

VA Nursing Service:  
Making a Difference in  
Veterans' Lives



*"To Care for Him Who Shall  
Have Borne the Battle and for  
His Widow, and His Orphan."  
- Abraham Lincoln, March 1865*



## Table of Contents

<i>A Message from the Secretary of Veterans Affairs</i> .....	1
<i>A Message from the Acting Under Secretary for Health</i> .....	2
<i>A Message from the Chief Nursing Officer</i> .....	3
<i>Noble Tradition, Culture of Excellence</i> .....	4
<i>The Mission</i> .....	4
<i>History of Excellence</i> .....	5
<i>Workforce</i> .....	6
<i>Who Are VA's Nurses?</i> .....	6
<i>Education Programs</i> .....	7
<i>Strategies Supporting VA Nurses</i> .....	8
<i>National Nursing Strategic Plan</i> .....	9
<i>Office of Nursing Services: Organizational &amp; Functional Model</i> .....	10
<i>National Nursing Strategic Plan: 2003-2007</i> .....	11
<i>Leadership Development</i> .....	12
<i>Nursing Leadership Programs</i> .....	13
<i>Technology and System Design</i> .....	14
<i>Care Coordination and Patient Self-Management</i> .....	15
<i>Workforce Development</i> .....	16
<i>Magnet Culture</i> .....	17
<i>Collaboration</i> .....	18
<i>Evidence-Based Nursing Practice</i> .....	19
<i>Nursing Research Advisory Group (NRAG)</i> .....	20
<i>Advanced Practice Nurse Advisory Group (APNAG)</i> .....	21
<i>Patient and Staff Safety, A Nursing Priority</i> .....	22
<i>Recognizing Nursing Excellence: National VA Award Recognition Programs</i> ..	24
<i>Secretary's Award for Excellence in Nursing</i> .....	25
<i>Secretary's Award for Advancement of Nursing Programs</i> .....	25
<i>Office of Nursing Services Innovation Award</i> .....	26
<i>Shaping the Future of VA Nursing</i> .....	27
<i>ONS Communication and Resource Strategies</i> .....	27
<i>National Commission on VA Nursing</i> .....	27
<i>The Office of Nursing Services: Priorities and Goals</i> .....	28

### Note:

There are repeated references throughout this report to a variety of different Web sites. For those readers who do not have access to the VA Intranet (within the VA firewall) some of these sites may not be accessible.



## *A Message from the Secretary of Veterans Affairs*

---

I have watched, with a degree of wonder and a sense of pride, the changes in the veterans health care system in recent years. An already good system has steadily improved to the point where the Department of Veterans Affairs (VA) holds a position of world leadership in areas such as patient safety and quality assurance. I am keenly aware that VA nurses have been in the forefront of that change, yet I believe they also represent something that remains constant in our system.

Clearly, VA nurses played instrumental roles in VA's transformation from an inpatient model of care to a highly efficient system of primary care-focused outpatient clinics that is backed by a well-integrated system of tertiary care and other services. As the key coordinators of care, VA's registered nurses are pioneers in this new way of doing business. Of course, the rest of the VA nursing team – the licensed practical/vocational nurses and nursing assistants – contribute greatly to VA's success as their knowledge, expertise, and hard work brought the new concept to life in providing the comprehensive, compassionate care our Nation's veterans need and deserve.

In spite of their impressive record as agents of change, I still find myself thinking about VA nurses as a constant. Over my many years of involvement in veterans affairs, visiting hundreds of facilities all over the United States, I have seen the “backbone” of the veterans health care system: it's hardworking VA nurses, engaged in vital clinical work, coordinating care, comforting families, and handling essential management and administrative tasks.

In recent years, nurses have assumed greater degrees of leadership on the health care team, and some have taken on increased clinical roles. But the fundamental importance of VA nurses as highly valued members of the VA health care family has not changed, and I believe it never will.

It is a special pleasure to recognize and congratulate VA's wonderful nurses, their leaders in the Office of Nursing Services in VA Central Office, and the entire VA nursing staff for the compassion and professionalism they bring to their daily work of caring for America's veterans.

A handwritten signature in cursive script that reads "Anthony J. Principi".

Anthony J. Principi  
Secretary of Veterans Affairs



## *A Message from the Acting Under Secretary for Health*

---

In operating the largest integrated health care system in the United States, it's not particularly remarkable that the Veterans Health Administration (VHA) is also the Nation's foremost employer of nurses and nursing staff. What is remarkable, however, is the level of dedication and excellence personified by the more than 38,000 registered nurses, 10,000 licensed practical/vocational nurses, and 9,000 nursing assistants who have dedicated their lives and careers to healing the illnesses and injuries that befall America's veterans.

Some of the Department of Veterans Affairs (VA) nursing professionals work behind the scenes; they manage the transportation of patients or use their skills to expand the frontiers of research. But the vast majority of VA nurses and other nursing staff personnel provide direct patient care. Veterans who come to VA clinics or hospitals often find that VA nurses are the first clinicians they encounter, and their love, support, and care make a lasting impression – and have a positive impact – long after a particular episode of care.

Under the leadership of VA's Chief Nursing Officer, Cathy Rick, the Office of Nursing Services (ONS) consistently provides personal and professional development and leadership opportunities for VA's dedicated nursing staff, as well as strategies for the implementation of new technologies and mechanisms to promote research on workforce issues and patient health outcomes. This report documents the goals and accomplishments of the VA Nursing Service and focuses on priorities for the future.

I appreciate this opportunity to speak directly to each and every member of the VA nursing staff. Thank you for your professional excellence today and every day in caring for those who have served our Nation. Godspeed you in your efforts to improve the delivery of that care for the veterans of tomorrow.

A handwritten signature in black ink, appearing to read "Johnathan B. Perlin".

Johnathan B. Perlin, MD, PhD, MSHA, FACP  
Acting Under Secretary for Health  
Veterans Health Administration

## A Message from the Chief Nursing Officer

---

### Celebrating Achievements and Planning for the Future

It is an honor to serve the talented nursing staff of the Veterans Health Administration (VHA). As the Chief Nursing Officer, I want to express my personal appreciation for the nursing contributions to the health and well-being of our Nation's veterans. It is with great pride that I introduce this report, depicting the talented nursing staff of the VHA and their many contributions. VA nurses are known to be dynamic change agents, influencing practice and system-wide initiatives. So, stand tall and be recognized for all that you do!

Over the past four years, I have had the pleasure of meeting many VHA nursing staff colleagues as I visited more than 100 VA facilities. During these visits, I enjoyed learning from your questions, comments, and advice as I made rounds to all types of units, clinics, and community-based programs. I also met many of our special veterans on these "walks with nursing staff" ... moments that touch me deeply and keep me energized to remain patient focused and nursing sensitive.

This report places VA nursing accomplishments and coming challenges in context by describing our National Nursing Strategic Plan. It briefly outlines the strategic goals developed within the plan to guide our national efforts to advance nursing practice across VHA. You will discover accomplishments and achievements that would not have been possible without the expertise of our

talented VHA staff and the guidance of professional partners in the health care industry.

Examples of activities related to the various goals illustrate that our efforts have been driven by a promise to focus on patient-centered care and sensitivity to professional practice and workload issues. Our toughest challenge has been developing the right clinical and administrative strategies based on reliable data. This evidence-based approach to analyzing our work and shaping our programs is described throughout the report.

The Office of Nursing Services (ONS) is charged with being the "voice for nursing" in the largest health care system in the Nation. This is a distinct privilege, but it carries enormous responsibility! In describing the headquarters advocacy role of ONS, the report emphasizes that effective communication must be bidirectional and that the best strategies to support the work of nursing have been developed based upon input solicited from field experts – both within VHA and external to our organization.

It is my hope that this report will pique the interest of nursing colleagues across VHA to participate in **shaping the future** of VA nursing practice. Future efforts will rely on the insight of our gifted VA nursing staff as **we continue to enhance information systems, evidence-**

**based practice, and career development opportunities.**

Discovering best options for patient care delivery models to meet the needs of our Nation's veterans with an **emphasis on care coordination and patient self-management** will guide our work in the coming years.

In summary, this report is offered as a description of the work of nursing in VHA and a means to communicate national priorities. Although multiple concepts and initiatives are highlighted in the report, a limited publication of this nature can provide only a brief overview. Readers are encouraged to "stay connected" through local, regional, and national avenues for communication and participation, as we fulfill our commitment to serving veterans.



