

# UPMC Student Nurse Dall Pathways



### Dear Nursing Colleague,

In this issue of Student Nurse Pathways, we are highlighting UPMC's cultural competency initiatives. Cultural competency is about being aware of other individuals' cultural needs and expectations, and being able to interact with them in a culturally appropriate manner. This interaction may be with your colleagues as well as with the patients whom we serve. How well an organization builds cultural competency will be reflected by its employees as well as by patient satisfaction scores. When patients complete patient satisfaction surveys, they are telling us how well we met their individual needs and expectations. The same holds true with each of you. When you complete a student experience survey, you are providing the organization with your feedback about the culture of the organization.

Because each of us has different life experiences and comes from a different background, our feedback may be different. As an organization, therefore, our challenge is to create an inclusive culture in which everyone is treated with dignity and respect. Remember Dignity & Respect Tip 11: "Treat others the way they want to be treated." This is all about cultural competency. As students in our organization, you are members of our team. I encourage you to engage in cultural competency learning experiences during your clinical training.

Holly L. Lorenz, MSN, RN Chief Nurse Executive, UPMC

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# It's Time for the UPMC 360° Student Experience Survey

Students and faculty are encouraged to participate in the five-question survey to provide feedback on their most recent clinical experience at UPMC.

The purpose of the survey is to improve the collaboration among UPMC nurses, students, and clinical instructors.

You will receive this survey via email. If you have any questions, please contact Melanie Shatzer, DNP, RN, at shatzermb@upmc.edu or 412-647-7917.

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#### **UPMC Nursing Vision**

## **UPMC** Schools of Nursing

Culturally competent care is essential in today's health care environment. Therefore, nursing curricula must include experiences that enable their students to develop the knowledge, skills, and ability to become culturally competent caregivers. The UPMC Schools of Nursing have designed unique experiences that promote the attainment of these skills in their graduates.

Mercy Hospital School of Nursing focuses on developing cultural competence early in its program. The students are first introduced to the concept in the foundations courses, and complete a self-analysis. After the students reflect on their own cultural beliefs and biases, the faculty facilitates a discussion that allows the students to share their thoughts about how their beliefs will impact their nursing care. During the Maternal Child nursing course, a clinical experience occurs at the Salud Para Niños bilingual clinic of Children's Hospital of Pittsburgh of UPMC. Students complete wellness assessments and provide teaching that takes into consideration the cultural practices of the children and their families. And throughout the curriculum, the case studies conducted in problem-based learning have a cultural competent that the students must consider when developing their interdisciplinary plan of care.

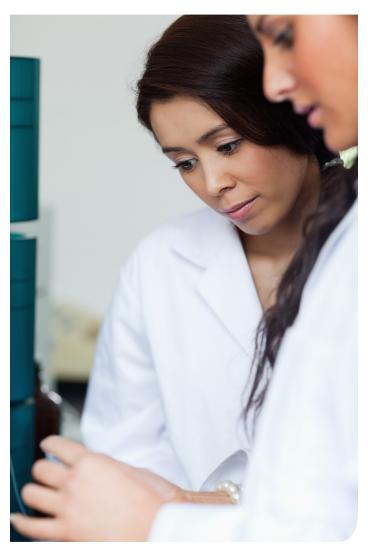
Grounded in patient-centered care, UPMC Shadyside School of Nursing students engage in cultural self-awareness during their emotional competencies learning experience. Students discover their family cultural values, beliefs, and customs, then view a media presentation in which cultural awareness is absent. Ineffective communication behaviors are identified and discussed, including examining how ethnocentric behaviors in health care can directly impact patient care and satisfaction. Highlighting the UPMC Center for Inclusion's Culture Vision resource, www.crculturevision.com, students access specific cultural information to support patient-centered care. Students receive a ring of knowledge (ROK) that includes cultural awareness and assessment tips for clinical use.

