status	Ref#	Tactics		Start Date	As Of	Leaders	Target Date	Complete
0	1.2.1.	Develop LACE Tool and Pharmacy Screening Form for H Assessment	ligh Risk Readmission	6/1/15	9/28/15	Therese Boruta; Mabel LaForgia; Ingrid Cardenas; Sandy Liu	9/28/15	9/28/15
0	1.2.2.	Build High Risk for Readmission Assessment in Soarian		6/1/15	9/1/15	Therese Boruta; Mabel LaForgia; Sandy Liu	9/1/15	9/1/15
•	1.2.3.	Professional Practice Council Review and Approval		6/1/15	8/5/15	Claudia Garzon-Rivera; Therese Boruta; Mabel LaForgia; Sandy Liu	8/5/15	8/5/15
0	1.2.4.	P & T Committee Review and Approval		6/1/15	9/24/15	Sandy Liu	9/30/15	9/24/15
<u> </u>	1.2.5.	Implement Training and go live		6/1/15	9/28/15	Therese Boruta; Mabel LaForgia	9/28/15	9/28/15
Status	Ref#	Priority Initiatives				Leaders	Target Date	Complete
•	1.3.	· ·	Review the medication reconciliation process in the outpatient areas and inititate a reconciliation process to empower patients and their caregivers for successful medication management.		Joannie OLeary	12/1/17	6/1/16	
Status	Ref#	Tactics		Start Date	As Of	Leaders	Target Date	Complete
0	1.3.1.	Outpatient areas to identify high risk patients for medicating Diabetes patients in Center for Comprehensive Care, Info		1/1/16	6/1/16	Joannie OLeary	12/1/17	6/1/16
Status	Ref#	Priority Initiatives				Leaders	Target Date	Complete

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Nursing	2015-201	7							
0	1.4.	Implement outreach education to sub-acute facilities on medication management topics Nancy Frederic; Joanne Re						12/1/17	
Status	Ref#	Tactics		Start Date	As Of	Leaders		Target Date	Complete
O	1.4.1.	Identify sub acute facility for partnership		1/1/16	3/23/16	Joanne Reich		12/1/16	3/23/16
O	1.4.2.	Meet with Nursing Leadership of sub acute facility for join	nt discussion and agreement	1/1/16	3/23/16	Joanne Reich		3/23/16	3/23/16
O	1.4.3.	Conduct educational session with nursing staff at sub act	ute facility, CEUs provided	3/1/16	9/9/16	Mabel LaForgia; Joann	e Reich	9/9/16	9/9/16
0	1.4.4.	Repeat Educational Fair in 2017		1/1/17		Michele Lopez; Joanne	Reich	11/30/17	
	Note						Po	sted By	Posted Date
	Michele Lopez and Joanne Reich will schedule a meeting with Nursing Leadership at Alaris Hamilton Park to discuss topics for the 2017 nursing staff.					'Educational Fair for	Joa	nne Reich	5/2/17
Status	Ref#	Priority Initiatives			Leaders		Target Date	Complete	
•	1.5.	Communicate the plan, provide updates at Nursing Leade	ership and note progress.	Mabel LaForgia; Joanne Reich; Sandy Liu			12/1/17		
Status	Ref#	Tactics		Start Date As Of		Leaders		Target Date	Complete
0	1.5.1.	Present Nursing Strategic Plan progess		1/1/16	1/12/17	Joanne Reich		12/1/17	1/12/17
0	1.5.2.	Pharmacy notes monthly LACE consults completed		9/1/16	12/31/16	Sandy Liu		12/31/16	12/31/16
0	1.5.3.	Care Continuum conducting bedside visits of LACE high risk readmission patients, reported monthly		1/1/16	12/31/16	Ingrid Cardenas		12/31/16	12/31/16
•	1.5.4.	Nursing Quality & Safety Council audits Medication Management for completion of home medications list monthly 1/31/16		Claudia Garzon-Rivera		12/31/16	12/31/16		
Status	Ref#	Goals	Pillar	Council		Leaders		Target Date	Complete
•	2.	NURSING STRATEGIC GOAL: Introduce Motivational Interviewing	Quality	Professional Pra	actice Nursing	Joanne Reich		12/31/17	
Status	Ref#	Priority Initiatives		Leaders				Target Date	Complete
•	2.1.	Increase nurses' understanding and increase use of motivational interviewing (MI) techniques across the continuum of care; initiate a pilot introduction of MI.				Ebony Samuel; Joanne	Reich	4/1/16	12/30/16
Status	Ref#	Tactics		Start Date	As Of	Leaders		Target Date	Complete
