

TRIAGE NOTES

LETTER FROM THE PRESIDENT

Mary Berry Bovia

Emergency Nurses like change. When I say that some

patients in our assignment. Our nursing is based on us being able to change our priorities quickly. This is something that we do but as I attended the Emergency Nursing 2018 conference in Pittsburgh, PA this past September it became more obvious to me.

NEXT MEETING:

Michigan State Council Meeting

Fri, Nov 16, 2018 10:00 AM - 2:00 PM EST

Please join my meeting from your computer, tablet or smartphone.

<https://global.gotomeeting.com/join/620416317>

You can also dial in using your phone.

United States: [+1 \(312\) 757-3121](tel:+13127573121)

Access Code: 620-416-317

will shudder and others will say “really, are you sure”? Emergency Nurses excel at change because we are Emergency Nurses. Who else goes to work and wonders what will happen, who will I care for, will it be geriatric trauma, pediatric cardiac patient, someone in labor or maybe someone that is depressed and needs help? This is what we do, we are ready to change care based on what each of our patients need. We may have all three of those

Attending conferences allows networking which is one of my favorite parts. Networking is when you share practices and hear how others are providing care. You find yourself saying “we could change and do that”. You exchange email so you can ask more questions so you can possibly make a change. Sometimes you listen to others and think “we already made that change and it does work”. You make professional connections. It really is a stimulus for change.

Last year one of the ideas I heard about was how another state council did a survey on what their members wanted. If you attended our 2018 Spring Conference you took our survey.

SAVE THE DATE
MENA CONFERENCE
May 1, 2019



2018 Michigan
ENA Membership

Want to see the results. So, next year we hope that you see we are making changes based on what you want.

One of the items that you wanted changed is the Website. Well we have made the changes but you have to also make some changes so we can all network! Here are the instructions: Go to ENA.org then ENA Connect, and join Michigan State Council. We will be sending out an email for more details.

Another change that has happened here in our Michigan State Council is Jill Zuteck our President Elect for 2018 has moved to Florida. This left us without a President Elect. The by-laws state that the President will continue until there is a President Elect for one year before taking the office of President. We requested nominations and we all had opportunity to vote. Congratulations to Josie Kik! Josie is our 2019 President Elect! Look forward to working with Josie this next year.

It is also time to think about 2019. We will be having our 2019 Spring Conference at Soaring Eagle Conference Center on May 1, 2019. Please plan to join us! Also, in this issue is the call for Poster Abstracts, that is due by

March 15, 2019. Nominate your friend, chapter, colleague, or manager to recognize their work in ENA or emergency nursing. Awardees must be a current ENA member and have an unrestricted nursing license. The awards will be presented at the Awards reception on April 30, 2019. “Excellence in Emergency Nursing Award”, “Rising Star Award”, Nurse Manager / Leader Award”, “Chapter Award” and “Lifetime Achievement Award” are the awards please send the nominations by March 1st, 2019 to maryberrybovia@gmail.com . This is a great way to recognize some of the many excellent providers of emergency care in this state.

This is time to think about our State Council Executive officer positions that that will be open in 2020. Elections for Secretary, Treasurer and one Board Member At-Large will happen next spring/summer. Please send your nomination to maryberrybovia@gmail.com.

So many changes, are you ready?

Look forward to working with you all in 2019

Mary BB

Mary Berry-Bovia BSN RN CEN

Michigan State Council President

DAY ON THE HILL

Naomi J. Ishioka MSN RN CEN

ENA National day on the hill is an annual event put on by ENA to allow emergency nurses from across the nation to gather in Washington DC, review current bills that are in the house and senate, give those nurses some training in how to speak to your representatives, then provide time for those nurses to meet with their own elected officials and share the issues and why it is important to emergency nurses that certain things are addressed. over the years the bills that have been highlighted have included bills that address the plight of the mentally ill, emergency care of children, the ability of EMS to give medications, narcotic use and abuse,

violence in the workplace, funding for trauma care, and other issues that affect us every day.

