Dear UVA Nurses: Life at the Health System continues to be exciting with many opportunities for action, improvement and fun. I am learning a lot in my visits to care areas, and I always enjoy my interactions with you. I am hopeful that the snow is finished for the season so we can focus our energy and creativity on other initiatives and challenges.

Please notice this newsletter’s name change. “NurseTalk” reflects my priority to maintain an open dialogue with you. You are the key to success and integral to keeping me informed. I invite you to share your ideas, suggestions and concerns with me when you see me; send them to nursetalk@virginia.edu and come to my Straight Talk sessions. The next one is March 25. Keep reading to learn the details!

Lorna Facteau, DNSc, RN, Chief Nursing Officer

Magnet Recognition: Important News

We have a new deadline for submitting our Magnet re-designation documentation: February 1, 2011. This six-month extension was granted because of my brief tenure as your Chief Nursing Officer. I am still learning about some of our essential programs and, most importantly, their outcomes. I am committed to maintaining our Magnet status, however it takes time to be sure that we are meeting the Magnet requirements and that we are demonstrating positive trends on all indicators. I am pleased that leaders of the Magnet Program at the American Nurses Credentialing Center were receptive to this request.

This extension also gives us additional time to improve some of our nurse-sensitive indicators, especially patient satisfaction. We are on the right path: we are committed to improving, and we are focused on the specific actions that will result in more positive results. With your help, we will achieve and maintain the best outcomes. I ask that each day you hold yourself and others accountable to provide the care that reflects our Magnet values.

Falls: Protecting our Patients

In this month’s video, Michelle Longley, MSN, RN, GNP, and I talk about our patient fall prevention program. Michelle is one of the lead clinicians for this program. A recent JAMA article (January 2010) reinforces the need for these efforts with a variety of interesting statistics. Did you realize that one-third of people older than 65 years fall annually and the odds of an injurious fall increase with age? In 2000, more than 2.6 million older adults experienced a fall-related injury and health costs related to fall injuries were estimated to exceed $19 billion.

Our data on patient falls is good. Using the NDNQI benchmark, half of our units perform better than the benchmark 75 percent of the time, and more than half our units outperform the benchmark 100 percent of the time in the category of falls with injury. This is positive information but we want to do better.
You can help reduce the rates of patient falls by committing to a few best practices:

1. Assess gait and balance problems, neurological and musculoskeletal problems, medication use and impaired thinking and vision;
2. Reduce environmental hazards (slippery floors, clutter, poor lighting);
3. Encourage patients to get up slowly from lying or sitting positions;
4. Keep the call bell within reach;
5. Conduct hourly rounds; and
6. Seek assistance from our PT and OT colleagues.

When a patient does fall, please complete a Quality Report. This information will help expand and improve our prevention efforts. Remember, yellow is the armband color for Fall Risk!


**Talk to me: Straight Talk**

Straight Talk sessions are forums for me to meet you, hear about your work life and get your feedback on what’s working and what could be better. The next session will be **March 25, 1530-1630, in the Northridge café space.** These forums are open to everyone; please attend in person or call into the meeting. The PNSO staff is a great help in arranging the conference call option.

February’s Straight Talk session was on the 25th. Participants included nurses of varying backgrounds, from those who have been with the Health System less than a week to those who have worked here for several decades! They talked about the positive impact of the staff supports during the snow storms. John Boswell, Chief for Human Resources, was an important staff advocate and helped our administrative staff understand more about ways we could show our appreciation for the staff who worked, slept and ate here for many days in a row.

We also talked about ways to partner with physicians on quality improvement efforts. I am pleased with the new partnerships between the Nurse Managers and Medical Directors. I have high expectations for our ability to work together more effectively.

Attendees offered advice to me as well. They want me to continue to be visible and to strengthen accountability. Their wish is that all employees be held to high standards. I could not agree more.

**Celebrating Your Accomplishments**

**Sandy Macon** graduated from the Frontier School of Midwifery and Family Nursing with an MSN specializing in Nurse Midwifery. Sandy also achieved certification as a Nurse Midwife, CNM.

**Cathy Quick** received her MSN with a specialty in Nurse Midwifery from Shenandoah University.

Clinical Nurse Leaders **Sara Read** and **Lindsey Baskette** had their improvement project, Born in the OR: The Mother-Baby Reunion Project, accepted for a poster presentation at the upcoming AWHONN convention.
Melissa Otoya, RN, NICU, will present a poster, Improving Practice to Reduce PICC/CVL Thrombus Formation, at the National Association of Neonatal Nurses Conference.

Congratulations to all!