0	2.1.1.	Review resources and identify an MI expert to provide int	troduction to JCMC clinical staff	1/1/16	4/1/16	Ebony Samuel; Joanne	Reich	4/1/16	4/1/16
•	2.1.2.	Engaged MI Expert, Annie Fahy RN, LCSW, MINT (Motiv Trainers)	vational Interviewing Network of	1/1/16	3/1/16	Margaret Ames; Rita Si Joanne Reich	mith;	3/1/16	3/1/16
Status	Ref#	Priority Initiatives				Leaders		Target Date	Complete

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Nursing	2015-201	7					
•	2.2.	Identify pilot unit, patient population for introduction of MI following training			Maria Adams; Joanne Reich; Erin Salmond	6/1/16	6/1/16
Status	Ref#	Tactics	Start Date	As Of	Leaders	Target Date	Complete
•	2.2.1.	Identify unit with patients with diabetes and CHF diagnoses and consistent staff both nursing and interdisciplinary	1/1/16	6/1/16	Erin Salmond; Maria Adams; Ingrid Cardenas	6/1/16	6/1/16
•	2.2.2.	Identify nurses and interdisciplinary clinical staff	1/1/16	6/1/16	Erin Salmond; Maria Adams; Maria Devivo; Ingrid Cardenas; Joanne Reich	6/1/16	6/1/16
•	2.2.3.	Conduct two-day training workshop and one-day advanced training for pilot unit staff	3/1/16	6/17/16	Joanne Reich; Margaret Ames; Erin Salmond	6/17/16	6/17/16
Status	Ref#	Priority Initiatives			Leaders	Target Date	Complete
•	2.3.	Identify metrics to measure impact of MI use on targeted patient population readmission rates. Conduct ongoing meetings to monitor progess.		Joanne Reich	6/1/17		
Status	Ref#	Tactics	Start Date	As Of	Leaders	Target Date	Complete
•	2.3.1.	Implement Observation and return demonstration MI on the pilot unit - 5 East	6/1/16	9/1/16	TBD; Erin Salmond; Joanne Reich; April Bacunawa	9/1/16	9/1/16
0	2.3.2.	Readmisisons for 5 East MI patients who also received post discharge phone call with MI techniques will be tracked to identify link between MI use and readmission rates.	3/1/17		Erin Salmond; Ingrid Cardenas; April Bacunawa	12/1/17	
Status	Ref#	Priority Initiatives			Leaders	Target Date	Complete
•	2.4.	Identify implementation tool for MI implemenation			Erin Salmond; Ingrid Cardenas; Joanne Reich; April Bacunawa	12/1/16	12/1/16
Status	Ref#	Tactics	Start Date	As Of	Leaders	Target Date	Complete
0	2.4.1.	Review AMI and CHF TeachBack Tools for possible modification	4/1/16	10/1/16	Ingrid Cardenas; April Bacunawa	10/1/16	10/1/16
0	2.4.2.	Provide in-unit review/in services on Elicit - Provide- Elicit Tool	9/1/16	10/1/16	Joanne Reich; April Bacunawa	10/1/16	10/1/16
•	2.4.3.	Implement process for demonstration of MI and staff to provide return demonstrations	10/1/16	12/1/16	Ingrid Cardenas; Joanne Reich; April Bacunawa	12/1/16	12/1/16
Status	Ref#	Priority Initiatives			Leaders	Target Date	Complete
•	2.5.	Follow-up post training call with MI trainer, Annie Fahy for reinforcement. Identify 2017 e unit staff	ducational reinfor	cement for pilot	Joanne Reich; April Bacunawa	6/1/17	
Status	Ref#	Tactics	Start Date	As Of	Leaders	Target Date	Complete

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Nursing 2015-2017 Conduct follow-up call with Annie Fahy on the 5 East Unit to have staff participate in the Erin Salmond; Joanne Reich; 2.5.1. 10/1/16 12/14/16 12/1/16 12/14/16 April Bacunawa Maria Adams; Ebony Samuel; \bigcirc 2.5.2. Plan 2017 educational review for 5 East nurses 4/1/17 6/1/17 April Bacunawa Ref# Pillar **Status** Goals Council Leaders **Target Date** Complete NURSING STRATEGIC GOAL: Cross Continuum Care Joanne Reich 3. Quality Professional Practice Nursing 12/31/17 Pathway Ref# **Priority Initiatives** Leaders **Target Date** Complete **Status** Connect the medication management plan across the continuum via cross continuum care pathway with identified post 3.1. Joanne Reich; Nancy Frederic 12/31/17 acute care facilities to build the bridge fro safe care transitions **Tactics Status** Ref# **Start Date** As Of Leaders **Target Date** Complete Identify key stakeholders of sub acute facilities to formulate team focused strategies to 3.1.1. 