This year I represented Michigan May 8th and 9th in Washington DC for the Day on the Hill event. The 4 bills that we focused on were H.R. 5223 (healthcare worker violence prevention act--addressing workplace violence against healthcare workers) H.R. 1876/S.781 (Good Samaritan Health Professionals act--giving protection and allowing out of state healthcare worker volunteers to cross state lines to volunteer and share their expertise during declared public health emergencies or disasters) S.1022 (Mission Zero act to improve trauma

care in the US.) and S.256 (the Stop, Observe, Ask and Respond act--to address the need for training for health professionals for victims of human trafficking.) I was able to meet with Alex Graff from Senator Stabenow's office, Daniel Foster from House Representative Sander Levin's office, as well as Devin Parsons from Senator Gary Peter's office. All three were very interested, and in particular were interested in the violence against Nurses topic. It was surprising to me that none of them were aware of the issue, or the fact that violence is such a problem. Even though it was a house bill, the senator's aides were very interested in speaking about this topic. Alex Graff from Stabenow's office was aware of the attempts in Michigan to pass legislation and was surprised that it has not passed. He was also the only one who was aware of the problem of human trafficking in the nation and in the state. I found myself educating the other two aides on the topic and was thankful that I had done my homework and knew the facts. All three promised to speak to their elected officials and get back to me about what they could do. So, what can YOU as a nurse do to help out? First, every emergency nurse has the right--and indeed the responsibility as a voting citizen-- to be aware of the issues both at the state as well as at the national level. The bills mentioned above are only a few of the bills out there at the national level that could affect our jobs. If you are interested in more, you can visit the National ENA website: <https://www.ena.org/government-relations> for more information. Second, you can contact your own national and state elected officials and make your voice heard. How do you do that? Write a letter, an email, or go to a coffee hour! Pick one or two bills that are personally interesting to you, and prepare yourself. Look up your elected official, and know where they stand if possible. Be well aware of the facts and the statistics or studies that support your issue. (you can take notes and bring them with you if you need to!) have a personal story that you can share. A good place to start is Michigan Senate bill # 33. our Violence Against Healthcare Workers bill. For more information, you can visit the Michigan ENA's website where you will find all you need to know about this bill. <http://www.michiganena.org/advocacy--government-affairs-256/>

If you do have the opportunity to meet with an elected official, just tell your story! They are generally personable people and willing to listen. Respect their time, they are busy people, but remember as a voter, and more importantly as a representative of a respected profession, you matter to them. Make your request clear at the end (I am here to ask that you support and cosponsor _____ ." Thank them for their time. Follow up with an email or letter thanking them for their time and reminding them of your request. If you have any questions or are interested in getting more involved, feel free to contact me at Nurseomi@comcast.net.

Membership Updates

Stephanie Wilson MENA Membership Chair

I am saddened to announce that due to lack of membership participation in some of our Michigan chapters, the following chapters have been dissolved effective immediately— Southwest Chapter #151 and Western UP Chapter #449. Those members have been reassigned to the following chapters:

Huron Valley Chapter #145	Little Traverse Bay Chapter #345	West Michigan Chapter #153
Wayne	Gogebic	Allegan
Washtenaw	Ontonagon	Barry
Jackson	Houghton	Eaton
Hillsdale	Iron	Calhoun
Lenawee	Keweenaw	Kalamazoo
Monroe	Baraga	VanBuren
	Marquette	Berrien
	Menominee	Cass
	Delta	St. Joseph
		Branch

I urge you to contact your new chapter President and learn how you can become more involved at the chapter level. You may also contact the Michigan ENA President to find out how to get involved at the state level.

I would be remiss if I did not thank those engaged members of our now dissolved chapters who worked so hard over the last several years, trying to keep these two chapters alive and active. Your efforts are truly appreciated. We hope that you will continue to work with the leaders of your new chapter affiliations to help make our three remaining chapters even more successful!