Cathy Rick, RN, CNAA, FACHE  
Chief Nursing Officer  
Veterans Health Administration



# Noble Tradition, Culture of Excellence

While VA Nursing has been called “the face of VA health care,” it’s a face that cannot be depicted with a single image.

The accurate illustration would be a mosaic of dedicated and talented women and men in patient-centered, direct-service clinical roles. Nursing practice in each of these roles spans the continuum of care in primary, ambulatory, acute, geriatrics, extended, rehabilitation, and home-based care, as well as health education, research, and administration.

*VA nurses have been widely recognized for their instrumental work in initiating, developing, implementing, and monitoring the practices and policies that made the Veterans Health Administration (VHA) one of the world’s foremost authorities in patient safety and quality outcomes ...*



In recent years, VA’s large and diverse service of academically prepared, practically skilled nursing professionals and highly trained nursing assistants has been so dynamically engaged, over such a broad range of activities, that it’s difficult to articulate any one attribute that epitomizes the Department of Veterans Affairs (VA) Nursing Service. The Veterans Health Administration (VHA) has become the Nation’s acknowledged

leading employer of registered nurses (RNs), advanced practice nurses (APNs) (who assume more complex clinical and organizational responsibilities in a variety of settings and specialties), licensed practical/vocational nurses (LPN/LVNs), and nursing assistants (NAs) – an extraordinary measure in any context.

VA nurses have been widely recognized for their instrumental work in initiating, developing, implementing, and monitoring the practices and policies that made VHA one of the world’s foremost authorities in patient safety and quality outcomes evidenced by performance measures – an exceptional achievement by any assessment.

Caring for our Nation’s veterans has evolved from an unexpected necessity into an honored tradition. As nursing matured into a formal clinical profession, and modern practice standards were developed, VA Nursing Service became an integral element in VA health care delivery. Today, VA nursing staff meet the highest standards in providing quality clinical services, coordinating care, educating patients, and contributing key administrative leadership and research. They also meet a broad scope of expectations in educating staff and future nurses, collaborating with academic institutions, developing leaders within the organization, conducting essential research, and advising on complex technical or ethical issues that affect the profession and the system of care.

## *The Mission*

While simple in purpose, the actual work of serving veterans is a complex enterprise, as reflected in the fact that VHA ranks as the world’s largest health care system. From VA’s tertiary care hospitals to its community-based outpatient clinics to its extended care facilities – the women and men who comprise the nursing staff are “where the rubber meets the road” in fulfilling the VA mission. VA’s nursing staff provide the greatest proportion of direct health care service to VA patients.

The Office of Nursing Services (ONS) serves to enhance the level of professional practice, advance the application of evidence-based nursing care, and nurture the VA nursing workforce to strengthen interdisciplinary teamwork in order to provide quality, patient-centered care for the Nation’s veterans.

This report is published by the ONS to promote greater awareness of current nursing activities, practices, and services within the VA system and throughout the nursing community.



# Noble Tradition, History of Excellence

*Caring for our Nation's veterans evolved from an unexpected necessity into an honored tradition. As nursing matured into a formal clinical profession, and modern practice standards were developed, VA Nursing Service became an integral element in VA health care delivery.*



Mary Agnes McCarthy Hickey, RN,  
Superintendent of Nurses,  
U.S. Veterans' Bureau  
1921-1942

<p><b>1930</b> VA Nursing Service started with 2,500 registered nurses and took its present shape when three Federal agencies responsible for veterans programs consolidated into the new Veterans Administration.</p>	<p><b>1976</b> RNs outnumbered nursing assistants for the first time in VA.</p>
<p><b>1942</b> World War II – More than 7,000 VA employees, 1,000 of them nurses, left to join the armed forces. VA staff shortages became so acute that the Army detailed enlisted men to VA hospitals as attendants.</p>	<p><b>1990</b> Congress passed the Nurse Pay Comparability Act, the first major restructuring of VA nurse pay since 1946. The act gave VA medical centers authority and flexibility to establish locally competitive, nurse pay rates to deal with nurse shortages.</p>
<p><b>1946</b> VA RNs were given new professional status and compensated financially, based on experience, education, and competencies, independent of position. Nurse Professional Standards Boards (NPSB) were created to provide professional, peer review recommendations for appointments, promotions, special advancements, and disciplinary actions.</p>	<p><b>1990s</b> VA provided clinical experience to one out of every four professional nurses in the country (nearly 30,000 student nurses a year) through affiliations with 461 nursing schools.</p>
<p><b>1950s</b> Education became the hallmark of VA nursing, stressing the importance of advancing nurses' skills and knowledge in order to provide high-quality care.</p>	<p><b>1950s, 1960s, 1990s, 2000s</b> VA nurses continue to answer the call to serve during wartime.</p>
<p><b>1963</b> VA Nursing Service was the first health care organization to establish a position for doctorally prepared nurse researchers, formalizing the research function within VA Nursing Service.</p>	<p><b>2002</b> The Office of Nursing Services was organizationally elevated, reporting directly to the Under Secretary for Health.</p>
<p><b>1973</b> Nurse Practitioners were appointed as primary providers of patient care. The use of Clinical Nurse Specialist roles also expanded.</p>	<p><b>2003</b> The Nurse Executive position in all medical centers was endorsed by the VHA National Leadership Board as a full member of the senior management team.</p> <p>VA (Tampa VAMC) received the first ever Magnet Prize Award for Exemplary Innovation, from the American Nurses Credentialing Center (ANCC).</p>



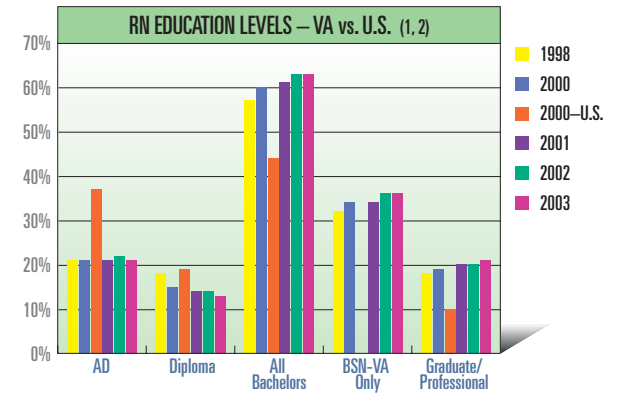
# Workforce:

## Who Are VA's Nurses?

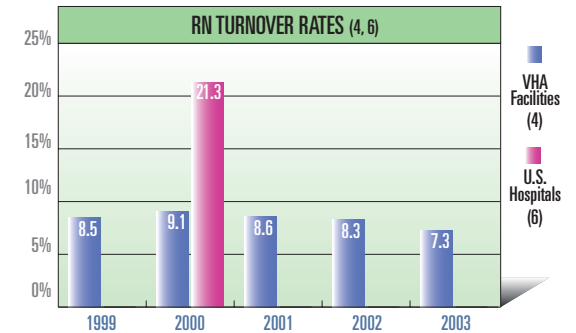
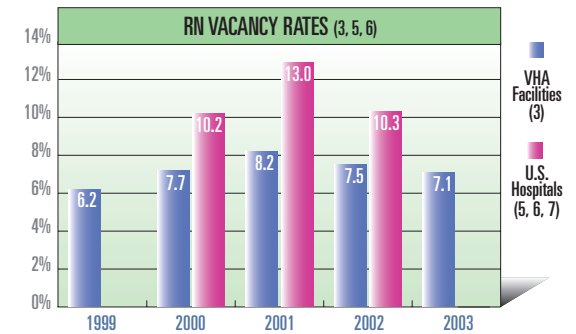
The duty to “care for those who have borne the battle” requires careful planning and tenacious management of scarce resources in order to maintain the continuity and optimize the quality of care to veterans. In addition, VHA’s status as the Nation’s largest health care employer carries a responsibility to work with health care educators and other leaders to discern workforce trends and to ensure appropriate education and training programs.

This careful watch on the pulse of the health care workforce has led VHA to focus on the impact of the national shortage of registered nurses. VA nursing leaders have conducted an extensive reexamination of fundamental recruitment and retention strategies. Determined to thoroughly study the problem and to aggressively develop solutions, the Office of Nursing Services established a task force (the Nursing Workforce Planning Group) in August 2000, charged with critically examining the VA nursing environment. The task force reviewed available 2000 data on the VA workforce and found that in many respects VA’s nursing demographics compared positively to other systems. For instance, VA demonstrated its status as an employer of choice for men and ethnic minorities in nursing, hiring higher percentages than were reflected in the general U.S. population of nurses. In 2003, these positive trends continued.