3/1/16 7/1/16 Nancy Frederic 7/1/16 7/1/16 optimize patient care and decrease surgical site infections. Meet with nursing leaders of sub acute facility to discuss partnership on medication 3.1.2. 3/23/16 1/1/16 3/23/16 Joanne Reich 6/1/16 education, cross continuum pathways. Ref# **Priority Initiatives Target Date** Complete **Status** Leaders Engage key stakeholders and formulate a team focused strategies to optimize patient care and decrease sugical site 3.2. Nancy Frederic 9/1/16 infections, and improve patient outcomes. **Status** Ref# **Tactics Start Date** As Of Leaders **Target Date** Complete Nancy Frederic to attend monthly post acute care council/BPCI meetings and meetings 3.2.1. 1/1/16 12/30/16 Nancy Frederic 12/1/17 12/30/16 with sub acute care facilities Conduct a learning needs assessment of sub acute facility's nursing staff in area of 3.2.2. 1/1/16 5/31/16 Joanne Reich 6/1/16 5/31/16 medication management of diabetic patients. **Status** Ref# **Priority Initiatives** Leaders **Target Date** Complete 3.3. Provide eduction to sub acute care facility's nursing staff to support transiiton of care and improved patient outcomes Mabel LaForgia; Joanne Reich 9/9/17 **Status** Ref# **Tactics Start Date** As Of Leaders **Target Date** Complete 9/9/16 3.3.1. Plan and implement Health Education at Alaris Hamilton Park. 1/1/16 9/9/16 TBD: Joanne Reich 9/9/17 **Status** Ref# **Priority Initiatives** Leaders **Target Date** Complete \bigcirc 3.4. Implement and measure effectiveness of guidelines and pathways Mabel LaForgia; Nancy Frederic 12/1/17 **Start Date** As Of **Status** Ref# **Tactics** Leaders **Target Date** Complete

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Nursing	2015-201	7						
0	3.4.1.	Monitor monthly 30 day readmission rates for primary tot primary hip replacement patients	1/1/16		TBD	12/1/16		
0	3.4.2.	Monitor surgical site infections for primary total knee replacement and primary hip replacement patients		1/1/16		TBD	12/1/16	
0	3.4.3.	Monitor length of stay (LOS)for TKR and THR primary pa	atients.	1/1/16		TBD	12/1/16	
Status	Ref#	Goals	Pillar	Council		Leaders	Target Date	Complete
•	4.			Engagement & S Nursing	Satisfaction	Margaret Ames	12/31/17	
Status	Ref#	Priority Initiatives			Leaders	Target Date	Complete	
•	4.1.	Decrease caregiver stress by providing a formal setting for emotional support for a healthcare provider when exposed to a critical incident in the acute care hospital			Claudia Garzon-Rivera	12/31/17		
Status	Ref#	Tactics		Start Date	As Of	Leaders	Target Date	Complete
•	4.1.1.	Develop Code Lavendar policy and process for nurses		1/1/16	11/18/16	Claudia Garzon-Rivera; Erin Salmond; Mabel LaForgia	12/1/16	11/18/16
•	4.1.2.	Establish response team for Code Lavendar		1/1/16	11/18/16	Claudia Garzon-Rivera; Margaret Ames; Mabel LaForgia	12/1/16	11/18/16
•	4.1.3.	Identify internal notification process for Code Lavendar		1/1/16	11/18/16	Claudia Garzon-Rivera; Margaret Ames	12/1/16	11/18/16
Status	Ref#	Priority Initiatives				Leaders	Target Date	Complete
•	4.2.	Develop and sustain a nursing workforce equipped to meet the challenges of health care delivery by increasing the number of nurses with baccalaureate or graduate degree.				Margaret Ames; Joanne Reich	12/1/16	12/1/16
Status	Ref#	Tactics		Start Date	As Of	Leaders	Target Date	Complete