Huron Valley Chapter President: Kevin Romanchik

kromanchik@gmail.com

MENA website: <http://www.michiganena.org/huron-valley-chapter-145-147/.com/huronvalleychapter.ena>

Facebook: m.facebook

Little Traverse Bay Chapter President: Dianne Wren

dwren10044@aol.com

MENA website: <http://www.michiganena.org/little-traverse-bay-345-33/>

West Michigan Chapter President: Chad Galdys

crgaldys@comcast.net

MENA website: <http://www.michiganena.org/west-michigan-chapter-36/>

MENA President: Mary Berry-Bovia

maryberrybovia@gmail.com

MENA website: <https://www.michiganena.org>



Transformational Leadership: One Emergency Department's Journey

Mark Goldstein, MSN, RN, EMT-P I/C
2018 ENA Annual Conference Poster Presentations

Introduction

The demands of healthcare are increasing and the temporal needs of associates are ever expanding. The emergency setting is an exhilarating setting but has inherent challenges if there is lack of leadership, vision and clinical support. A literature review reveals a greater need for transformational leadership and support to clinical staff which leads to shared governance structure resulting in higher retention rates. Highly reliable organizations have high scores regarding employee engagement, patient satisfaction and patient outcomes which are correlative to transformational leadership, strong shared governance and eventually great retention. Our emergency department struggled for consistent leadership and developed a plan to support staff while restructuring its leadership structure and expectations. The ultimate goal was a robust Shared Governance Structure.

Purpose and Objectives

The purpose of shared governance and transformational leadership is to guide best practice by having associates research, survey, test, evaluate and implement change. Servant leadership provides staff empowerment by giving them the opportunity for growth and the ability to lead others which yields higher associate engagement and satisfaction. This also has an effect on patient satisfaction as well. Staff retention is part of the resiliency process that adds value to the organization, improves stewardship, and improve the morale of a department which also provides and collaborative team. Recognizing associates, identifying and supporting their needs, and encouraging a staff-lead approach partnered with visionary leadership promotes retention and resiliency.

What was Critical to Success

Our elements for success were visionary leadership grown from within the department. The department identifies succession planning as an essential part of growth, development and shared governance. Inclusion instead of exclusion is another attribute that lead our team as collaborators. Open forums to include associates as part of the process and solution for areas of concern and opportunity. Staff led project improvements, solicited feedback and direction from within their own team members, and a supportive, competent and compassionate leadership team.

What We Learned

Identifying key stakeholders and developing an action plan to create measurable goals and objectives is imperative. You cannot achieve success without the buy in and contribution of its members. Our frontline staff have a sundry of experience and are masters of process improvement and provide solutions to obstacles or challenges. Without a robust shared governance, guided and supported by a mission lead leadership team, our journey of excellence would not be evident within the community and health system.

Methods

The setting was a suburban level 1 trauma center. A descriptive design using a questionnaire with a convenience sample of emergency department staff. The survey (e.g. Press Ganey) provided the department leadership with national benchmarking as well as comparison to other workgroups in the organization. Data were analyzed using descriptive correlative design. The sample study consisted of nurses and emergency department technicians working in a high volume, high acuity level 1 trauma center in a metropolitan area. The survey

measures issues that relate both employee satisfaction and engagement. The second survey was the Press Ganey Patient Satisfaction Survey. These patient surveys are randomized and measures patient satisfaction. The third metric we used was our annualized turnover rate and vacancy rate.

Results

There were 118 associate surveys distributed, 75 surveys were completed (resulting in 64% response rate). The workgroup has a mean score (overall rating) of 91 (on a scale 0-100). *Table 1* reports responses were ranked by the respondents: “The person I report to treats me with respect” (4.52 vs. 4.34; 95% favorable), “The person who reports to me is a good communicator” (4.37 vs 3.94; 91% favorable), “The person I report to cares about my job satisfaction” (4.21 vs. 4.11; 84% favorable), “The person I report to encourages teamwork”. (4.41 vs. 4.20; 97% favorable), “I respect the abilities of the person to whom I report” (4.48 vs. 4.24; 96% favorable). This workgroup shows that employees in this department are more satisfied and engaged in comparison to working groups in the organization and to the national database. Many questions ranked leadership and management as a high performer. *Table 2* reports top box percentile improvement of patient satisfaction scores (e.g. Press Ganey) respective of nursing. This is inferring with improved employee satisfaction leads to improved patient satisfaction. *Table 3* reports our FY15 turnover rate was 35.24% and the vacancy rate was 25%. Our FY17 turnover rate improved to 18.98% with a vacancy rate of 1.9%. Respectively our turnover rate improvement and reduction was 60%. Whereas our vacancy rated reduced and improved to 170%. We are optimistic with our projections to experience a turnover rate of 16.5% and a vacancy rate of 2% for 2018-19.

