

Hackettstown Regional Medical Center
UNIT/DEPARTMENT LEVEL STRUCTURE AND PLAN OF CARE
Department of Nursing – 2015

Name of Patient Care Service or Unit:

EDUCATION DEPARTMENT/PATIENT EDUCATION

Chief Nursing Officer: Mary Ann Anderson MSN, RN, NEA-BC

**Approved by: DONNA KENDRICK, BSN, RN, CDE
Manager**

**CRISTA MINTHORN RN-BC, MSN, ANP-BC
Director**

I. PURPOSE

A. AUTHORITY AND RESPONSIBILITY

The Education Manager is responsible for the administration of operations, staff development, financial and performance improvement activities for the department and accountable to the Director of Professional Development & Innovative Practice. The Manager provides leadership to the Patient Educator and Educators by utilizing avenues of open communication. S/he will support efforts to continually improve the quality of clinical care provided for patients at HRMC. Clinicians are expected to demonstrate authority, responsibility and accountability for their individual practice/competency in addition to utilizing educational opportunities for professional growth.

The Staff Development Department in conjunction with the Human Resources Department, provides orientation, competency, mandatory training and strategic initiatives including the coordination of Leadership training.

B. GOAL, VISION, MISSION, KEY VALUES

The Education Department is a professional team that provides education and resources for all organization employees, physicians, patients and families. Education is provided with the understanding that each person is an individual and the Department provides for needs on an individual basis.

Basic Tenets:

1. Provide progressive, individualized services that meet the staff's needs and expectations.
2. Offer consultation to Department Leaders throughout the organization as well as Leadership on competency and continuing education needs.
3. Provide health education that promotes and maintains an optimal level of wellness for each patient.

II. SCOPE OF SERVICE

The Education Department consists of the following staff (in addition to the Director and Manager)

Staff Educator: Full time and Per Diems

Patient Educator

Diabetes Educator (Current Manager)

Registered Dietitian (Per Diem Diabetes Program)

III. RECOGNIZED STANDARDS OR PRACTICE GUIDELINES

The Education Department utilizes the following standards/guidelines. Including, but not limited to the following:

1. ANA Nursing Professional Development: Scope and Standards of Practice
2. American Heart Association (Basic Life Support/Advanced Life Support)
3. American Diabetes Association-American Association of Diabetes Educators
4. American Stroke Association
5. Other evidenced-based guidelines as needed

IV. THE APPROPRIATENESS, CLINICAL NECESSITY, AND TIMELINESS OF SUPPORT SERVICES

A. KEY INTERDEPARTMENTAL RELATIONSHIPS

The Director and Manager are responsible for the development of ancillary department relationships to assure the effective and efficient accomplishment of mutual goals or in the resolution of identified problems. The communication with Human Resources facilitates onboarding of employees as well as ongoing mandatory education, training and competency needs. The Director works with the President's Council to identify leadership training needs as well as projects related to the strategic plan. The Manager collaborates with The Center for Healthier Living to coordinate certification courses such as BLS/PALS/ACLS as well as Nutritional Care Services to meet the needs of the Diabetes Program. The Department also works closely with the clinical department managers regarding staff competency and training needs.

The Patient Educator works closely with the Care Management Department and Nursing Department staff for patient needs. The Department coordinates computer initial and ongoing training with the Clinical Informatics Department. All new/changes in equipment are coordinated by the Education Manager/Educator with Materials Management and Bio-Med Departments. Emphasis on multidisciplinary relationships is demonstrated by educator involvement on organization-wide committees, intradepartmental teams and interdisciplinary shared governance councils.

B. HOURS OF OPERATION

The Education Department is staffed Monday to Friday from 8:00 am to 4:30pm. Educators may flex hours if necessary for organizational training and support.

C. MEDICAL STAFF – COMMUNICATION

Educators are an active member of the Stroke Committee, Tumor Conference Committee, CHF Team, and Critical Care Committee, PI Council, Ethics Committee as well as the Clinical Standards Committee, chaired by the CMO. Internal communication to physicians via these committees is ongoing.

V. THE EXTENT TO WHICH THE LEVEL OF CARE OR SERVICE MEETS PATIENTS' CARE NEEDS

A. PATIENT/CUSTOMER SERVICE AND EXPECTATIONS

The Patient Educator is an advanced practice nurse who facilitates patient education in collaboration with the staff nurse. S/he reviews existing patient education materials and documentation for relevancy and evidenced-based practice and develops patient education materials in conjunction with the interdisciplinary shared governance councils and teams, e.g., CHF Team. S/he consults with, and provides support to, patients and their families who are contemplating or enrolled in Palliative Care. S/he also provides direct education to the following patient populations and assigned staff regarding selected complex cases such as newly diagnosed diabetics, new ostomies as well as complex patient wounds/pressure ulcers in conjunction with the Wound Care Nurse. The Patient Educator is also a part of the Interdisciplinary Patient Rounds held on the inpatient unit to alert staff in identifying potential patient's education needs as well as identify staff learning needs regarding patient education.

