From the CNO

Dear Colleagues,

Welcome to the 2019 fall issue of Carolina Nursing News! As always, there is a lot of great information in this edition of CNN, with updates from our shared governance councils and some great information on ongoing certification programs that we are offering. Many thanks to our colleagues from Nursing Practice & Professional Development who have arranged several opportunities for our staff to take certification tests with no “up front” cost to our employees. If you have not done so yet, I hope you will get a chance to take advantage of these opportunities!

I would like to point out the important article in this issue outlining the work being done on our workplace safety initiatives, led by the members of our Workplace Safety Committee. This group, in place since 2017, is Co-Chaired by Dr. Barbara-Ann Bybel, Director for Psychiatry Services both at the Medical Center and at our WakeBrook Campus. I am grateful to this team for tackling some key topics including creation of a website to collate reference information, Aggression Screening Tool, Chart Flags, Education, Policies, Reporting, Signage, and Management of Disruptive Patient Guidelines. This work fits in nicely with one of our 3 year goals to ensure we provide a safe environment in which you practice.

We recently held our annual retreat to set goals with the Nursing Directors, Chairs and Co-chairs of the shared governance councils, members of our Performance Improvement and Nursing Quality teams, and several other leaders. We discussed both short and long term goals for the Nursing Division, and I wanted to take this opportunity to reiterate the Division of Nursing 3-year aims as I think they are important ones. These are overarching goals that we will continue to use to develop our annual goals for the next several years, and we spent a lot of time discussing these and why they are central to our success.

They are:

- Continue to drive patient harm to zero
- Attract and retain the best nursing talent
- Develop strong partnerships with UNC School of Nursing
- Obtain Magnet® redesignation (FY20)
- Deliver Carolina Care to every patient and family member
- Be excellent financial stewards
- Provide a safe environment for patients and staff in which to practice

Cathy Madigan
DNP, RN, NEA-BC
Senior Vice President and Chief Nursing Officer
Division of Nursing

The Nursing Directors will be working with the Nurse Managers and you to develop specific service line and unit goals based on these, and as we continue to refine and implement these goals, I will share updates with you. I am always happy to hear your feedback and input on the direction we have set for the Division of Nursing!

Thank you for the outstanding work that you do and the outcomes that you achieve for our patients every day. I am very proud of our team!

Wishing you a happy, healthy fall,
The staff at UNC Hospitals Hillsborough Campus (UNC-HBH) continues in their commitment to improving patient safety. As of June, the staff on all inpatient units and the Emergency Department (ED) have been participating in mock code practice sessions. The exercises occur on all shifts and have multi-disciplinary participation.

The goals of the mock codes are to allow staff to practice their skills, foster team cohesiveness, and build efficiency in a safe and controlled environment. Research shows that routine practice of these skills increases confidence, competency, and, ultimately, enhances patient safety.

With gratitude to the UNC Health Care Advanced Cardiac Life Support (ACLS) Programs, UNC-HBH has the use of a full-size adult, high-fidelity manikin (affectionately referred to as “Bob”) who travels to different units. The unit selected for participation is determined based on patient census and acuity.

Once the unit is selected, the unit manager, Respiratory Therapy manager, and physicians are notified. At the scheduled time, Bob, his simulated monitor, and mock code drugs are assembled in an empty inpatient room. In addition, the room computer or a Workstation on Wheels is pre-populated with a patient profile in the EPIC playground which allows for code documentation.

After a brief staff orientation to Bob and his equipment, staff leave the room and the designated “Primary Nurse” receives Bob’s initial scenario and assessment information. The scenario declines into a code situation and the primary nurse uses the unit-only, broadcast feature of Vocera (the hands-free, internal communication device) to call the code.

All available staff, respiratory therapists, and participating physicians respond to the code. UNC-HBH Respiratory Therapy Manager Matt Csatary, BSRT, RRT, has developed a staff position diagram that is utilized for the mock codes. The diagram illustrates suggested positions for all members of the code team. In alignment with the TeamSTEPPS model, concepts such as call-out and check-back are encouraged.