For both VA and the private sector, an aging workforce and attrition are critical issues. In 2003, the average age of VA RNs is 48 years (vs. 45 years for the National average). Less than 20% (16.5%) of VA RNs are under age 40, compared to the private sector (31.7%). Age, years of service, and retirement data indicate that 25%, 19%, and 21% of RNs, LPN/LVNs, and NAs, respectively, are projected to retire or be eligible for retirement by 2005. (See chart on page 8.)

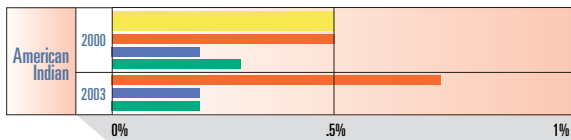
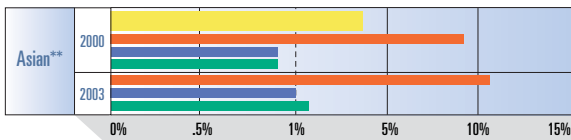
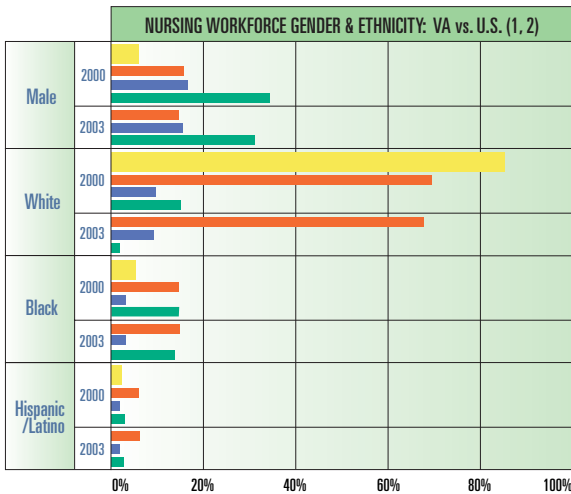


Note: DHHS does not distinguish “bachelor’s degree” from “BSN” in reporting.



### DATA SOURCES FOR THIS PAGE:

- [1] VA PAID data via Human Resources Data Mart (HRDM), VSSC Web site (<http://vssc.med.va.gov/>), extracted 1/16/04; 2/5/04; 2/12/04.
- [2] U.S. Dept. of Health and Human Services’ (DHHS) Findings from the National Sample Survey of Registered Nurses, March 2000.
- [3] VA Annual Report on Nurse Staffing, June 2003.
- [4] Workforce Information System Team (054C3); COIN PAI Report 10-247, 10-248. \*Excludes LWOP & Change in Duty Basis
- [5] Magnet Award Conference–2002.
- [6] American Organization of Nurse Executives, 2000 Acute Care Hospital Survey of RN Vacancy & Turnover Rates (Jan. 2002).
- [7] American Hospital Association, Fall 2001 Report: Healthcare Workforce Shortage and its Implications for America’s Hospitals, First Consulting Group, 2001.



	2000	2003
U.S. RNs*		
VA RNs		
VA LPN/LVN		
VA NA		

\*DHHS Note: U.S. RN counts are estimated based on survey results. Only RNs currently employed in nursing were used for this comparison.

\*\*Combined DHHS categories of “Asian” + “Native Hawaiian/Pacific Islander” to equal VSSC race category “Asian”



VA supports the academic education of the nursing workforce in clinical, administrative, and leadership areas. Training for nurses is offered through a broad array of venues varying from locally produced programs to face-to-face network and national conferences. Academic and continuing education opportunities for nurses are provided by television broadcasts over VA's internal television network, through teleconferencing, Web-based training, and purchase of software education. VA's national library network provides hardcover and online access to major nursing and medical journals.

*"The best part of working as a VA nurse is the opportunity for constant professional growth. VA is very supportive of ongoing education for nurses."*

Donna Hendel, RN, MSed  
Staff Nurse  
Community-Based Outpatient Clinic



## Education Programs

VA offers several initiatives to enhance the educational preparation of its staff, including scholarship and loan repayment programs.

Examples of these programs include:

- **Education Debt Reduction Program (EDRP)**

This program provides funding for education debt reduction for newly employed registered nurses. The EDRP allows VA to provide up to \$44,000 in education loan repayments.

- **Employee Incentive Scholarship Program (EISP)**

This scholarship program funding enables VA employees to obtain entry nursing diplomas/degrees, including LPN, associate degrees, baccalaureate degrees, and advanced degrees. However, it does not provide salary replacement funds.

- **National Nursing Education Initiative (NNEI)**

The NNEI is established under the same authority as the EISP, but is primarily aimed at providing funding for VA nurses to obtain bachelor degrees in nursing (BSNs). This program can also be used to obtain advanced degrees. The VA Nursing Qualification Standards require a BSN degree or Master's to advance to higher grades.

- **VA Nursing Education for Employees Program (VANEPP)**

This is a new initiative that provides salary replacement dollars, full-time equivalents (FTE), and funds to cover the cost of tuition, books, and certain fees to allow employees enrolled in licensed practical (or vocational) nurse (LPN/LVN), associate degree in nursing, and bachelor's degree in nursing programs to pursue their studies on a full-time basis.

- **VA Learning Opportunities Residency (VALOR)**

Initiated in the summer of 1990, this program provides opportunities for outstanding students (junior level in BSN programs) to develop competencies in clinical nursing while at an approved VA health care facility. Opportunities for learning include didactic or classroom experiences, competency-based clinical practice with a qualified registered nurse (RN) preceptor, and participation in nursing-focused clinical conferences. VALOR participants may be appointed above the beginning salary rate when employed as an RN following graduation.

- **Tuition Support Program**

Employees in health care disciplines identified as VA shortage categories are eligible for funding to enroll in job-related courses.

- **Tuition Reimbursement Program**

Tuition reimbursement is available to full-time VA employees who are enrolled in any accredited nursing degree program. Prerequisite courses required for acceptance into a degree program are also funded.

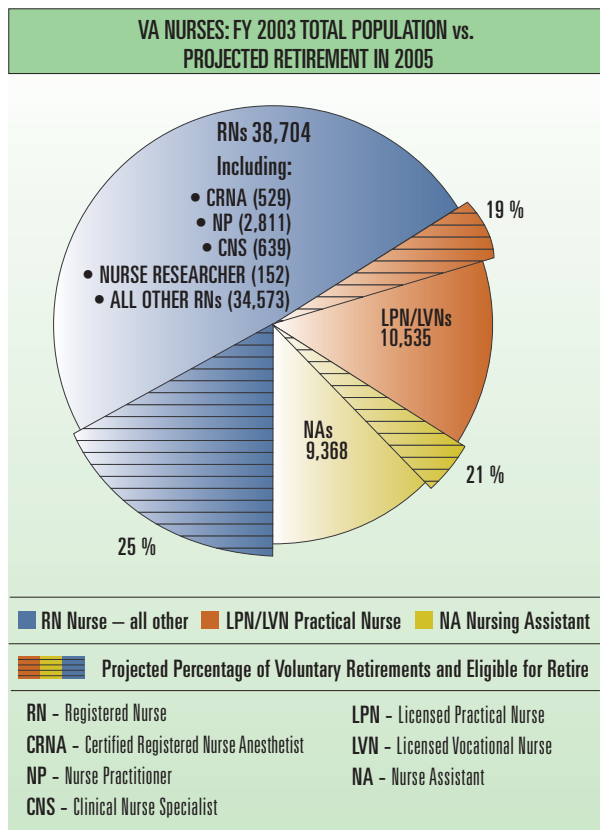
*For more information on the programs listed above, contact the Health Care Staff Development & Retention Office (HCS德罗). HCS德罗 provides support to the field in recruitment and retention of VA health care professionals through advertising, outreach, and education programs.*

- **Uniformed Services University of Health Sciences (USUHS), Doctoral Program in Nursing Sciences**

A Federal, inter-agency sponsored graduate program with an emphasis on clinical decision making in the Federal health care system, response to operational commitments and changing environments, and evaluation of population health and outcomes. VA can sponsor up to four slots/students per year.

*For more information on the USUHS Doctoral program, contact the Office of Nursing Services.*

## Workforce (continued)



VA PAID data, FY 2003 via Human Resources Data Mart (HRDM/VSSC Web site), extracted 1/16/04; 2/5/04; 2/12/04.  
 VSSC Report: Human Resources/Voluntary Retirement Projected Losses (for 2005), VSSC Web site (<http://vssc.med.va.gov/>), extracted 4/16/04.