During the initial nursing course at the UPMC St. Margaret School of Nursing, Basic Nursing I students participate in an ethnic luncheon. This occurs as part of the culture and ethnicity content. Each student brings in a dish that represents the student's own background, or a favorite ethnic food. Led by their instructor, Susan Greenhill, the students discuss their food choices and the foods' relevance to their cultures. Many students also offer recipes so their classmates may replicate the dishes at home. The students have an opportunity to interact and share with each other during the luncheon. Student feedback has been consistently positive about this opportunity to explore and share.

# Student Experiences Around the System

#### Pediatric Nursing Dedicated Education Units: Empowering Staff and Students to Strengthen Practice

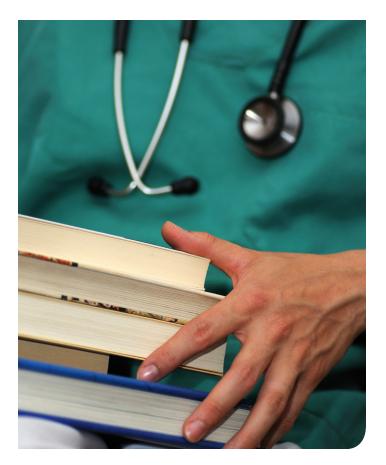
The supply of new nurses does not currently meet the demands of today's complex health care systems, and the need for well-qualified nurses is projected to increase. Lack of clinical placement settings and insufficient numbers of nursing faculty have been identified as the top two barriers to expanding enrollment in pre-licensure nursing programs (NLN, 2010; IOM, 2010). Adding to the constraining factors of placement settings and insufficient numbers of faculty is the awareness that current clinical education models may not provide the most productive learning experiences for students (Benner, 2010; McNelis and Ironside, 2011). Nurse educators and their clinical partners have been challenged to improve the quality and capacity of clinical education.



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Major recent research about the quality of nursing education supports the need to develop more effective learning experiences for students. Benner, Sutphen, and Leonard (2010) published the outcomes of their research on the status of nursing education in the United States. They found a significant disconnect between theory and clinical practice in the educational preparation of nurses. The Commonwealth of Australia University Teaching (CAUTI) project, Transfer of Learning Between Clinical Practice and the University Classroom (Edgecombe, Wotton, Gonda, and Mason, 1999), predates the work of Benner, Sutphen, and Leonard, but both projects focused on the need for restructuring the clinical education of nurses. Of primary importance is the need to facilitate the connection between what students are learning in the classroom and the clinical learning environment. Both groups urged educators of nurses to develop more effective models of clinical education.

The dedicated education unit (DEU) model of clinical education for nurses has as a central concept "the belief that the staff nurses' education role is vital to the development of students' professional skills and knowledge" (Moscato et al., 2007, p. 31). Rather than providing the typical peripheral role that the staff nurse takes in the traditional clinical education model, the DEU moves the staff nurse to the central role with the student in the clinical learning environment. Staff nurses who take on this role are called clinical instructors (CIs) and work directly with the students. Nurse educators in the role of



clinical faculty coordinators (CFC) work with the CIs to provide support related to the educational process, and retain responsibility for the educational outcomes of the students. In the DEU, nurses and nurse educators form a partnership that combines the expertise of both with a focus on creating the most effective clinical learning environment.

A team of faculty members from Robert Morris University and nurse administrators from Children's Hospital of Pittsburgh of UPMC developed the plan and selected a nursing unit to pilot the DEU, based on nursing turnover and projected staffing needs over the next year. Two staff nurses were selected from the pediatric surgical unit, and attended a faculty-led four-hour didactic training session. Benefits for the staff serving as CIs included college credit classes (up to three credits), and an iPod® Touch to support learning at the bedside for the students. Two student nurses were selected through an application process as determined by the University. This collaboration began in January 2013. Outcomes will be measured by comparing student satisfaction of the traditional clinical group on the pediatric surgical unit and the DEU students, as well as by HESI exam scores.

