

News Release

Thomason Receives Prestigious

National Nursing Recognition

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In yet another important milestone in its evolution into a University Medical Center, Thomason Hospital has achieved Pathway to ExcellenceTM designation by the American Nurses Credentialing Center (ANCC). The Pathway to Excellence designation identifies the elements of work environments where nurses can flourish. According to the ANCC, the designation substantiates the professional satisfaction of nurses at Thomason and identifies it as one of the best places to work. Ninety-six percent of Thomason's nursing Associates rate Thomason positively.

"This is a significant achievement for our organization and our community because it speaks well of Thomason's ability to attract and retain qualified staff despite the national nursing shortage," says Chief Nursing Officer Diana Fancher, MSN. "Thomason's nurses are extremely loyal to their patients and to our organization. We strive to create a work environment that facilitates their ability to deliver the highest quality care and to feel a sense of professional accomplishment. Our nursing vacancy rate is just 3-4% compared to the national average of 13-14%."

The Pathway to Excellence designation is granted based on the confirmed presence of characteristics known as "The Pathway to Excellence Criteria." These criteria are foundational to a nursing practice environment that has a positive impact on nurse job satisfaction and retention. These criteria are integrated into operating policies, procedures, and management practices of pathway-designated healthcare organizations.

For an organization to earn the pathway distinction, it must successfully undergo a thorough review process that documents foundational quality initiatives in creating a positive work environment—as defined by nurses and supported by research. These initiatives must be present in the facility's practices, policies, and culture. Nurses in the organization verify the presence of the criteria in the organization through participation in a completely confidential survey.

As a Pathway to ExcellenceTM designated organization, Thomason Hospital has demonstrated that it is committed to nurses, to what nurses identify as important to their practice, and to valuing nurses' contributions in the workplace. According to the ANCC, this designation confirms to the public that nurses working at Thomason know that their efforts are supported. The honor encourages other nurses to join their colleagues in this desirable and nurturing environment.

"Patients are admitted to hospitals for nursing care. It is the nurses who are at their bedsides most often," says Jim Valenti, Thomason's President & CEO. "They are the patients' advocates. They are who patients turn to with their questions. And it is the nurse's hand that patients reach for when they are fearful or in pain. Thomason's nurses and their patients deserve no less than a positive work environment

that supports the care our nurses provide and fosters their development. This designation means that we have been successful in ensuring Thomason's nurses know they are valued members of our team."

About ANCC: The American Nurses Credentialing Center (ANCC), a subsidiary of the American Nurses Association (ANA), provides individuals and organizations throughout the nursing profession with the resources they need to achieve practice excellence. ANCC's internationally renowned credentialing programs certify nurses in specialty practice areas; recognize healthcare organizations for promoting safe, positive work environments through the Pathway to Excellence ProgramTM; and accredit providers of continuing nursing education. In addition, ANCC provides leading-edge information and education services and products to support its core credentialing programs.

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Criteria 1: Control of Nursing Practice

The organizational, administrative, unit and staff activities are structured to facilitate maintenance of nursing standards of care as outlined by the rules of the Texas Board of Nurse Examiners and evidence-based practice.

Autonomy and control over the practice environment are consistently identified by registered nurses (RN) as an essential component of satisfaction with practice settings. Professional models of care have long been recognized as a strategy for improving the satisfaction and retention of RNs. In professional models of care, nurses are accountable for their own practice and are coordinators of patient care.



Control of Nursing Practice Within the Organization is demonstrated by:

- An organizationally delineated nursing governance model
- Development of a staffing plan that demonstrates substantive input from direct care nurses
- Direct care nurse participation on interdisciplinary committees within the organization

Further Enhancement of Control of Practice/Sub-Criteria:

- The use of nursing councils to address practice concerns
- Systems that include direct care nurses in administrative and operational decision making
- Policies and procedures that facilitate the use of nursing standards and evidence-based outcome measures in development of the nursing care model
- Practices in hiring that include direct care staff as stakeholders in hiring decisions

Criteria 2: Safety of the Work Environment

The facility demonstrates a concern for the health and safety of nurses.

The facility demonstrates a concern for workplace safety issues by meeting regulatory safety standards and exceeding those requirements. The facility has nurse representation on committees which work to prevent injury and illness and to improve the workplace environment including:

Essential Element

• Development of systems to support Occupational Safety and



Health Administration (OSHA) standards.