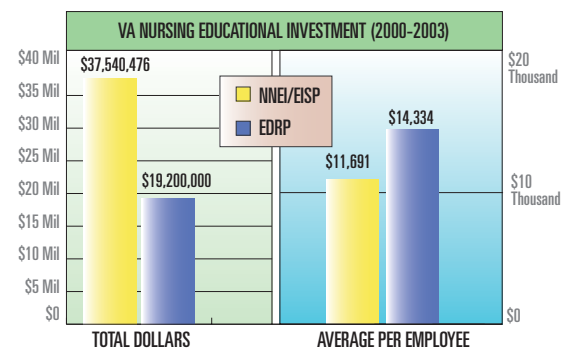
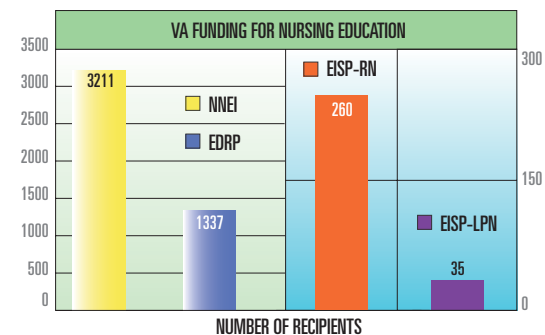
## Strategies Supporting VA Nurses

Recommendations and background information from the Nursing Workforce Planning Group are published in a report entitled, *A Call to Action: VA Response to the National Nursing Shortage* (November 2001). The report, as well as other indicators, made it clear that technological advances, modifications in delivery systems, and growing consumer expectations are requiring a nursing workforce that constantly adapts to new and varied roles. The *Call to Action* report findings and specific recommendations helped ONS develop a blueprint for nurse retention, recruitment, and outreach efforts – several of which are outlined in this publication.

ONS continues to pursue legislative and policy enhancements that will grant VHA increased autonomy to offer incentives, alternative work schedules, and various other benefits to facilitate workforce development. VA will continue to hire and value the contribution of nurses prepared at the associate, baccalaureate, master's, and doctoral level. In addition, VA employs a dedicated group of licensed practical/vocational nurses (LPN/LVNs) and nursing assistants (NAs) who are vital to the provision of nursing services in a highly complex continuum of care.

The current VA Nurse Qualification Standards (revised in 1999) are a strong factor in the growing ranks of VA nurses with advanced educational preparation. These new Standards require that RNs have a baccalaureate or master's degree to be eligible for promotion to higher grades. In support of this change, VHA offers educational support for those pursuing career advancement in the nursing field, including a commitment of \$10 million per year to the National Nursing Education Initiative (NNEI).

Through a variety of scholarship, employee tuition support, and reimbursement programs, VHA helps associate degree and diploma RNs advance to the baccalaureate level and advanced degrees in nursing. LPN/LVNs, NAs, and other VA employees are eligible for VA educational support, facilitating their advancement to RN or LPN degrees. It is VA's intent to strengthen these



Mary Raymer, RN, MA, CNA, FY2003 Report, Health Care Staff Development & Retention Office, New Orleans, LA.

programs even further by introducing a mentoring component to assist academic success and facilitate transition to work roles.

These education efforts provide the support that VA nurses need to develop clinical decision-making and critical-thinking skills, as well as professional preparation in community health, patient education, care coordination, and nursing management/leadership. Today, VA's professional nurses and trained nursing assistants and technicians take pride in their ability to use their skills and knowledge to care for veteran patients at a variety of levels in multiple health care settings – from the rapid patient assessments and complex care provided during critical stages of an acute illness through the compassionate attention to detail that enhances quality of life for veterans who are making the transition into long-term, extended care, or home care environments.

# National Nursing Strategic Plan:

*Advancing the Quality of Care and the Achievements of the Profession*



The Chief Nursing Officer (CNO) oversees and coordinates strategic planning, resource management, professional practice, education, research, leadership development, informatics, legislative, human resource, and policy issues concerning the VA Nursing workforce.

The Office of Nursing Services (ONS) works in collaboration with other disciplines and officials (e.g., VA Central Office (VACO) Chief Officers and Veterans' Integrated Service Network (VISN) leadership) to identify incentives and systematically eliminate barriers that interfere with the development of interdisciplinary teamwork in providing quality, patient-centered care for the Nation's veterans. To support and advise the CNO, the ONS is staffed with five executive level nurses who serve as Program Directors. The Program Directors guide,

facilitate, and support the activities and decision-making of a field-based advisory body, the National Nurse Executive Council (NNEC). The NNEC membership consists of one Nurse Executive representative from each VISN and the Chairs of both the Advanced Practice Nurse Advisory Group (APNAG) and the Nursing Research Advisory Group (NRAG).

The NNEC serves as an advisory body for strategic planning and initiatives related to advancing national nursing goals for VHA. The CNO chairs the Council. The NNEC and subcommittee members have substantial organizational impact. By ensuring organizational alignment with both VHA and the overarching VA, ONS proactively addresses work environment issues, manages resources, and strives to continuously support the work of the VHA nursing staff.



(L to R)

Anna Alt-White, RN, PhD

Becky Kellen, RN, BSN, MS

Cathy Rick, RN, CNAA, FACHE

Audrey Drake, RN, MSN, CNAA

Karen Ott, RN, MSN

Rose Paradis, RN, MS, CHE

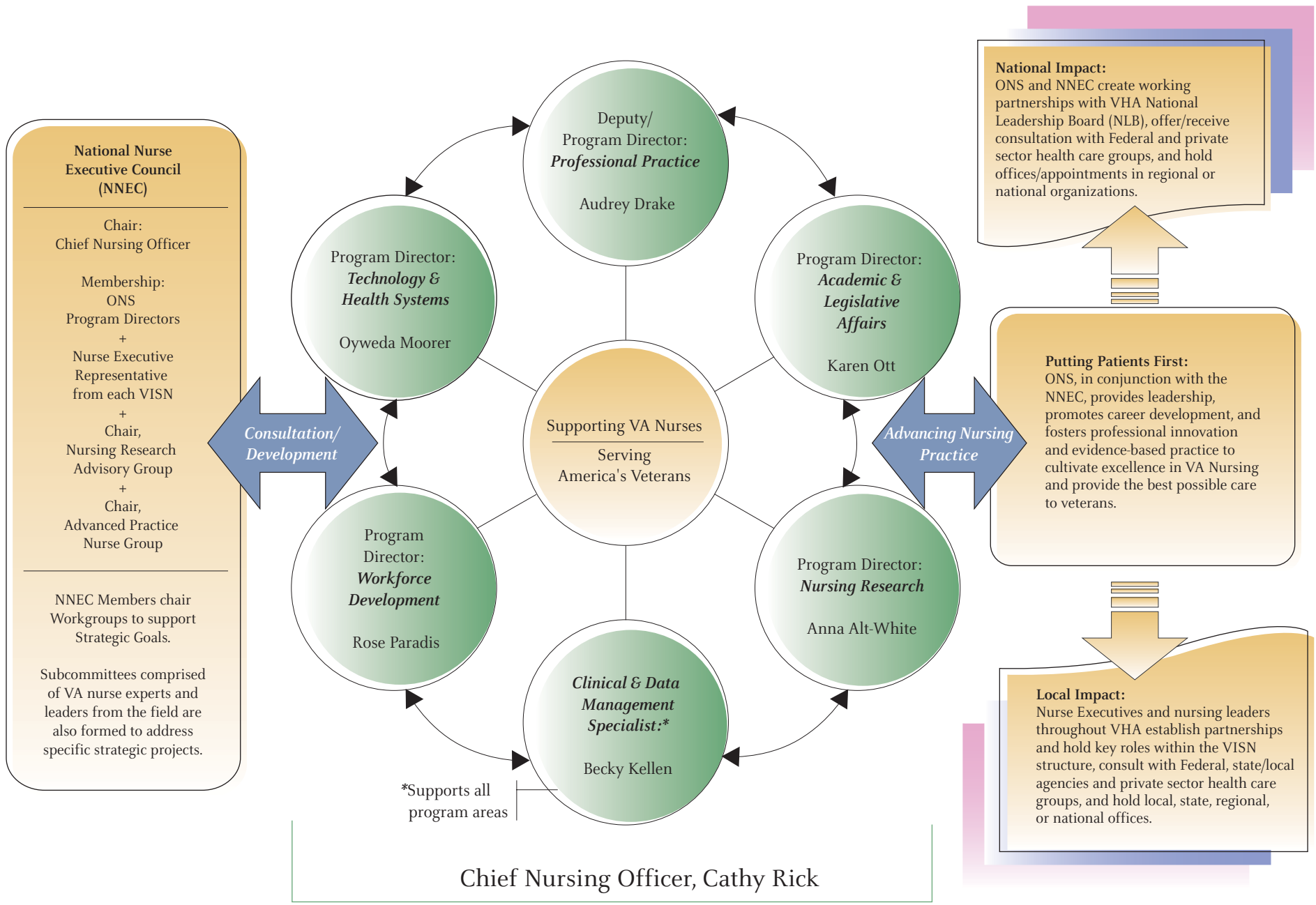
Oyweda Moorer, RN, MSN, CAN

*"(Why I'm here ... ) It's the unique blend of the patients we serve and resources we have. Our patients are heroes, every one of them. Our medical technologies are advanced and then some. Everything is first class."*