Four weeks into the DEU pilot, feedback from the students and CIs has been positive. The students are participating in the clinical decision-making process that nurses go through multiple times a day. This includes the prioritization of care, delegation of care, and management of care of multiple patients. The students are "amazed" by the multiple decisions that nurses make in a day. The patient assignments have included international patients who did not speak English. The students have seen what the nurses do to make sure that they can communicate with patients and families.

Staff on the units are taking the students under their wing, offering experiences on the unit, and encouraging the students to be involved. As reported by the course facilitator, Lisa Locasto, MD, "I visited the unit on the student's second day on the unit, and when I inquired at the nursing station about the student's location, all the staff knew the student's name and verbalized that they enjoyed having him on the unit. All of the staff seem to have taken on the teaching role."

In addition, some other observations include that the DEU students are much more independent and confident than the other students in the class. For the two DEU students, this experience has reaffirmed their desire to work in pediatrics, and they both want to work on this unit.

#### Magee-Womens Hospital of UPMC Is Growing: We Care for Moms, Babies, and a Whole Lot More

Many students experience Magee-Womens Hospital of UPMC during their maternal-newborn clinical rotations. While that clinical experience may have provided you with a brief introduction,

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Student Nurse Pathways Pursing

did you know Magee is growing and caring for many specialty patients beyond newborns and mothers?

At Magee-Womens Hospital of UPMC, we focus on patient- and family-centered care, and are committed to our journey to Magnet Recognition. Nurses are playing key roles in decision making at both unit and hospital levels. Our obstetric service line continues to grow. Our birth rate reached an all-time high, with nurses throughout the hospital providing excellent care, including those in our physicians' offices, antepartum and postpartum units, NICU, and labor and delivery units.

Magee-Women's Hospital of UPMC has been ranked nationally in four adult specialties by U.S. News & World Report. Magee is No. 5 in gynecology (which includes obstetrics), No. 31 in orthopaedics, No. 32 in diabetes and endocrinology, and No. 45 in Cancer. We also have been rated as High Performing in gastroenterology and in urology.

Many nurses are choosing to have a voice in councils that impact our relationship-based care model and operations of the hospital. Magee has an Employee Council that promotes a collaborative work environment for all staff to support a framework of patient- and family-centered care. One of the initiatives begun in 2012 was the formation of a NOW (Nights, Off-shifts, and Weekends) Council. The staff members meet monthly to share information and provide insight.

Professional growth for nurses is encouraged and supported. Our new nursing school recruits are developing their skills and portfolios through the MyResidency Program. Last year, 44 new nurses completed the residency program. Nurses are offered continuing education at the hospital and are supported in their decision to return to school with our back-to-school program. Specialty certification is encouraged and applauded. Currently, 235 of our nurses are certified.

#### **UPMC East Welcomes Nursing Students**

In July 2012, UPMC opened a new, 156-bed hospital in Monroeville to serve the health care needs of the communities east of Pittsburgh. Our first priority was to prepare to take care of patients upon opening. We hired and trained several hundred clinical and support staff as we opened the new hospital.

After a successful opening and positive response from patients and staff, we realized one thing was missing: our students! The nurses were eager to have students and show off all of the great aspects of UPMC East's culture. We realized that our state-of-the-art environment and sophisticated medical technology would allow us to create a very rich student experience.

We began by welcoming senior leadership "transition" students from UPMC St. Margaret in October 2012, followed by a full group of transition students from the University of Pittsburgh and UPMC St. Margaret who are currently at UPMC East.

This January, we were also excited to have our first clinical rotation from the University of Pittsburgh, who found being at UPMC East a great experience. We are hopeful that some of our students will consider working at UPMC East.