A debrief follows each mock code. During the debrief team members discuss what went well and what could be improved. All codes are conducted following the American Heart Association Basic Life Support or ACLS guidelines. The mock code scenarios can be adapted to become progressively more challenging based on staff experience or area of expertise. For example, Bob is intubated in some scenarios so respiratory therapists can practice that skill in a simulated stressful situation.

With continued practice, all UNC-HBH staff have the opportunity to increase their confidence and competence in responding to code situations, work more cohesively as an interdisciplinary team, and continue to improve patient safety.

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- Danielle Mclean was promoted to Clinical Nurse IV
- Celebrated 2 years without a CLABSI and 1 year without a CAUTI
- A mock survey was performed recently by Joint Commission Resources in preparation for the upcoming accreditation visit for the Total Knee and Hip Replacement Program on the Hillsborough Campus. Work will continue this year to standardize documentation and complete several quality improvement projects to
ensure successful certification later in FY20.

CCU
- Liz Gardner was promoted to Clinical Nurse III.

Emergency Department
- Hillsborough ED is excited to announce that we will be expanding the ED this fall with 5 additional patient rooms bringing the total to 15 beds. The ED was designed to handle approximately 12,500 patients a year. Since opening 4 years ago, surges in volume have occurred. In FY19, almost 25,000 patients were seen which double the expected volume. This increased capacity will better support the surrounding community and UNC Health Care as a whole.
Workplace Safety

History
The Workplace Safety Committee formed in February 2018 to address both an increasing frequency of workplace violence reported to Occupational Health and based upon the alarming answers to workplace violence questions in the Patient Safety Culture survey administered in November 2017. Approximately 1,000 survey participants reported that they had experienced physical violence from patients and approximately 3,000 had experienced verbal violence from patients or visitors in the preceding 3 months. The committee was formally chartered in May 2018 with a scope limited to workplace violence from patients and/or visitors directed at hospital staff and faculty.

Committee Structure
Dr. Barbara-Ann Bybel, Director, Psychiatry Services and Paul Perryman, Manager, 4NSH co-chair the committee. The committee membership is multi-disciplinary with approximately 20 members and meets monthly for 1 hour. There are 8 different workgroups focused on the following areas; Website, Aggression Screening Tool, Chart Flags, Education, Policy, Reporting, Signage, and Guidelines. All members are expected to contribute to at least one workgroup.

Accomplishments
• A Workplace Safety website has been created with quick links to resources and monthly data updates on the frequency and locations of workplace violence. Resources include links to the relevant policies, guidelines and support services.
• A new Management of Disruptive Patients, Family Members and Visitors Policy now exists. This policy covers definitions, reporting expectations, how to document and the organizational response to workplace violence events.
• Support for pressing charges is now demonstrated with paid civil leave time if court appearances are required. The Civil Leave policy was revised to clearly describe this change.
• The Patient Rights and Responsibilities Policy was revised to include the patient’s responsibility to treat providers and staff with consideration and respect. This change was a Legal Department priority. The Workplace Safety committee provided feedback on drafts.
• Guidelines for the management of disruptive in-patients were developed. Guidelines for the management of disruptive out-patients were developed prior to Workplace Safety work. These complimentary guidelines include recommendations that can be used when faced with difficult and unusual patient care situations.
• A new Employee Incident Report was created in SAFE that includes fields specific to workplace violence events. Look for the Employee Incident Report icon on the SAFE icon page. It’s the last one and appears as a red folder. This new electronic report enables workplace violence data analysis that is used for NDNQI reporting, is shared monthly on the Workplace Safety website and reviewed by the Workplace Safety Committee quarterly, and is regularly reported to hospital leadership.
• Offers of emotional support resources are sent via email following SAFE reports of workplace violence.
• **Crisis Prevention Institute (CPI) training resources have increased.** CPI training teaches de-escalation and self-protection tools and techniques. Staff in high and moderate risk areas are prioritized for training. If you are interested in learning about training or attending training please contact your nurse manager.

• **Personal Nursing Assistants will now carry whistles and will use the whistle to signal for help when threatened by a patient.** If you hear a whistle, it is an urgent call for help.