Cora Fernando, RN  
Cardiac Intensive Care Unit

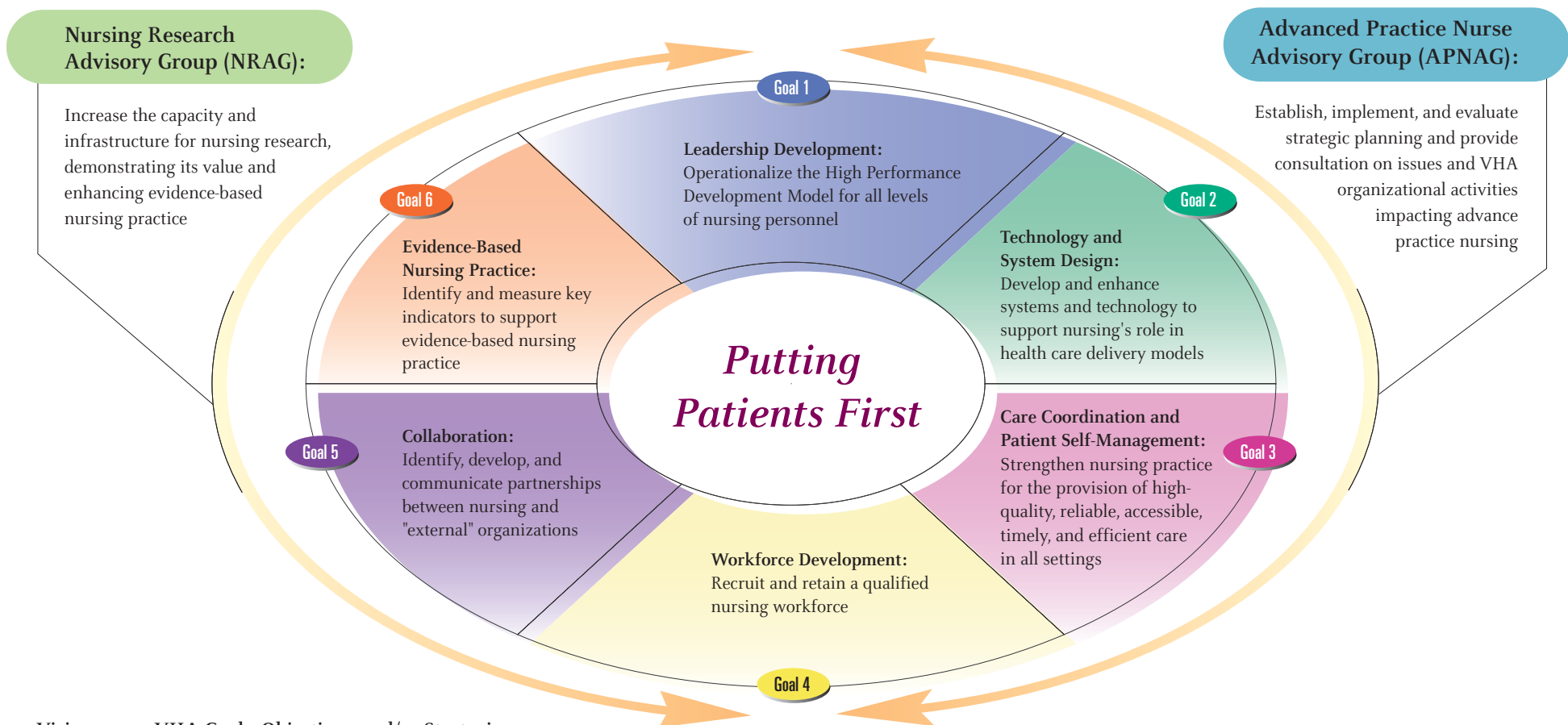


# Office of Nursing Services: Organizational & Functional Model





# National Nursing Strategic Plan: 2003–2007



Vision 2020: VHA Goals, Objectives, and/or Strategies

	Goal 1	Goal 2	Goal 3	Goal 4	Goal 5	Goal 6	NRAG	APNAG
▶ Maximize physical, mental, and social functioning of veterans. Be a leader in provision of specialized health care services. Provide coordinated, comprehensive, and integrated care to promote health and improve function. (VHA Goal 1)								
▶ Optimize use of health care information/technology for benefit of veteran. Accelerate development of HealthVet, Health Data Repository, Veteran's Health Initiative, and telehealth initiatives, and collaborate with DoD for transition from military service. [VHA Goal 2, Objective 3 (VHA Goal 2.3); VHA Goal 3, Objective 4 (3.4)]								
▶ Provide high-quality, reliable, accessible, timely, and efficient health care that maximizes health and functional status for all enrolled veterans. Continuously improve quality/safety of health care for veterans and be the benchmark for health care outcomes. (VHA Goal 3.5; 3.7)								
▶ Partner with Federal, state, and community agencies to develop VA's role/capabilities for emergency response. (VHA Goal 4)								
▶ Advance VA medical research and development to address veterans' needs and contribute to the Nation's knowledge. (VHA Goal 5)								
▶ Sustain partnerships with the academic community that enhance the quality of care and provide high-quality educational experiences for health care trainees and employees. (VHA Goal 6)								
▶ Recruit, support, and retain a knowledgeable, diverse, engaged, and continuously learning workforce. (VHA Enabling Goal 7.12)								
▶ Improve overall governance, performance, and resource management of VA. (VHA Enabling Goal 8)								

## Leadership Development

Current Chair: **Lizabeth Weiss**, RN, MSN, CAN,  
Nurse Executive – Western New York HCS (NY)

Past Chair: **Velvet Jones**, RN, MSN,  
Nurse Executive – Hines VAMC (IL)

Past Chair: **Paula Hemmings**, RN,  
Network Geriatrics and Extended Line Care  
Director – VISN 2

ONS Facilitator: **Audrey Drake**, RN, MSN, CNA,  
Deputy/Program Director – Professional Practice,  
ONS-VACO

*“ . . . the foundation of every human relationship involves caring about oneself and others, and the art of good leadership is to understand – and practice – this fundamental truth.”*

Clara Adams-Ender  
Brigadier General  
United States Army, Retired



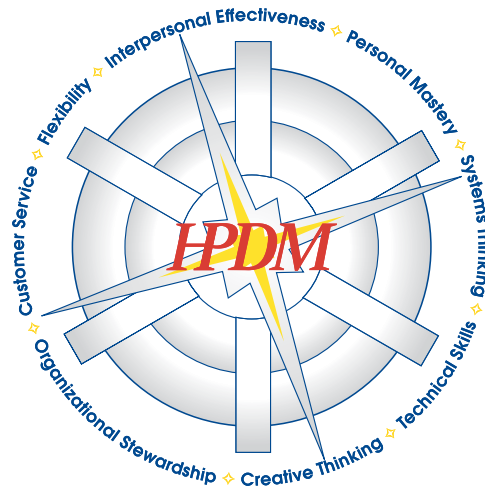
This Goal focuses on supporting and developing new nurse leaders and creating a pipeline to continuously “grow” nursing leaders throughout the organization. The **objective** is to operationalize the High Performance Development Model (HPDM) [<http://vaww.va.gov/hpdm/>] for all levels of nursing personnel.