# Here are some student comments:

"I overall had a wonderful experience. The ICU staff was very welcoming and I felt part of their team and less like a student. My preceptor, Joyce Miller, was amazing and very open to show/ answer my questions. My preceptor's approach to mentoring me was a very crucial part in me realizing, "Wow! I'm almost a nurse." It helped me gain confidence in myself and remember what I've learned in school and pull it all together to provide quality patient care." Lindsay O'Donnell

"My experience at East was exceptional and very much as asset to finalizing my nursing school education. My preceptor, Mattie Martin on 6 East, was so helpful and approachable. I believe the experience couldn't have gone any better. Everyone was welcoming and helpful in providing me with as much experience as they could." *Charity Patterson* 

"My preceptor, Jesse Sherrill, was an amazing mentor. He taught me so much about nursing and has given me confidence and experience to begin what I think will be a very successful nursing career. The ICU as a whole made me feel welcome, and the overall morale of the unit made it a great place to finalize my career as a nursing student. I would highly recommend my preceptor and this unit to future students." *Melissa Constantine* 

"I am thankful that the staff at UPMC East have allowed us to be their first clinical group. Although the employees on the fifth floor haven't been working together very long, they were very cohesive. Our whole clinical group has enjoyed the amount of time they take out of their day to help us learn as we progress into the professional setting." Joe Wilkens

# Beginning Your Career at UPMC

# Congratulations to the upcoming spring 2013 nursing graduates!

You will soon embark on an amazing career. We hope that you will consider starting your career with UPMC. Why? UPMC has an extraordinary nursing team. UPMC nurses are an integral part of our patient- and family-focused environment in which nurses themselves create, design, support, and transform care.

My Nursing Career, our clinical ladder, allows nurses to spend their careers at UPMC in an amazing variety of settings, specialties, and almost endless roles. We have urban, community, and regional hospitals, academic teaching centers, Level I trauma centers, and Magnet®-accredited hospitals. UPMC nurses have the ability to build their careers by choosing settings and specialties, and transferring among them, in order to grow and build an impressive professional skill set and professional portfolio, all within one system. As you gain experience, UPMC's My Nursing Career opens the traditional clinical ladder beyond inpatient nursing to include roles in many areas, such as outpatient care, surgical services, case management, home care, senior living, infection control, research,



wound care, cardiopulmonary rehabilitation, and other specialties. To learn more, visit our Nursing Annual Report at UPMC.com/NursingAnnualReport.

More importantly, as you grow and progress in your career with us, you will maintain your years of service throughout, as well as your system seniority, benefit plans, paid time off (PTO) and increased PTO accrual amounts, and the retirement programs in which you participate.

UPMC hires a large number of new graduates per year. We hope you are among them!

#### Frequently Asked Questions

#### Do I need my nursing license to apply to jobs at UPMC?

No. UPMC recently changed its policy to require licensure at the time you begin your nursing position. You may apply, interview, and receive a contingent job offer prior to becoming licensed. Upon receiving a contingent offer, you will select a start date, with your recruiter's help, that will allow enough time for your anticipated testing date. You must have your license to begin employment.

You are encouraged to prepare and send the required documents and forms to the state board as close to graduation as possible. Upon receiving confirmation of graduation from your school, the state will process your request for testing.

#### How do I apply?

Explore our employment opportunities at UPMC.com/Careers and select Quick Search. Select Advanced Search and enter the keyword "nurse," or select the job family "nursing (RNs and LPNs)," or other additional search criteria, such as a particular hospital or specialty. After you submit your online application, you will receive a confirmation email. Based on your education and employment background, you may be contacted for further screening or an onsite interview.

#### When should I begin to apply?

Ideally, you should begin to apply one to two months prior to your graduation date.

#### Why do some medical-surgical units require experience?

The unit manager must balance the experience level of his or her staff in order to provide safe patient care, adequate preceptors, and a good experience for both new and current staff. If a unit has recently hired a number of new nurses, it may not have the current capacity to hire additional inexperienced nurses.

#### Do you hire new nurses into an emergency department?

We do hire new nurses into select emergency departments (EDs) on a limited basis. Most often these new nurses have completed a senior transitions course in an ED, have previous pre-hospital experience, or have experience working in an ED. You may apply if the job posting

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does not require experience. We strongly encourage you also to consider additional specialties in which you are interested.

#### Do you hire new nurses into critical care?

We do hire new nurses into our ICUs. Although the number of available ICU positions varies, and the positions and are often sought by experienced nurses, you should apply if interested. We encourage you also to consider additional non-ICU positions in which you are interested.