**In Progress**

• **Public and employee signs to increase awareness of our zero-tolerance for workplace violence and to encourage reporting have been approved for use and are in the design phase.**

• **The Chart Advisory workgroup is working with the ISD team to design an obvious flag and chart advisory in Epic that will alert staff anywhere in the UNC Health Care System upon chart opening to be vigilant if the patient has a known history of violence.**

• **The Patient Aggression Screening Tool workgroup is in the early stages of evaluating validated tools for consideration of adding to Epic. This tool might be part of an early patient assessment.**

• **The Workplace Safety committee members are dedicated to continuing this work and seek resources for staff safety and the prevention of workplace violence.**

If you have questions or would like to contribute and participate as a member of the Workplace Safety Committee please contact Barbara-Ann Bybel: Barbara-Ann.Bybel@unchealth.unc.edu or Paul Perryman: Paul.Perryman@unchealth.unc.edu.
The memory of Mrs. Tayitta Hadar and her passion for continued education is honored every spring when interprofessional staff members of the Intermediate Surgical Care Unit (ISCU) nominate their coworkers for the Tayitta Hadar ISCU Interprofessional Award.

The award, set up by her family, Dr. Eldad and Janet Hadar, and Talma and Ethan Addes, is designed to recognize staff members who provide outstanding care with a focus on the patient while partnering with families in the ISCU setting. The recipient of this award receives a $2000 scholarship to use for continuing education, professional conferences and/or tuition and fees related to formal advanced education.

Nominations must include specific examples of how the person excels or serves as a role model for 3 of the 5 behaviors:

- Exemplifies the delivery of Carolina Care to patients and families in his/her daily practice
- Provides culturally sensitive care to diverse groups of patients
- Seeks opportunities to build strong relationships with patient and families and assists others in meeting and exceeding family needs
- Collaborates with the interprofessional team; supports and promotes collaborative relationships with colleagues, coworkers, patients, and families
- Provides outstanding care during crises and/or end of life care

Mrs. Tayitta Hadar spent the last weeks of her life in the Intermediate Surgical Care Unit at the UNC Hospitals. It was her wish to support continued educational opportunities and the Tayitta Hadar Fund reflects the family’s recognition of “the impressive care and personal attention she received in the ISCU. The family was continually comforted and inspired by the consistency of care and concern provided even as normal routine resulted in shift and staff changes.”

The 2019 Tayitta Hadar ISCU Interprofessional Award Ceremony was held September 12th.

This year’s recipients are Nicole Frisk, BSN, RN, CCRN and Kathryn Davis, MOT, OTR/L, CBIS, Therapy Services.
Preceptor Awards

We would like to recognize those individuals who have demonstrated excellence in precepting. Nurse Managers, in conjunction with the Nursing Education Clinician Specialist select candidates for this award.

The following criteria are used in selecting these preceptors:

1. A primary preceptor for at least two people in the past year or per Nurse Manager and Nurse Educator recommendation.
2. Exemplifies excellence in precepting:
   a. As evidenced by written or verbal evaluation.
   b. Works collaboratively with the Nurse Manager, the Nurse Educator, and the preceptee.
   c. Organizes meaningful learning experiences for the preceptee.
   d. Advocates for the preceptee in learning experiences.
   e. Completes required paperwork in a timely manner.
3. Displays professionalism.
4. Commitment to continue in the precepting role.
5. Recommended: Attendance at the Preceptor Development Class

Congratulations to the Preceptor Award Honorees!

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<tr>
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<td>Lindsey Cournoyer, RN-BC</td>
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Submitted by
Cathy Gage
MHA, BSN, RN-BC
Professional Development Coordinator
Nursing Practice & Professional Development
Diversity Council

Over the course of the summer, the Nursing Diversity Council continued to strongly support the 2019 Division of Nursing Goal - providing a respectful, culturally sensitive environment for our diverse patient population.

The Council has promoted two LMS modules to assist in education - Cultural Competence: In Accordance with ACA, 1557; Office of Civil Rights Final Rule (LMS course code: HCSDIVINCC) and, Providing Inclusive and Welcoming Care for Lesbian, Gay, Bisexual, and Transgender People (LMS Course Code: HCSDEIWC).