### Key Accomplishments FY 2000–2003:

- Successful completion of multiple national training sessions in leadership and professional standards
  - > 2001–2003 VA National Nursing Leadership Conferences
  - > Nurse Professional Standards Board (NPSB) Training
- Revision of the LPN Qualification Standards
- Creation of the Nurse Manager Core Curriculum
- Creation of a career development electronic template to establish and maintain a database that identifies highly qualified emerging nurse leaders
- Implementation of a VA Central Office (VACO) Rotation Experience for Nurse Executives

### Priorities for FY 2004–2007:

- Plan annual National VA Nursing Leadership Conferences
- Develop NPSB Resources
  - > Develop Nurse IV-V Complexity Criteria
  - > Develop an Executive Career Field (ECF) evaluation tool/template
  - > Design a guide for clinical vs. administrative career development tracks for the Qualification Standards
- Implement a mentoring program for Nurse Executives and Nurse Managers
- Complete CEU documentation process for Nurse Manager Curriculum
- Nurse Executive and Nurse Manager Resource Guides – Evaluate, update, and enhance content and redistribute
- Refine Advisory Board Leadership Programs
- Identify strategies to support and strengthen leadership skills for staff nurses





## Putting Patients First



*“Health care is a rewarding field. You see patients get up from the bed, you see them out later, and they shake your hand and say thank you. That’s one of the gratifications of this job.”*

Joseph Hinnant, NA



### **Nursing Leadership Programs**

*The Leadership Development Workgroup has developed, coordinated, and/or facilitated planning and content for career development programs listed below to foster leadership skills and advancement opportunities for nurses at varying levels in the organization.*

#### • Nurse Manager Core Curriculum

This program is a self-guided course of material to train new nurse managers and enhance skills for existing managers. The curriculum was distributed to nursing throughout the system on CD-ROMs.

#### • VA Central Office/ONS Nurse Executive Rotation

As a structured professional development opportunity, nurse executives are able to work in ONS or VACO for a two to four week rotation.

#### • VA National Nursing Leadership Conference

This conference is an annual, professional forum and team-building conference open to all nurse leaders and aspiring nurse leaders.

#### • Executive Career Field (ECF) Candidate Development Program

The ECF program is a national VHA career development program for mid-level managers (GS 13/14/15 and Title 38 equivalents) seeking senior-level executive positions (Nurse V/Nurse Executives or Associate Directors, Facility Directors, or Chiefs of Staff). [<http://vaww1.va.gov/succession/ecfdevel.cfm>]

#### • Health Care Leadership Institute (HCLI)

HCLI, a key element of the ECF Candidate Development Program, is also offered on a space-available basis to Associate Directors, Chiefs of Staff, Nurse Executives and their counterparts in VISN and VHACO offices. The curriculum addresses the core competencies of HPDM, with particular emphasis on Personal Mastery.

#### • VHA VISN/Facility Leadership Development Program (LEAD)

These programs are modeled after ECF and address high potential leaders in the regional and local tiers (GS 11/13 and Title 38 equivalents for VISN programs and entry level up to GS 7/11, Wage Grade Managers, and Title 38 equivalents for Facility LEAD programs). **For further information about these and other VHA Leadership programs, see:** [http://vaww.va.gov/hpdm/pdf/DevNew\\_Path\\_brochure\\_7-14-03.pdf](http://vaww.va.gov/hpdm/pdf/DevNew_Path_brochure_7-14-03.pdf).

#### • Leadership VA (LVA)

This is a national VA-wide career enrichment training experience for employees at or above GS 13/14 and Title 38 equivalents to enhance leadership skills, exchange insights/professional perspectives, and build an inter-Departmental network of VA leaders committed to public service.

#### • Federal Executive Institute (FEI)

FEI is a national, inter-agency, government executive training program.

## Technology and System Design

Current Co-Chair: **Lynn Cooper**, RN, MSN,  
Nurse Executive – Columbia VAMC (MO)

Current Co-Chair: **Anne Gillespie**, RN,  
Nurse Executive – Loma Linda VAMC (CA)

Past Chair: **Leslie Wiggins**, RN, MBA,  
Nurse Executive – Detroit VAMC (MI)

Past Chair: **Rebecca Garcia**, RN, MSN,  
Nurse Executive – Battle Creek VAMC (MI)

ONS Facilitator: **Oyweda Moorer**, RN, MSN, CAN,  
Program Director – Technology & Health Systems,  
ONS-VACO



This Goal focuses on creating mechanisms to obtain and manage clinical and administrative data to empower decision-making. The objective is to develop and enhance systems and technology to support all nursing roles.

### Key Accomplishments FY 2000–2003:

- **Nursing Integrated Informatics System (NIIS)** – Developed a proposal for an integrated clinical/administrative information system for nursing. Clinical components are phase one.
- Status:
  - > This project has received dedicated funding in the 2004 budget to accelerate development and testing. Testing scheduled to begin in 2004.
  - > Enhancements will provide a standard interface with the revised version of VHA's Computerized Patient Record System (CPRS), the Bar Code Medication Administration (BCMA) system, and provide integrated entry of key assessments, such as vital signs, pain assessments, and intake and output. It also will promote standard taxonomy in nursing assessments and orders while offering flexibility to encourage interdisciplinary use.
  - > Historical trending in the patient record and real-time data will be possible.

### Priorities for FY 2004–2007:

- Continue as consultants for NIIS.
- Monitor findings from BCMA Collaborative Breakthrough Series.
- Staffing methodology and workload indicators – Explore and define necessary data elements and technology solutions to revise patient acuity system and link administrative, staffing pattern/workload, and financial information with nursing-sensitive and patient quality outcomes.
- Coordinate nursing administrative information system enhancement of NIIS to support daily decision-making for resource management.
- Financial Clinical Data Mart (FCDM) – Nursing will participate, as stakeholders, in the national financial and clinical database under development.
- Explore options for resource management/administrative benchmark dashboards – Executive decision systems analogous to the VISN leadership tools.
- VA eHealth University 2004 (*formerly* Camp CPRS) session – Coordinate a hands-on, applied education session on the NIIS system currently under development.
- NPSB Proficiency Tracking System – Work with Office of Information (OI) to create a standardized, Web-based reporting tool.
- PAID System Modifications – Data fields and report capability will be added to allow tracking of mandatory and voluntary overtime (OT).
- DSS Modernization – Advise DSS group on nursing priorities during modernization efforts.

*“Right now, the VA is very much in the forefront of hospital technology. A few examples are the Computerized Patient Record System (CPRS) where the entire chart is documented in the computer, which allows us to access that record and keep it up to date. Also, we have a Bar Code Medication Administration (BCMA) system which has greatly increased safety and reduced medication errors.”*

**Ilona Mallon**, RN, BSN,  
Nurse Recruiter

## Care Coordination and Patient Self-Management

Current Chair: **Ruth Yerardi**, RN, MS,  
Nurse Executive – Chillicothe VAMC (OH)

Past Chair: **Elvira Miller**, RN, EDD,  
Nurse Executive – New York HCS (NY)

Past Chair: **Frankie Manning**, RN, MSN,  
Nurse Executive – Puget Sound HCS (WA)

ONS Facilitator: **Audrey Drake**, RN, MSN, CNA,  
Deputy Program Director – Professional Practice,  
ONS-VACO

*“They’ve taken care of me from A to Z. When I first came here, I couldn’t even stand up. Little by little, with the nurses and the therapy and everything, I’m walking now. It has been a very, very good experience.”*

Gerald Rau



This strategic Goal focuses on promoting and recognizing innovations in care delivery and facilitating care coordination and patient self-management. The **objectives** are to strengthen nursing practice for the provision of high-quality, reliable, accessible, timely, and efficient care in all settings and to enhance the use of evidence-based nursing practice.

### Key Accomplishments FY 2000–2003:

- Throughout 2001–2002, concepts from the IOM report, *Crossing the Quality Chasm: A New Health System for the 21st Century*, were disseminated.
- ONS Innovations Award Program – A new national award mechanism was created and launched in 2003. The purpose of the program is to recognize nursing leadership in quality improvement.
  - > Developed the policy and mechanism for implementing this national program. The theme for 2003 was care coordination and patient self-management.
  - > The top ten best practices were recognized during a NLB meeting; the winning teams were each awarded a \$10,000 group incentive award.



### Priorities for FY 2004–2007:

Subcommittees will identify collaborations, professional competencies, tool development, and technology coordination. The emphasis is ensuring that the information reaches the staff nurse level.