Next Steps

During a two-year timeframe, employee engagement and satisfaction was not as optimal and had areas for opportunity. A collaborative effort

among new leadership combined with clinical staff lead to a highly reliable emergency department. We empowered staff to participate in leading change. This was through shared governance partnered with visionary leadership. We identify transformational leadership is a fundamental element for employee engagement, employee satisfaction, and patient satisfaction ³.

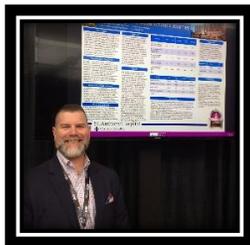
Our Unit Based Council implemented five projects in 2015, six projects in 2016 and seven projects in 2017. We identify shared governance and transformational leadership is key and crucial for employee engagement, employee satisfaction, and patient satisfaction. Upon new hire orientation, associates are encouraged to be a part of process and projects within their unit. An open door policy with leadership and even open forum for associates to bring ideas, concerns and items forward to their UBC is highly encouraged as well.

Discussion

Transformational leadership and shared governance is critical for a positive change in healthcare. Our data identifies an engaged and satisfied workforce to include satisfied patients. Several elements of transformational leadership are being authentic, having emotional intelligence, being a “Coach, Guide and Mentor”. These attributes enable leaders to have efficient and effective associates, have higher patient satisfaction scores and exceptional patient outcomes. Empowering, engaging staff and leadership together yields better results ⁴.

References

1. Brody, A. A., Barnes, K., Ruble, C., & Sakowski, J. (2014). Evidence-based practice councils: Potential path to staff nurse empowerment and leadership growth. *Journal of Nursing Administration, 42*, 28-33.
2. DeVivo, D., Griffin, M. T., Donahue, M., & Fitzpatrick, J. (2013). Perceptions of empowerment among ED nurses. *Journal of Emergency Nursing*, doi: 10.1016/j.jen.2010.10.011
3. Kear, M., Duncan, P., Fansler, J., Hunt, K. (2012) Nursing shared governance: leading a journey of excellence. *Journal of Nursing Administration, 42*(6), 315-317. June.
4. Siller, J., Dolansky, M.A., Clavelle, J.T., & Fitzpatrick, J.J. (2016). Shared governance and work engagement in emergency nurses. *Journal of Emergency Nursing, 42*(4), 325-330.



So, you want to be a Lantern Emergency Department?

Mark Goldstein, MSN, RN, EMT-P I/C
2018 Michigan ENA Delegate

Our very own Mark Goldstein, 2018 Michigan ENA Delegate, had the fortunate opportunity to have experienced not one, but be a part of two exemplar Emergency Departments. In 2011 St John Emergency Department in Detroit Michigan was awarded the ENA Lantern Award, the following year Beaumont Grosse Pointe was a recipient of the award. In 2014 University of Michigan Hospital & Health Centers – C.S. Mott Children's Hospital, Children's Emergency Services received the award and in 2017 University of Michigan Children's Emergency Services achieved the Lantern award. The state of Michigan is rich in emergency nursing practice and care.

The Lantern Award is a recognition award given to emergency departments that exemplify exceptional practice and innovative performance in the core areas of leadership, practice, education, advocacy and research. The award is a visible symbol of an emergency department's commitment to quality, presence of a healthy work environment and accomplishment in incorporating evidence-based practice and innovation into emergency care.

Mark was a guest speaker at the 2018 National ENA Conference in Pittsburgh for "Lighting the Way to Excellence: Lantern Award Recipient Panel" moderated by Will Stewart, MSN, RN, EMT-P, CEN, NE-BC. He was one of several guest speakers who spoke regarding the lantern process. Mark and the panel spoke to what exceptional practices and innovative projects made their ED exceptional. They spoke of how they appraised their readiness to demonstrate outstanding evidence and outcomes. They give key ingredients to inspire and apply for the Lantern Award. Several suggestions were; expect a year of planning, documenting and project management. This will also include engage a team of associates to address the exemplars, sets a timeline, meet monthly, collaborate with the quality department and several other departments, create an excel file and SharePoint to deposit exemplars. If you are fortunate, have a nurse scientist or researcher review all exemplars with content writers and expect several revisions and ensure the questions are answered. Lastly, submit the packet on time and ensure your medical director and staff stays on top of exemplars.