The Council is pleased to report that through the LMS Modules, this important information has reached thousands of colleagues!

During council meetings, members viewed educational videos that focused on diversity, equity, and inclusion with issues that often affect healthcare and, after the showings, participated in discussions. Offerings included: “Housing is Health Care” by the University of Vermont Medical Center, (https://www.youtube.com/watch?v=C0y8RpXfoOAA) describes an approach in Vermont that has led to positive statistical changes in homelessness rates and healthcare costs. “The Redneck Muslim” by PBS, (https://www.pbs.org/video/redneck-muslim-kdqug/) describes a Muslim hospital chaplain with strong Southern roots who faces the challenge of white supremacy. These videos offered different perspectives and insights regarding issues surrounding diversity, equity, and inclusion with issues that often affect healthcare.

The Research and Education Subcommittee is organizing the second “Diversity Council Reading and Discussion Series” session. The session will take place on Thursday, September 19 from 12:00 PM-1:00 PM and will feature a discussion of the video "In Sickness and In Wealth" from the documentary series "Unnatural Causes" https://unc.akanopy.com/video/sickness-and-wealth This session will build on the first session (a discussion of the book The Health Gap by Michael Marmot) and will take a deeper dive into understanding the social determinants of health and how these understandings can be translated into nursing practice. A WebEx option will be offered and participants will receive 1 CNE.

Throughout the fall, Council members will collect donations in support of Jessica’s Cupboards, a UNC School of Nursing sponsored project that helps fight food insecurity on UNC at Capel Hill campus. Personal care supplies are collected in addition to food items. The Council is very grateful to all of those who contributed to this success of this event by donating food and personal hygiene items.

Submitted by
Kim Jacobs
BSN, RN, RNC-NIC
Clinical Nurse IV
Newborn Critical Care Center
Chair, Diversity Council

Diversity Council members
Fall is right around the corner, soon to usher in gloriously cool weather, shorter days, autumn leaves, boots and scarves, and pumpkin-spice everything! For many, the changing season stirs emotion by bringing a return to school. For nurses who are continuing their education, returning to the classroom can be a time of anticipation, new challenges, and exploration.

Did you know that the Nursing Research Council (NRC) is here to support and advise nurses navigating the research process by providing resources? The NRC shared governance site provides links that focus on the research process, evidence-based nursing practice, and other research-related topics.

To facilitate clinical nurses’ research endeavors, QI, or evidence-based practice projects, the NRC is happy to provide guidance about where to begin, feedback about proposal development, and insights about methods and procedures.

The NRC can also assist researchers in identifying stakeholders, optimizing recruitment strategies, and facilitating data collection. To take advantage of the benefits of membership, contact your service-line representative for more information about how the NRC can help you achieve your research goals.

If you are a student with a research study or quality improvement project in your future, a staff member with a clinical question, or someone who has an idea for a research project but no idea where to start, please consider attending a “Nursing Quality and Research Salon” session [“salon” as in, “a meeting place for an exchange of ideas”], hosted by UNCH’s Nurse Scientists, Drs. Nancy Havill and Cheryl Smith-Miller.

The salon is open to nursing students who are interested in doing research and are seeking advice and input. This is a safe space for brainstorming and information gathering on how to formulate and get started with your research study.

See the Nursing Research SharePoint site for upcoming dates – grab a pumpkin spice latte and join the conversation!
As the new school year arrives, the Professional Development Council (PDC) is introducing initiatives to aid employees interested in pursuing degrees at all levels. The Heart & Vascular Professional Development Committee held a Back-to-School event on September 26. It was for anyone who wants to further their education. Multiple representatives from colleges and universities, as well as personnel from Human Resources, were in attendance to answer questions and provide guidance. Heart & Vascular PDC members discussed the steps for going back to school, provided instruction on filling out the tuition reimbursement/waiver paperwork, and spoke about their experiences in returning to academia. The event was well attended and plans are to hold it again in 2020. Anyone with questions about this program may email Maeve.Cohen@unchealth.unc.edu