- Nursing Practice Initiatives to Support/Enhance Patient Self-Management and Care Coordination:
  - > Disease Management
  - > Care/Case Management
  - > Self-Management of Chronic Diseases (and Preventive Care)
  - > Technology Delivery Components, such as Telehealth, My HealtheVet
  - > Dissemination of best practices from 2003 Innovations Award winners
  - > Work with Office of Care Coordination and Advanced Clinic Access Program Director to facilitate implementation of best practices



## Workforce Development

Current Chair: **Donna Iatarola**, RN, CNAA,  
Nurse Executive – Northern California HCS (CA)

Past Chair: **Eileen Kingston**, RN, BSN, MPA,  
Nurse Executive – NW Iowa HCS – Omaha (NE)

ONS Facilitator: **Rose Paradis**, RN, MS, CHE,  
Program Director – Workforce Development,  
ONS-VACO



This Goal focuses on improving the recognition and opportunities for the VA nursing workforce. Areas of emphasis are (1) **utilization**: to maximize the effective use of the available workforce; (2) **retention**: to retain a qualified and highly skilled nursing workforce; (3) **recruitment**: to recruit a highly qualified and diverse nursing staff into VHA; and (4) **outreach**: to improve the image of nursing and promote nursing as a career choice through increased collaboration with external partners.

### Key Accomplishments FY 2000–2003:

- *Call to Action* report – Developed workplan to address and implement recommendations cited in *Call to Action* report.
- Nursing Personnel Exit Interview – Survey structure and content have been reviewed and updated; Web-based survey design completed.
- VA Learning Opportunities Residency (VALOR) – Advised on brochure enhancement.
- Guide to VA Pay and Hiring Authorities – Disseminated throughout VHA.
- Workforce Development resource tools – Web-based source for utilization, recruitment, retention and outreach strategies, and tools, such as:
  - > Best Practices in Recruitment and Retention Resource Guide
  - > Hiring Process Benchmarks
  - > Guide to VA Pay and Hiring Authorities
- Upward Mobility Program – Developed proposal to fund an internal staff development program.
- Senior Management Conference – Presented current and planned initiatives for workforce development.
- Legislative Briefings – Supplied background for U.S. Senate Committee on Veterans Affairs, Oversight and Investigation Subcommittee hearing. (October 2003)
- National Commission on VA Nursing – Provided requested data reports on VA Nursing workforce trends to Commission.

### Priorities for FY 2004–2007:

- Address approved recommendations from the *VA National Commission on VA Nursing Report*. (May 2004)
- Initiatives to strengthen diversity – Strengthen existing partnerships with priority organizations, such as the National Hispanic Nurses Association, the National Black Nurses Association, Men in Nursing, and the Hispanic Association of Colleges and Universities for recruitment.
- Programs for Regional/National Pilots (Retention)
  - > Magnet Nursing Culture – Business Case
  - > Nurse/Physician Collaboration
  - > “Healthy Nurse” program
  - > VA Travel Nurse Corps Program
- National Workforce Database – Document workforce trends and identify successful workforce development strategies at the local, VISN, and national level.
- Legislative Proposal Inventory – Maintain a current list of workforce strategies for possible legislative proposal.
- Institute of Medicine’s report *Keeping Patients Safe: Transforming the Work Environment of Nurses* (March 2004) – Review and identify key strategies for implementation in VA.





## Magnet Culture

*The Magnet Recognition Program™ denotes a culture of excellence that is fostered in the provision of nursing services and development of nursing staff in a professional practice environment.*



**James A. Haley Veterans' Hospital, Tampa, FL: Acceptance of the Magnet Prize Award for Exemplary Innovation, October 2003**

(L to R)

**Patricia A. Quigley, PhD, ARNP, CRRN,**  
Deputy Director, Patient Safety Research Center-VISN 8

**Sandra K. Janzen, MS, RN, CNAA-BC,**  
Associate Chief of Staff/Nursing— Tampa VAMC (FL)

**Audrey L. Nelson, PhD, RN, FAAN,**  
Director, Patient Safety Research Center-VISN 8

**Gail Powell-Cope, PhD, ARNP, CRRN,**  
Associate Director, Patient Safety Research Center-VISN 8

*“Magnet hospitals are infused with values of quality care, nursing autonomy, innovation, bringing out the best in each individual, and striving for excellence.”*

**Marlene Kramer, RN, PhD**

The James A. Haley VAMC in Tampa, FL received Magnet recognition in 2001, becoming the 29th Magnet hospital in the U.S., and the first Magnet VA hospital, since inception of the program in 1994.

On October 2nd, 2003, at the 7th Magnet Conference, American Nurses Credentialing Center (ANCC) awarded its first ever Magnet Prize Award for Exemplary Innovation to the Nursing Leadership of the James A. Haley Veterans' Hospital (Tampa, Florida) for developing and implementing the Nursing and Hospital Services – Patient Safety Research Center. This award recognizes cutting-edge research, practices, services, technologies, programs, or other exemplary innovations with demonstrable positive outcomes in a Magnet facility.

“James A. Haley has truly distinguished itself. We are pleased to honor a hospital that supports the prevention of nurse-sensitive adverse events. This translates to better work environments, and better patient care,” stated Cecilia F. Mulvey, PhD, RN, president of the ANCC Board of Directors.

Jeanne M. Floyd, PhD, RN, CAE, Executive Director, ANCC, commented that, “Excellence continues to flourish through the James A. Haley Veterans' Hospital. The development of a patient safety center such as this is innovative and showcases high intellectual achievement. It is further proof that nurses can practice in a professional nursing environment that respects and honors the science of nursing.”

## Magnet Recognition

The Magnet Recognition Program™ was developed by the American Nurses Credentialing Center (ANCC), a subsidiary of the American Nurses Association (ANA), in 1994 to recognize health care organizations that provide the very best in nursing care and support professional nursing practice. Magnet Recognition is the highest level of acknowledgement that the ANCC accords to nursing services. It denotes a culture of excellence that is fostered in the provision of nursing services and development of nursing staff in a professional practice environment. Magnet characteristics are evidenced by: collaborative management philosophy, superior standards of patient care, competent and professional practice supported by educational opportunities, strong nurse/physician partnerships, and incorporation of cultural and ethnic diversity standards of practice.

*Four additional VA sites (Houston VAMC, Portland VAMC, San Diego VAMC, and Washington, DC VAMC) are applying for Magnet Recognition and 11 VA facilities are in early planning stages.*

ONS has sponsored the development of a business case analysis for Magnet Recognition to be conducted by the Patient Safety Research Center-VISN 8. This project will provide VHA Nurse Executives with evaluation data and tools for incorporating “forces of magnetism” into their organizations or for pursuing Magnet designation.

## Collaboration



Current Chair: **James Harris**, RN, BSN, CS, MBA,  
Nurse Executive – Nashville VAMC (TN)

Past Chair: **Kathy Rajcevich**, RN,  
Nurse Executive – Louisville VAMC (KY)

Past Chair: **Denise Carey**, RN, MSN,  
Former Nurse Executive – Charleston VAMC (SC)

Past Chair: **Joanne Carr**, RN, MSN,  
Nurse Executive – Augusta VAMC (GA)

ONS Facilitator: **Karen Ott**, RN, MSN,  
Program Director – Academic & Legislative  
Affairs, ONS-VACO

This Goal focuses on forging relationships with professional partners within VA, across the Federal community, and in public and private sectors. The **objective** is to strengthen collaborations in order to leverage resources, contribute to the knowledge base, offer consultation, and lead the advancement of the profession of nursing for the broader community. This group is currently undergoing significant restructuring to more closely align priorities with the VHA strategic goals (Vision 2020) and to enhance existing and potential partnerships internally and externally. While some partnerships are forged at the national level by ONS staff, other key links are maintained by VA Nurse Executives and nurse leaders throughout VHA who collaborate with academic, professional, and labor partners.

### Key Accomplishments FY 2000–2003:

- American Organization of Nurse Executives (AONE) – AONE officials provide an overview of strategic goals every year at the VA National Nursing Leadership Conference.
- Nurses’ Organization of Veterans Affairs (NOVA) – The CNO and ONS Program Directors meet monthly by conference call with the President and Executive Director for NOVA to address common professional issues. ONS authors a column in the NOVA newsletter.
- Collaboration Strategies: Best Practices – Compilation of “best practices” related to collaboration with internal/external groups was created and distributed among nursing leaders in FY 2003.

- National Partnership Council (NPC) – ONS provides routine updates for NPC and, upon request, at various labor organization meetings.
- Clinical Nurse Leader – Exploration of emerging staff nurse clinical leadership roles occurring across a variety of health care settings.