Prevention Strategies

- Prevention of workplace violence and support for employees who experience violence.
- Inclusion of nurses in the evaluation and purchasing of products to maximize employee safety when delivering patient care.
- Adequate security for the protection of patients and staff.
- Support for prevention strategies within the facility to decrease injury, illness, stress, and accidents among nursing staff.

Criteria 3: Systems Exist to Address Patient Care Concerns

The facility has systems for evaluating and addressing issues related to nursing practice quality.

Nurses have a professional obligation to advocate for patients and to resolve issues that they believe affect the quality of patient care. This requirement comes from the profession in the form of a code of ethics, and from the Board of Nurse Examiners for the State of Texas in the form of standards of practice. Health care organizations who are sensitive to professional obligations have systems in place that provide a non-retaliatory mechanism for resolving patient care concerns that arise, such as:

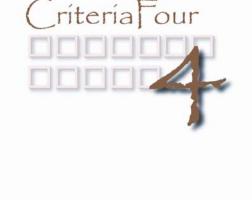


- Nurse concerns about physician practice and care
- Physician concerns about nursing practice and care
- Interdepartmental concerns
- Nurse concerns about the quality of patient care
- Nurse concerns about the care provided by other nurses
- Patient rights concerns
- Addressing concerns about cultural sensitivity for patients, and providers of care
- Fraud and abuse

Criteria 4: Nurse Orientation

The facility can demonstrate that it has an orientation program which is needs and competency based as evidenced by nurse-specific orientation plans that consider the education, experience and identified strengths and weaknesses of the nurse being oriented.

Orientation to the work setting is an essential element of nursing practice. Not only is adequate orientation a desired quality for the ideal work environment, but it is also instrumental in facilitating a high standard of patient care. Evidence indicates that nurses are at highest risk for committing errors in the provision of patient care when they change practice settings. Therefore, proper orientation is



a required element in the transitional process. Orientation should include, but is not limited to:

- An introduction to the organization, its philosophy, goals and expectations.
- Initial collaborative evaluation with the orienting nurse of the orientation and supervision needs for developing competency in the chosen practice area.
- Staffing patterns that allow the established staff to give, and the transitioning nurse to receive, the support necessary for successful orientation to the area of practice.
- Provision of preceptors when appropriate.



- Ongoing feedback regarding performance expectations and achievement.
- Cross orientation if nurses are expected to provide care in more than one area of practice.

Criteria 5: Chief Nursing Officer

The activities of the Chief Nursing Officer in the management of nursing services are supported by hospital administration as evidenced by:

A Chief Nursing Officer who is an RN and has a master's degree in nursing or a master's degree in health care administration or business administration or other health related field or is progressing under a written plan to obtain administrative qualifications associated with master's preparation and will be:



Organizational Factors

- In a direct line of communication and accountability to the chief administrator of the organization.
- Represented in the leadership and governing bodies of the facility.
- A participating member of the executive team.
- In budgetary control of nursing services.

Staff Relations Factors/Sub-Criteria

- A Chief Nursing Officer (CNO) with an open door policy and availability to direct care staff.
- A CNO who is visible and present on nursing units.
- A CNO who meets often with and will know staff.
- A CNO who is an advocate for direct nursing staff to administration.

Criteria 6: Professional Development

The facility has a professional development program to facilitate ongoing educational needs to maintain and/or further develop professional expertise.

Provision of opportunities for growth and development among all nursing staff has long been identified as an important retention strategy. Professional growth and development include personal opportunities, as well as the opportunity within the organization, to utilize that development to enhance nursing practice and the quality of patient care. Examples include:



Organizational Opportunities for Evidence-Based Professional **Development and Advancement**

- Facilitation of outcomes-based nursing research and the development of evidence-based programs within the facility.
- A career ladder for demonstration of competency, professional recognition, and the provision of monetary incentives.
- Opportunity for advancement within the organization.

Support for Individual Professional Growth/Sub-Criteria

- Provision of Continuing Nursing Education.
- Tuition reimbursement for LVN-to-RN, RN-to-BSN and graduate education.
- Flexible scheduling that allows nurses to improve their educational level
- **Scholarships**



- Fellowships
- Opportunities to mentor and be mentored
- Provision of reimbursement for specialty certification

Criteria 7: Competitive Wages

Nursing salaries are competitive, are market adjusted, and recognize outstanding performance and professional commitment.

To attract and retain quality staff, salaries must remain competitive throughout the nurse's career and provide opportunities for incentives based upon professional excellence and organizational outcomes. Strategies include:

- Salaries that are reflective of national and local market analysis.
- Consideration for existing staff when recruitment incentives are developed.
- Development of monetary incentives based on organizational outcomes.
- Salary differentiation based on experience, expertise, education and organizational commitment.