Within the hospital, effective development of the next generation of nurses and nurse leaders is vital to the growth of the profession. To that end, Ashley Kellish, DNP, RN, CCNS presented on the topic, “Mentoring for Development: Keys to Success.” According to Kellish, “Mentoring begins with recognizing one's strengths and weaknesses prior to entering into a mentoring relationship, developing strategies and progress assessment, and using evidence-based resources to guide instructors.” Staff interested in taking on the role of a mentor should seek out future offerings from this wonderful speaker.
PDC Back-to-School Event Photos
Nursing Professional Advancement System Promotions

The Nursing Professional Advancement Committee is pleased to announce the following:

May 2019 through July 2019 CN III Advancements

- Anthony Cappello BSN, RN, CCRN: SICU/Surgery Services
- Katherine Williams BSN, RN, RN-BC: 6 Bedtower/Medicine Services
- Amy Burns BSN, RN, TCRN: UNC ED/Emergency Services
- Lindsay Barnette MSN, RN, RN-BC: Oncology Clinic/Outpatient Services
- Megan McBride BSN, RN, MNN: 5 Womens/Womens’ Services
- Brittany Hawkins BSN, RN, RN-BC: 5 Anderson/Heart & Vascular Services
- Erin Bluschke BSN, RN, CCRN: PICU/Children’s Services
- Karen Ellis BSN, RN, RN-BC: 7NSH/Surgery Services
- Jennifer Huffman MBA, BSN, RN, PCCN: 3AND/ICCU/Heart & Vascular Services
- Kristin Laheta BSN, RN, CPN: NC State Park Scholars Children/Outpatient
- Liz Collins BSN, RN, CPHON: 5 Childrens/Children’s Services
- Elizabeth Gardner BSN, RN, CCRN: Hillsborough ICU/HBH Campus
- Emily Drazkowski RN, CCRN: SICU/Surgery Services

May 2019 through July 2019 CN IV Advancements

- Josh Crump BSN, RN, PCCN: CTICU/Heart & Vascular Services
- Sarah Peters BSN, RN, CCRN: SICU/Surgery Services
- Sarah Lykens BSN, RN, PCCN: MPCU/Medicine Services
- Elizabeth Bullard BSN, RN, BTMCN: Radiation Oncology/Outpatient Services
- Sarah Al-Najjar BSN, RN, PCCN: ISCU/Surgery Services
- Jennifer Ragan BSN, RN, CPN: Children’s Specialty Clinic/Outpatient Services
- Lisa Edwards BSN, RN, CNOR: OR/Peri-Operative Services
- Amanda Chavis BSN, RN, NCSN, PMHN-BC: 4NSH/Psychiatry Services
- Joy Widman BSN, RN, CEN: UNC ED/Emergency Services

Congratulations!

Are you interested in nursing professional advancement but are unsure about what is required, where to begin, or just have questions about the process? Here are some resources for you:

- Talk with your manager, CNIIIs and CNIVs on your unit!
- NPAS Website: [https://collab.unchealthcare.org/sites/NPPD/NPAS/SitePages/Home.aspx](https://collab.unchealthcare.org/sites/NPPD/NPAS/SitePages/Home.aspx)
- Departments (left side) à Nursing Intranet (right column) à Nursing Excellence (left side) à NPAS (Clinical Ladder)
- Application forms, instructions, sample portfolio, NPAS Committee contact information and other resources are located on the website.
- Portfolio Class: Sign up in LMS: UNCHNPPDPORTDEV
Med/Surg Certification Review Course

Sponsored by NPPD

Interested in taking the RN-BC (Medical-Surgical) or CMSRN Certification Exam but feel like you need a review?

Talk with your manager about signing up for the review course!

You must attend all 4 sessions to obtain CE credit.

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**Fall Course (12pm – 4pm)**

- Thursday, September 26th
- Wednesday, October 9th
- Tuesday, October 22nd
- Monday, November 4th

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Questions? Contact Sandy Givens (Sandra.Givens@unchealth.unc.edu)

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Other resources to become certified

- Free online Certification Review Courses and other continuing education through CE Direct: [https://cedirect.continuingeducation.com/](https://cedirect.continuingeducation.com/)
Over the past year, the Women’s Services Patient and Family Advisory Council (PFAC) has grown in size, and influence on patient and family centered care.