The Diabetes Education Program is certified by the American Association of Diabetes Educators. The Education Manager coordinates the program and is responsible for individual counseling as well as group education classes and a monthly support group.

The Education Manager acts as the liaison with Schools of Nursing to coordinate clinical rotations, including Nursing Instructor orientation to the facility. S/he also assists with onboarding of nursing students in conjunction with Human Resources and Employee Health.

B. PERFORMANCE IMPROVEMENT PLAN

Monthly statistics regarding staff and patient education are collected and reported to Finance. The Patient Educator maintains data collection for selected patient education activities including Palliative Care Consults. The Diabetes Education Program quality indicators are reported at least annually to the Hospital Performance Improvement Committee. This data may be used in performance improvement activities as warranted.

The Performance Improvement Process methodology used is an adaptation of the Plan, Do, Check, Act Improvement cycle and Lean methodology. Lean methodology and tools are used at HRMC and are part of the Nursing Quality Assessment and Performance Improvement Program. Lean empowers staff to address issues discovered in their work areas.

C. QUALITY MEASURES CRITERIA FOR PROCESS AND OUTCOME IMPROVEMENT:

- a. High Risk**
- b. Low Volume**

- c. **Problem Prone**
- d. **Cost Impact**

D. DEPARTMENT SPECIFIC QUALITY IMPROVEMENT ACTIVITIES

The indicators outlined below are routinely monitored:

- Number and mix of Nursing Department employees
- RN orientation evaluation
- RN training, competency
- HRMC Clinical Staff competency
- Nursing continuing education needs assessments and surveys
- Numbers and types of patient education activities
- Diabetes Education Session evaluation data

E. PATIENT SATISFACTION

The Diabetes Education Program utilizes a Patient Advisory Board that evaluates the program in regards to patient satisfaction. A summative evaluation is provided at the end of each class and is aggregated and analyzed by the Education Manager for improvement. Information from these evaluations may be incorporated into process improvement activities. Additionally, follow-up telephone and secure emails are exchanged after counseling sessions and any feedback given is collected that may impact patient and/or physician satisfaction with the program.

F. ANNUAL PLAN EVALUATION

The department specific Quality Improvement activities are evaluated at least annually for:

1. Effective implementation of quality and quality improvement activities
2. Monitoring of problem resolutions
3. Collaboration in performance activities
4. Establishment of priority processes for review

VI. AVAILABILITY OF NECESSARY STAFF

A. STAFF GUIDELINES

1. Skill Level of Personnel Involved in Staff/Patient Education

The Director of Professional Development is a master's prepared educator with organizational development experience preferred.

The Education Manager is an RN with staff development/education experience as well as Management/Leadership experience. A Bachelor's Degree in Nursing is required.

The Educator is an RN with advanced training in adult learning principles, competency and program development for continuing education. A Bachelor's Degree in Nursing is required. Certification in Nursing Professional Development is preferred.

The Patient Educator is an advanced clinician skilled in adult learning as well as the "Teach Back" methodology. An advanced practice nurse is preferred due to the complex care necessary for the identified patient population.

The Diabetes Educator must be certified in Diabetes Education by the National Certification Board of Diabetes Educators and highly skilled in adult learning, program planning and counseling.

2. Staff Development

Staff will maintain clinical competence by attending continuing education programs, self-development opportunities and completion of annual mandatory requirements. They also will maintain competence in their assigned area(s) of expertise.

3. Staff Evaluation

Initial 90 day, annual, and as needed.

B. STAFFING PLAN

Staffing varies according to assigned projects. The Education Manager may use per diem staff in order to meet special projects and competency needs.

C. STAFF - COMMUNICATION

Staff meetings will be scheduled at least quarterly. Weekly huddles are held with the Director/Manager and Educators, including per diem check-ins. Information is emailed to department members as necessary. A yearly vacation calendar is posted in the Patient Educator Office that includes requested time off. Each staff member is responsible to use all these tools to keep informed about all pertinent information.

D. SHARED GOVERNANCE

The Director, Manager and Educator are representatives on the Interdisciplinary Shared Governance Councils. Information is shared with the Department members as necessary.