We know many Michigan Emergency Departments have "The Right Stuff" to demonstrate and highlight their own department. Please take the opportunity to consider the ENA Lantern journey. The reward and recognition alone is awesome!



2018 General Assembly ENA Resolution Update:

What an amazing time this year at the 2018 ENA General Assembly in Pittsburgh, PA. Over 750 ENA member and international member and Delegates discussed and debated three (3) proposed Bylaw Amendments and eight (8) proposed Resolutions. We spent a day and a half working for the members of ENA, our patients and community. One ENA Resolution was GA 18-05 entitled; “Support of Emergency Nurses After Violence”.

S: Emergency Nurses believe and feel they can be supported by the Emergency Nurses Association (ENA) by creating a *resolution* to advocate and acknowledge the need for additional research of primary and secondary trauma of workplace violence (WPV) and development of interventions to limit the negative nursing outcomes.

B: The author, Bill Schueler, highlight many of the well-known and marquee WPV research and articles. Many citations were through ENA and the Bureau of Labor Statistics. Many of our own state council members and members of Michigan ENA have experienced workplace violence. There is limited research in this area on how Emergency Nurses should handle and manage the vicarious trauma we experience.

A: This resolution was written by one author (1) and endorsed by three (3) State Councils, and supported by six (6) past ENA Presidents and 67 ENA member supporters. The author references ENA bylaws, mission, values and strategic initiative as elements on why we need to support a resolution. The author also notes ENA WPV position statement and public health policy as an element of safety. Currently ENA has a WPV toolkit that many of our organizations use. The author would like to update this toolkit addressing WPV and support of the emergency nurse after violence.

R: By supporting this simple resolution, ENA would have the ability to place \$10,000 of funding to revise the current WPV toolkit and develop additional action plans to mitigate the trauma were experience after WPV.

There was not much debate on this matter. By almost unanimous vote, this resolution passed. We look forward for ENA to research and support our nurses and staff who experience workplace violence. This was at the forefront of our ENA President opening remarks.

Mark Goldstein, MSN, RN, EMT-P I/C
2018 Michigan ENA Delegate





EMERGENCY NURSES ASSOCIATION

SAFE PRACTICE, SAFE CARE

Michigan State Council

Michigan House Bill 6203

Workplace Violence (WPV) Bill

According to a Journal of Emergency Nursing 2014 article, in the previous year, 76.0% of emergency nurses experienced violence (verbal abuse by patients, 54.2%; physical abuse by patients, 29.9%; verbal abuse by visitors, 32.9%; and physical by visitors, 3.5%), such as shouting or yelling (60.0% by patients and 35.8% by visitors), swearing or cursing (53.5% by patients and 24.9% by visitors), grabbing (37.8% by patients and 1.1% by visitors), and scratching or kicking (27.4% by patients and 0.8% by visitors). (<https://www.ncbi.nlm.nih.gov/pubmed/24054728>)

If you haven't been the target of workplace violence in the past year, odds are you know someone at work who has. House Bill 6203 will go a long way toward stopping this trend in Michigan.

Bill introduced by Hank Vaupel District #47



*District #47 is Part of Livingston County
which includes:*

- Howell City
- Cohocah TWP
- Conway TWP
- Deerfield TWP
- Fenton City (part of)
- Handy TWP
- Hartland TWP
- Iosco TWP
- Marion TWP
- Tyrone TWP
- Unadilla TWP

Bill currently in the Law and Justice Committee



Chair: Klint Kesto District #39

Part of Oakland County

- Commerce Township
- West Bloomfield TWP (part of)
- Wixom City

HB 6203 in Brief:

- Introduced by Representative Hank Vaupel, District #47
- Referred to the Committee on Law and Justice, June 2018.
- New bill includes all Health Professionals & Medical Volunteers.
- Bill: increased penalty for assaulting ***ALL*** Health Professionals & Medical Volunteers as a Felony.
- The penalties imposed by law would increase with the amount of harm suffered by the victim.
- Current Michigan law only provides these protections to police, firefighters, paramedics and other EMT's and other first responders.
- The Bill, if not passed in 2018 would require re-introduction in 2019. (We are hopeful Rep. Vaupel would reintroduce it)