The council meets in the Women’s Health Education Center on a regular basis and is driven by a desire to foster relationships among patients, their families, and healthcare professionals, and to promote a patient/family-centered culture of care. The PFAC is composed of a diverse group of former patients and family members who have received care in NC Women’s Hospital. Champions from the Women’s Services are Denise Shaver BSN, RN, ACM, Public Health Maternity Program Coordinator, and Mary Quezada, BSW, MMI, Health Education Director for the Women’s Health Education Center. Nurses are welcome to attend and to present projects for which patient advisor input is needed.

During the past year, the council has supported the Maternity Care Center (5 Women’s postpartum and couplet floor) with a patient advisor, Anjanet Thomas who is on the unit each Friday. Anjanet’s role continues to develop – beginning as an extra set of helping hands for nurses and now expanding into training for Vocera Care Rounding. In support of NC Women’s Hospital Baby Friendly designation, she has also received training for “Ready Set Baby” (RSB), a patient education tool developed by the Carolina Global Breastfeeding Institute in the UNC Gillings School of Public Health. Having RSB training will equip her to respond to postpartum mothers in a supportive and informed manner that aligns with the World Health Organization Baby Friendly model of care.

Anjanet was also interviewed for two videos. In one video she shared her personal story of how nursing and lactation staff were very patient-centered when she delivered her second baby at NC Women’s Hospital, leading to her decision to breastfeed for the first time. The second video was developed by Loretta Muss BA, RN, UNC Health Care Coordinator for Patient and Family-Centered Care, and Ryan Geoppinger, an interning graduate student from the UNC Gillings School of Public Health. This inspiring video included other aspects of Anjanet’s birth experience at Women’s, as well as patient advisor stories from several PFACs across the system. It has been a source of inspiration to other departments as they consider beginning their own councils.

Members of the advisory council have also contributed to the improvement of multiple patient education documents, leading to additions and edits that reflect the patient’s and family’s points of view.

NC Women’s Hospital is part of the Perinatal/Neonatal Outreach Coordinator project, which is dedicated to improving maternal and neonatal systems of care and improving the availability of immediate postpartum insertion of highly effective, long-acting reversible contraceptive (LARC) methods (https://www.mombaby.org/perinatal-outreach-coordinator-pnoc-project/). Many women now have the option of

Submitted by
Denise Shaver
BSN, RN, ACM-RN
Public Health Maternity Program Coordinator
Women’s Services/Obstetrics and Gynecology
receiving a LARC prior to discharge following the birth of a child. To support this patient population, new patient education documents were developed by the UNC Center for Maternal and Infant Health. Advisors reviewed the documents and their suggestions were incorporated, ensuring that the information was comprehensive and patient-centered.

As the council continues to grow and develop its mission, we welcome newcomers who have an interest in shaping care with the consistent inclusion of patient and family voices. For more information on how to become involved, please contact Denise Shaver denise.shaver@unchealth.unc.edu or Mary Quezada mary.quezada@unchealth.unc.edu

Patient advisor Anjanet Thomas and Warrie Boland, BSN RNC-MNN, Clinical Nurse IV discuss Vocera Care Rounding for 5 Women’s Maternity Care Center
Magnet: Feel the attraction, be the force!

The Magnet Champions are in full force as we continue our journey to Magnet® re-designation. Recently, the Magnet Champion team gathered to learn about our history of shared governance and the organizational structure of nursing at UNCH from Cathy Madigan, DNP, RN, NEA-BC, Chief Nursing Officer/ Senior Vice President. It is always exciting to hear the evolution of shared governance at UNCH that began almost 13 years ago! Today, the five Councils remain grounded in the Nursing Core Values of My Patient, My Team, My Hospital, My Community, and My Profession.

UNCH Shared Governance Model and definition:

“The decision making model which affords the professional nurse autonomy. It empowers the nursing staff to contribute collectively to the processes related to nursing practice and the nursing work environment.”