#### Is it true that I should begin my career on a medical-surgical unit?

Everyone is unique, so there are no "shoulds." Starting on a medicalsurgical unit is a wonderful opportunity to help develop and strengthen your clinical knowledge, critical thinking skills, and your prioritization and delegation abilities.

#### Do the ORs hire new nurses?

Generally, ORs prefer experience. Fortunately, UPMC offers a five-week paid OR fellowship designed to help prepare new nurses to begin practice in the OR. This program is held several times a year, with a limited number of fellows selected. Your recruiter can help to guide you to this program.

#### How long will it take me to find a job?

This can vary greatly. We encourage you to apply to a variety of specialties and hospitals. The more flexible you are about where you begin your career, the greater the opportunities will be. Persistence and patience are the keys.

#### How can I apply to the Nurse Residency Program?

You don't need to apply — all newly hired graduate nurses are enrolled in the GN Residency Program. This program supports you as you transition from the academic setting to the clinical practice setting. The program emphasizes the development of clinical and leadership skills that will assist you in becoming a successful professional nurse and an integral part of the health care team.

#### I am currently in Transitions and really like the unit I am working on. Will it consider me for a future opening?

Your current unit may consider you. Remember that any time you are on a patient unit, you are demonstrating your potential skills and ability to be a great future member of the team. Introduce yourself to the manager, always arrive promptly, be prepared, and be interested and engaged. Show your strong interest and ask questions.

#### What types of schedules are offered?

Units within a hospital may vary. You may find the hours indicated in the job posting, but you should ask about scheduling during the interview process.

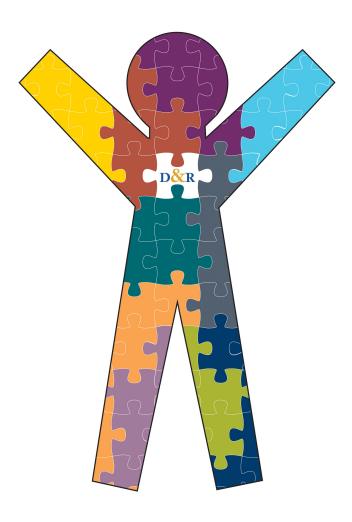
#### During the interview process, will I be offered a shadow experience?

Most hospitals offer you the opportunity to shadow a nurse on the unit after you interview. If offered, you should take advantage of this opportunity to meet your potential future colleagues as well as to experience the unit.

#### What should I wear for my interview?

Dress in business or business casual clothes. If you have arranged a shadowing experience after your interview, or are interviewing after a clinical experience, ask your recruiter if you may wear a uniform or scrubs.





Introducing CHRIS

Dignity & Respect Tip 11: Treat others the way they want to be treated.

The UPMC Center for Inclusion and the Donald D. Wolff Jr. Center for Quality Improvement and Innovation at UPMC are excited to present new resources available to UPMC employees. These tools can be used to provide quality, culturally competent care to our patients and their families. Let us introduce you to CHRIS.

CHRIS represents UPMC's Commitment to culturally competent Health care and improving Retention of diverse employees by Integrating dignity and respect into Systemwide practices. Each color of CHRIS represents a different attribute of who someone is, and is vital to consider when caring for and communicating with that person.

For instance, if a department were to create a brochure that failed to represent different kinds of people, the brochure might not be successful in connecting with the diverse communities that UPMC serves. A receptionist can use CHRIS with each new patient he or she sees. CHRIS can be used as a checklist to remind the receptionist to consider the patient's various cultural, social, and communication needs, in order to provide the best care possible.

To find out more about CHRIS, and the tools and resources available to you for integrating cultural competence, such as CultureVision™, and how you can demonstrate a commitment to cultural competence every day, visit Infonet.UPMC.com/CulturalCompetency.■

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Holly Lorenz MSN RN

#### Editor

Dawndra Jones MSN, RN, NEA-BC

#### Contributor

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