How you can help protect Michigan nurses and patients

- Please contact your Michigan Representative and ask them to support this important legislation.
- If you have never contacted your elected officials before, don't worry. It is easy. You can send them an email, call their office and ask their staff to support this bill, or even visit them in their district at their office or at their "coffee hours" held at local businesses where they speak with constituents.
- **Contact Representative Vaupel's**, call him and thank him for taking the lead on this important issue.
- **Contact Representative Kesto**, call him or meet for coffee hours to express your support for this bill.
- **If you live in one of the districts below please make special note they sit on the Law and Justice Committee and reach out to them as soon as possible to express your support for this bill.**
 - Peter Lucido, #36
 - Joseph Graves, #51
 - Martin Howrylak, #41
 - Brett Roberts, #65
 - Lana Theis, #42
 - Thomas Albert, #86
 - Stephanie Chang, #6
 - Rose Mary Robinson, #4
 - Vanessa Guerra, #95
 - Frank Liberati, #13
 - Robert Wittenberg, #27

Don't worry that they might ask you a question you cannot answer. The MENA is here to support you. It is always okay to tell them that you don't have that answer yourself. Simply ask for the best way to contact them, usually by email, and tell them that you will check with MENA and get back to them with an answer. Please make sure to send them a follow up message with the answer if you do this. Contact MENA with any questions <http://www.michiganena.org/contact-us-133/>

- Powerful workplace violence youtube video. <https://www.youtube.com/watch?v=-ZGpp0wESxw>. Consider showing this video during your meetings to spread awareness.
- Please send us a message to **MENA** via our Facebook page if you make contact with your Representative. We would love to keep our momentum moving forward on this important legislation and highlight your visit on our Facebook page.



Michigan Emergency Nurses Association
Annual Spring Conference
May 1, 2019
 Mt. Pleasant MI

CALL FOR POSTER ABSTRACTS

Michigan ENA would like to provide an opportunity for members to share clinical innovations, evidence-based projects, quality improvement initiative or original research that is related to Emergency Nursing at our Annual Spring Conference held at Mt. Pleasant MI on May 9, 2018.

Please complete this application form by **March 15th, 2019** in order for your poster abstract to be considered for a poster presentation at the conference.

You will be notified by April 1st, 2019.

Name & Credentials:
Email:
Title of Poster:
Author(s) names and affiliations:
<p>Purpose: Begin with one to two background sentences stating the scope or nature of the problem you are addressing in your research or evidence-based project; i.e.' the rationale supporting the need for the endeavor. Clearly state the objective of your study/project.</p>
<p>Design, Setting, Sample: For research studies, state the design using appropriate terminology (e.g., utilization, prospective, descriptive, qualitative, quasi-experimental, experimental, etc.). For evidence-based projects, describe whether this was a staff development project, quality assurance project, etc.</p>
<p>Methods: Describe the study/project procedures, interventions, and evaluation methods or data analysis. Instruments or tools (including questionnaires) should be described in detail. Variables and measurements should be defined.</p>

Results/Outcomes: Present the specific data that address your research question or project purpose. Include statistical data, if appropriate. Evaluate the outcomes of this study/project in relation to the need for this study/project. For research in progress, present the preliminary findings.

Implications: State reasoned conclusions based on the data presented and implications for emergency nursing research, education, practice and/or policy. Provide recommendations for managers, leaders, nurses and researchers as appropriate. For research in progress, provide anticipated or projected outcomes of the study.

Submit completed application to Mary Berry-Bovia at maryberrybovia@gmail.com

Poster Presentation Criteria:

- There are two options for poster format
 - Use a tri-fold board that will sit on a table-top (tables provided) OR
 - Bring an easel to display your poster
- Board should be no larger than 48X36
- Posters will be displayed for the entirety of the conference
- There will be opportunity to distribute handouts regarding your poster

Conference attendees will vote on the top poster and the winner will receive the “People’s Choice Award”.

CERTIFIED EMERGENCY NURSE PREPARATION COURSE

Metro is hosting Solheim’s Certified Emergency Nurse (CEN) Preparation Course!

<https://metrohealth.net/events/certified-emergency-nurse-preparation-course/>