The Magnet Champions also discussed some of the central components and examples of our Professional Practice Model from our Patient Care Delivery petal as presented by Tracy Carroll, MSN, RN, NE-BC, Director of Heart & Vascular and Co-Chair of Carolina Care. It was a great reminder of how the entire nursing team utilizes Commitment to Caring, Swanson Caring Theory, Relationship Based Care Delivery System, and Carolina Care© to take excellent care of patients each and every day! The Magnet Champions will be sharing all that they learned with their department colleagues.

Magnet Champions meeting led by Dr. Carla Jones. Guest speaker Tracey Carroll, MSN, RN, NE-BC, Director of Heart & Vascular and Co-Chair of Carolina Care.
I began my nursing career in the Newborn Critical Care Center (NCCC) in August 2006. I love taking care of the smallest and most delicate of babies but was starting to get burnout in my job. My husband said I needed to either “step up or step out.” In 2016, I chose to return to school to earn a BSN because I wanted new doors to open. During my Research Guided Evidence-Based Nursing Practice class, I explored the literature on nursing retention and mentoring. At this point, I changed from considering a new job to being very passionate about my current career. This inspired me to want to do more in my own unit.

Based on what I had learned, the unit management team, a colleague, and I revised the NCCC Nursing Mentoring Program. I have been a mentor over the years and as the chair of this program, I am very excited to work with the nurses in my unit to help them grow! After the revision we collected data about the program which showed improved retention rates. These data were presented as a poster at the Innovation at the Point of Care: Celebrating Nursing Quality & Research Conference and will soon be presented at the National Association of Neonatal Nurses conference, Savannah, Ga. and the Association of Neonatal Nurses conference, Orlando, FL.

My nurse manager, Jennifer Flippin, BSN, RN, RNC-NIC, noticed how inspired I was about the program and nominated me to both the UNC Health Care Emerging Leader Academy and the Nurse Leader Fellowship programs, both of which I have completed. I have also participated and completed many other leadership programs through UNC Hospitals and the number of educational opportunities offered at UNC Hospitals is amazing.

These programs have been great opportunities for professional growth, networking, and meeting colleagues outside of Children’s Services. I now better understand the workings in other areas of the hospital and resources that are available to help with my professional growth! One of these networking opportunities was an interaction with Paul Perryman, MS, RN, CCRN-CSC, who encouraged me to tell my story through Carolina Nursing News in order to inspire others.

I know that I would not have been successful with my professional growth if it were not for the tremendous support I have at home. My husband, who is also in management here at UNCMC, knows how important it is to take opportunities when presented. He encouraged me and gave me the confidence to put myself out there when I was sure I would fail. I am so thankful for him! My kids (10, 13) are also extremely supportive of the extra time that I have put in at work. I think that it has been a great influence for them to see me going back to school and growing in my career.

My daughter, who is starting high school this year, wants to be a pediatric nurse and I think that is the greatest reward I could get from my career - to inspire someone else! She even spent a week of her summer break attending a student council leadership camp.

I am honored to be asked to share my story and truly hope that I can help someone else decide to take the leap try something new!
2019 Oncology Core
Fall Class Schedule

- October 4
- October 11
- October 15
- October 25
- October 31
- November 8

Register in LMS. Search using Course Code: UNCHNPPDCORE19
Times and locations located in LMS.

NOTE: There are 2 sessions each day &
12 sessions per complete series.

Webex option available (primarily for Clinic Staff)
Contact Susie Mason or Claire Gillett to get Webex info for each
session/day.
All Classes run from 8:30am to 12:30pm. Minimum 4 students to hold class.

# 2019 OCN Review Class

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<tr>
<td>March 25th</td>
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<td>June 11th</td>
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<td>August 9th</td>
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Register in LMS using course code: UNCHNPPDOCN19

Test taking techniques plus Q and A!

Location: NPPD 4th floor, Classroom C
Why did you choose to become a nurse?

Like many others in the nursing profession, I first wanted to become a nurse following a health crisis of a loved one. I saw how nurses cared for my loved one and comforted our family during this difficult time. I knew I wanted to provide this same care and compassion to others. I deeply believe that nursing is a calling on many levels and felt that sense of calling to this wonderful profession. More specifically, I began to realize how much nurses contribute to advancing positive patient outcomes, preventing adverse events, and discovering groundbreaking scientific innovations. Ultimately, I chose to become a nurse to contribute to this profession’s legacy of improving human health and changing lives.