Nurse Recognition

The facility recognizes individual nurse merit and excellence.

The facility invests in an ongoing, delineated nurse recognition program. Evidence of recognition for performance is reflected in policies and practices which provide opportunities for staff recognition as evidenced by ongoing activities such as:

- Achievement awards for professional development.
- Special acknowledgement for activities that enhance nursing practice and the quality of patient service delivery.
- Incentive opportunities for high achievers.

Criteria 9: Balanced Lifestyle

The facility recognizes the need of nurses to balance work and non-work life.

The organization supports the principles of a balanced work and home life through policies and a culture that are supportive to the nurse including but not limited to:

- Flexible scheduling.
- Policies that provide for the care of ill children, family members, and significant others (i.e., use of sick leave for such purposes, or "paid time off" [PTO] if sick leave is combined with vacations for total time off.)*
- Routine scheduling that does not require mandatory overtime to meet staffing needs and that includes staff in the development of schedules.







- Social support services that facilitate the management of personal issues that impact effectiveness at work
- Recognition for and encouragement of involvement in local/national/international volunteer activities.

Criteria 10: Zero Tolerance Policy for Abuse of Nurses

The facility does not tolerate physician abuse of nurses.

The facility has a zero tolerance policy for physician abuse of nurses and has a clear system for dealing with concerns expressed by the nursing staff about such abuse. The facility has programs to improve nurse physician relationships, as evidenced by:



- A Zero Tolerance for Abuse policy.
- Non-retaliatory protections for nurses who identify physician abuse.
- Clear organizational procedures for dealing with abuse allegations.
- Programs for recognition of interdisciplinary relationships that positively impact patient care.

Criteria 11: Middle Management Accountability

The organization facilitates leadership competency among supervisors of direct care nurses and middle management through a delineated leadership program

Practices include developmental activities to establish and maintain the competency of nurse middle managers with emphasis on key competencies such as skilled communication, team building, service to constituents, demonstrated collaborative ability, resource management, and analytical thinking, and will establish:



- Practices and polices that provide support for the role of the middle manager as an advocate for, as well as manager of, direct care staff.
- Evaluation based on outcome measures for direct care supervisors and middle managers, who include
 measures such as nurse turnover rates and clinical indicators, and who are held accountable for
 unit/department outcomes.
- Evidence of ongoing staff evaluation of middle managers exists that includes a feedback mechanism
 to the staff supervised that utilizes staff input in the evaluative process. Evidence that the CNO
 utilizes outcome-based evaluation and feedback from staff regarding middle management in plans for
 further development of, and incentive rewards for, middle managers.

Criteria 12: Quality Initiatives

The facility demonstrates a commitment to evidence based practice.

Quality patient outcomes and a quality nursing workplace should be the goal of all health care facilities. The use of information derived from quality initiatives in the facility, as well as from health care and management literature, should be utilized to guide clinical, operational, and ethical choices regarding policies and practices that affect nursing service.



Evidence-based practice initiatives should consider:

- Development of outcomes with benchmarks for acceptable quality of service.
- Use of research-based management strategies such as participative management models.
- Ongoing education of staff in order to foster a climate that emphasizes the value of participation in quality outcomes measurement.
- Recognition of units that have outstanding performance based on expected outcomes or that initiate investigation to improve the systems, procedures and processes on the patient care unit

Pathway to ExcellenceTM Background Information

In 2003, the Texas Nurses Association (TNA) began work to positively affect nurse retention by improving the workplace for nurses and established the Texas Nurse-FriendlyTM Program for Small/Rural Hospitals. The program was partially funded with a five-year grant from the U.S. Health Resources and Services Administration (HRSA). The goal of this program was to improve both the quality of patient care and professional satisfaction of nurses working in small and rural hospitals in Texas. The first Nurse-Friendly hospitals were designated in May 2005.

TNA received many inquiries from other states about expansion of Nurse-Friendly. TNA sought to transfer the program to a robust, collegial organization that could build on the program's success, while assuring the program's integrity as it was made available to facilities nationwide. From ANCC's perspective, the high quality and superb reputation of the Texas Nurse-Friendly hospital designation program made it a perfect addition to ANCC's existing portfolio of credentialing activities. Thus, a true "win-win" was born and in 2007 ANCC acquired the Texas Nurse-Friendly program.

In launching the Texas Nurse-Friendly Program to a national audience, ANCC re-named the program, now known as the Pathway to Excellence ProgramTM.

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