0	4.2.1.	All newly hired nurse manager and leaders will have a BSN degree or higher		1/1/15	12/31/16	Margaret Ames; Joanne Reich	12/31/16	12/31/16
•	4.2.2.	All external candidates must hold a BSN or higher to be considered for employment. Candidates without a BSN, the offer is contingent upon completion of a BSN within time frame noted.		1/1/15	12/31/16	Margaret Ames; Joanne Reich	12/31/16	12/31/16
0	4.2.3.	Provide opportunities of support to obtain the BSN or hig	her degree	1/1/15	12/31/16	Margaret Ames; Joanne Reich	12/31/16	12/31/16
0	4.2.4.	Increase number of academic affiliations for Nursing Pro	grams	1/1/15	12/31/16	Ebony Samuel; Joanne Reich	12/31/16	12/31/16
0	4.2.5.	Increase number of academcic affiliations for BSN and M	ISN level rotations	1/1/15	12/31/16	Ebony Samuel; Joanne Reich	12/31/16	12/31/16
Status	Ref#	Priority Initiatives				Leaders	Target Date	Complete

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Nursing	2015-201	7				neu		
0	4.3.	Develop and sustain a nursing workforce equipped to meet the challenges of health care delivery by increasing the proportion of nurses with national certification.			Joanne Reich	12/1/16	12/1/16	
Status	Ref#	Tactics		Start Date	As Of	Leaders	Target Date	Complete
•	4.3.1.	Provide support opportunities such as review courses in various specialities. Provide Medical Surgical review, Oncology review (ONS), perioperative review (CNOR) and onsite neonatal review (NCC).		1/1/15	12/31/16	Margaret Ames; Rita Smith; Ebony Samuel	12/31/16	12/31/16
•	4.3.2.	Continue national certification incentives such as ANCC Success Pays, ONCB Retest for Success, NVRN review and exam		1/1/15	12/31/16	Margaret Ames; Ebony Samuel; Joanne Reich	12/31/16	12/31/16
<u> </u>	4.3.3.	Develop Nursing National Certification Policy		1/1/15	6/23/16	Joanne Reich	12/1/16	6/23/16
Status	Ref#	Goals Pillar Council			Leaders	Target Date	Complete	
•	5.	NURSING STRATEGIC GOAL: Cross Continuum Shared Governance Quality Cross Continuum Nursi Shared Governance			Mabel LaForgia	12/31/17		
Status	Ref#	Priority Initiatives			Leaders	Target Date	Complete	
0	5.1.	Introduce cross continuum shared governance by collaborating with key community partners in care			Mabel LaForgia	12/31/17		
Status	Ref#	Tactics		Start Date	As Of	Leaders	Target Date	Complete
•	5.1.1.	Invite key stakeholders to JCMC committees such as to the Orthopedic Institute (TOI) steering committee, Falls Interdisciplinary and Stroke Committee		1/1/15	12/31/16	Mabel LaForgia	12/31/16	12/31/16
0	5.1.2.	Discharge TOI patients to home increase above 2015 rate through increased partnership with VNA.		1/1/15	12/31/16	Nancy Frederic	12/31/16	12/31/16
•	5.1.3.	Review care coordination with VNA, wound care management, pain management, and physical therapy plan.		1/1/15	12/31/16	Nancy Frederic	12/31/16	12/31/16
•	5.1.4.	Institute weekly TOI interdisciplinary discharge rounds in addition to daily rounds, with surgeons, case management, nursing, physical therapy, and social work.		1/1/15	12/31/16	Nancy Frederic	12/31/16	12/31/16
0	5.1.5.	Implement process for guaranteed TOI patient discharged home receives services by VNA RN and phsyical therapist within 24 hours; initial visit.		1/1/16		Nancy Frederic	12/1/17	
Status	Ref#	Priority Initiatives				Leaders	Target Date	Complete
0	5.2.	Director of Ambulatory Nursing to initiate Cross Continuo	m shared governance council.			Mabel LaForgia	12/1/17	
Status	Ref#	Tactics		Start Date	As Of	Leaders	Target Date	Complete
<u> </u>	5.2.1.	Identify goals for improved care coordinatin from in patie	nt to off-site locations.	1/1/16	12/31/16	Mabel LaForgia	12/31/17	12/31/16