Why did you pursue professional certification?

I originally pursued a professional certification because it was required for an area of professional advancement that I was interested in obtaining. Preparing for the certification exam helped to expand my knowledge base. Passing the exam provided me with a sense of professional accomplishment and pride. I particularly like that it signifies to my patients and interdisciplinary colleagues that I have been validated in my area of nursing expertise. I think nursing certification helps to elevate our profession by enhancing our credibility to patients and other health care professionals. I would highly encourage anyone interested in achieving a nursing certification to do so - you will not regret it.

Certification Spotlight: Procedural Care

Why did you choose to become a nurse?

I have learned that there is no greater reward than servicing others. We as humans, will all need help at one point or another. As a nurse, I am in a position to provide that help to those in need. Nursing is a profession that is scary, rewarding, and full of new opportunities. I enjoy forming therapeutic relationships with patients, no matter if it’s for five hours or for five minutes. I enjoy collaborating with a team and I appreciate the autonomy that I am afforded.

Why did you pursue professional certification?

I wanted my patients and their families to feel confident that I was dedicated to becoming an expert provider of care and improving patient outcomes. I am also a life-long learner and want to remain current on evidence based clinical practices, to give the highest quality of care to my patients.
Why did you choose to become a nurse?

Making a difference in people’s lives has always been a passion of mine. Being able to better people’s quality of life and have a professional relationship made nursing an appealing career choice. Knowing that nurses are able to work with others and make a difference while doing so is the main reason I pursued this career. By working in Acute Rehabilitation I am able to serve a diverse patient population and make differences for them during their hospitalization.

Why did you pursue professional certification?

When I started working in Acute Rehabilitation I really enjoyed the patient care I was able to provide as well as see the progress patients made before going home. I wanted to continue to grow and specialize as a rehab nurse, to provide the best care to this patient population. Now that I have my CRRN I am more knowledgeable and can better aid our patient population gain their optimal health.

Certification Spotlight: Rehabilitation Services

Erin Keurbitz
BSN, RN, CRRN
Rehabilitation Inpatient Coordinator
Rehabilitation Unit

Why did you choose to become a nurse?

As a child, I was the care provider for my younger brothers and sister in a challenging home environment. When my Nana was alive, she always told me that I would become someone special. I knew at a very young age that I would break out of the cycle of poverty, and provide care to people that could not take care of themselves. Nursing was always my dream, and I eventually made it my reality. I was the first person to receive a college degree in my family.

Why did you pursue professional certification?

During a transitional time on our unit, I realized that I had encountered a fork in the road. I could choose to do nothing and be unhappy, or I could be a part of the solution. My husband and I chose to make sure that one of us was home every day for our son. Now that boy can finally drive! It was time for a change in my life. I was inspired by another nurse who had just taken the exam and become a CNIII. With 15 years of clinical experience, I wanted to become the leader I knew I could be. Certification validates expertise, skills, and abilities in a defined clinical area. It is important to remain current in my specialty, by completing continuing education in evidence-based practice and allowing myself to grow. I have since joined committees, taken multiple leadership classes, and am working on my portfolio. I want to be a beacon of change. We all have a light shining in us. We all wanted to make a difference when we chose nursing; together we can.

Certification Spotlight: Women’s Services

Shannon Jo Willoughby
BSN, RN, RNC-OB
Clinical Nurse II
Labor & Delivery
Calling all nursing staff photographers!

Email your favorite photograph to CNN@unchealth.unc.edu for possible display in CNN. Include 125 words or less telling us what inspired your photo. Only the selected photo owner will be notified by email.

Eligibility criteria:

- 300 dpi or higher image resolution, 8x10 or larger.
- Include a phone number where you can be reached.
- Photographs may be resubmitted quarterly.
- Digital images only, please
- No patient, patient’s family or visitor photographs.
- All selections will be made by the CNN Editorial Staff.

The photograph on the previous page was taken with an iPhone. You likely have equally high resolution pictures on your phone. Share them with us and we will publish from among them!
We believe in the power of nursing.