### Priorities for FY 2004–2007:

- Clinical Nurse Leader (CNL) Pilot Program –
  - > Pilot clinical nurse leadership roles in each VISN in partnership with local academic affiliates. Working document found at <http://www.aacn.nche.edu/NewNurse/index.htm>.
- Implement outreach recommendations from *Call to Action* report.





## Evidence-Based Nursing Practice

Current Chair: **Sandra Janzen**, MS, RN, CNAA-BC,  
Associate Chief of Staff/Nursing – Tampa VAMC (FL)

Past Chair: **Katie Lara**, RN,  
Nurse Executive – Big Spring VAMC (TX)

Current Facilitator: **Anna Alt-White**, RN, PhD,  
Program Director – Nursing Research, ONS-VACO



This Goal focuses on identifying and measuring key indicators to support evidence-based nursing practice. The **objective** is to develop a standardized methodology to collect data related to nursing-sensitive indicators of quality, workload, and performance, within VHA facilities, which will be integrated into a standardized national database.

### Key Accomplishments in FY 2000–2003:

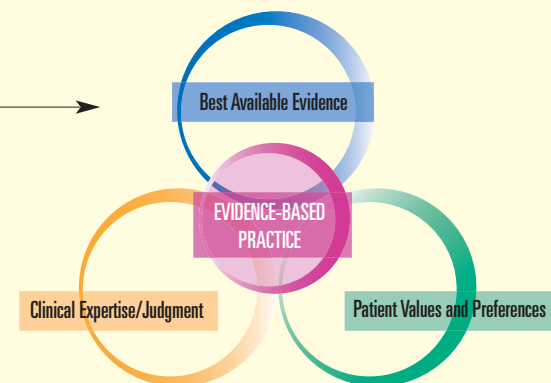
- Developed collaboration among VHA partners (including nurse executives, clinicians, researchers) Health Services Research and Development (HSR&D) Centers of Excellence, and the larger community, including California Nursing Outcomes Coalition (CalNOC) Military Nursing Outcomes Database (MilNOD), and National Database of Nursing Quality Indicators (NDNQI).
- VA Nursing Outcomes Database (VANOD) – A pilot project is in process at 12 acute care sites. Seven indicators are being measured: nursing hours per patient day, skill mix, patient falls, patient satisfaction, pressure ulcers, RN satisfaction, and nursing staff musculoskeletal patient handling injuries.
  - > Published monthly VANOD newsletter
  - > Disseminated information about VANOD at local, regional, and National conferences
  - > Created Web site  
[<http://vaww.collage.research.med.va.gov/collage/VANOD/>]

### Priorities for FY 2004–2007:

- Facilitate ease of data entry at sites.
- Refine usefulness of VANOD reports for nursing staff, quality improvement, and identification of best practices (benchmarking).
- Expand implementation of present indicators in acute care settings.
- Initiate data collection of present indicators in long-term care settings at original pilot sites.
- Collaborate with VA Geriatrics/Extended Care Strategic Health Care Group to validate use of Resident Assessment Instrument/Minimum Data Set (RAI/MDS) for long-term care indicators.
- Collaborate with national nursing indicator groups on data analytic methods and selection of new indicators.
- Continue to disseminate information about VANOD at local, regional, national conferences, and on Web site.
- Partner with NRAG to develop a nursing research agenda for evidence-based nursing practice.

### Three Components of evidence-based Practice:

Nancy Donaldson, RN, DNSc, FAAN,  
Director, UCSF, Stanford Center for  
Research and Innovation in Patient  
Care, UCSF School of Nursing



## ***Nursing Research Advisory Group (NRAG)***

Current Chair: **Marty Douglas**, DNSc, RN, FAAN, Assoc. Chief Nursing Service for Research – Palo Alto (CA)

Past Chair: **Bonnie Wakefield**, RN, PhD, Assoc. Chief Nursing Service for Research – Iowa City (IA)

Past Chair: **Marty Shively**, RN, PhD, Assoc. Chief Nursing Service for Research – San Diego (CA)

Current Facilitator: **Anna Alt-White**, RN, PhD, Program Director – Nursing Research, ONS-VACO

*“One hallmark of the profession is its scientific base. Nursing, considered both an art and a science, has spent considerable effort to develop and disseminate research of importance to nurse clinicians, managers, and educators.”*

**Cheryl Stetler**, PhD, RN, FAAN, Consultant, Evidence-Based Practice

This group establishes, implements, and evaluates a strategic plan for VA nursing research and advises the NNEC on issues and activities related to nursing research. The primary **objective** is to increase merit review funded research that addresses nursing care issues of veterans. The goals are to (1) increase capacity for nursing research through mentorship; (2) expand infrastructure to support nursing research; (3) promote the visibility and value of nursing research; and (4) enhance evidence-based nursing practice. This group has representatives from medical centers, Centers of Excellence, Central Office, and academia.

[<http://vaww1.va.gov/nursingresearch>]

### **Key Accomplishments in FY 2000–2003:**

- Mentoring Program – Developed formal mentorship program for nurse researchers.
- Center of Excellence (COE) Nursing Research Program – Developed proposal for training of nurse researchers within VHA’s Health Services Research and Development (HSR&D) COEs.
- Nurse Research Pilot Study Program – Program proposal to provide seed money for potentially promising research topics and study potential Nursing Research Initiative (NRI) submissions.
- Reviewed Human Resources (HR) regulations, per management, and identified two leave options available to staff for nursing research activity: extended leave and detail.
- Increased the number of Letters of Intent and proposals submitted for review to NRI.  
[[http://www.hsr.d.research.va.gov/for\\_researchers/funding/programs/nri.cfm](http://www.hsr.d.research.va.gov/for_researchers/funding/programs/nri.cfm)]
- Identified potential research mentors.
- Expanded nurse researcher representation on Quality Enhancement Research Initiative (QUERI) Committees, Centers of Excellence, and Scientific Review Boards.
- Initiated communication with APN Advisory Group to explore collaboration about evidence-based nursing practice.

### **Priorities in FY 2004–2007:**

- Develop strategies to strengthen career trajectory transitions in pre-doctoral and post-doctoral fellowships and career development programs.
- Plan meetings with APN Advisory Group to implement evidence-based nursing practice – for example, through the use of clinical practice guidelines (CPGs).
- Explore distance learning mechanisms for evidence-based nursing practice and research methods.
- Increase the number of proposals funded via the NRI mechanism.
- Identify potential research topics from VANOD data.
- Implement the Mentoring Program and Nurse Research Pilot Study Program.
- Implement a Nursing Research Program in HSR&D Centers of Excellence.
- Explore Department of Defense (DoD) funding potential for VA Nursing research.
- Develop a directory of nurse researchers.
- Further liaison with National Institute for Nursing Research to promote patient-centered research and the development of a national VA program of nursing research.
- Support evaluation of the Clinical Nurse Leader Pilot Program.

## Advanced Practice Nurse Advisory Group (APNAG)

Current Chair: **Deborah Antai-Otong**, RN, MS,  
PMH-NP, CS, Psychiatric CNS – Northern TX HCS

Past Chair: **Brian Westfield**, RN, MS, NP-C,  
Nurse Executive, Salt Lake City VAMC (UT)

Current Facilitator: **Anna Alt-White**, RN, PhD,  
Program Director – Nursing Research, ONS-VACO

This group focuses on establishing, implementing, and evaluating the strategic plan for advanced practice nursing in VA. The term Advanced Practice Nurses (APN) refers to nurses with nationally recognized graduate educational preparation and certification, usually as either a clinical nurse specialist (CNS) or nurse practitioner (NP), but can also refer to nurse anesthetists, nurse midwives, etc. In VA, the APN group encompasses CNSs and NPs. APNAG serves in an advisory capacity to the NNEC for strategic planning, issues, and activities of VHA organizational impact related to advanced practice nursing, such as licensure, utilization, role, scope of practice, recruitment and retention, workload capture, and prescriptive authority.

### Key Accomplishments FY 2000–2003:

- Developed an APN Mentoring Toolkit.  
(See the various APN resources available at <http://vaww1.va.gov/APN/page.cfm?pg=6>).
- Initiated publication of the APN Newsletter.
- Updated and marketed the APN Web site as a resource for APNs, other health care providers, and administrators (<http://vaww1.va.gov/apn/>).
- Developed and maintained the APN database.
- Identified key indicators to support evidence-based nursing practice to enhance quality of care to veterans.

### Priorities for FY 2004–2007:

- Continue to develop and implement newly emerging clinical care models for selected populations, including the Care Coordination Initiative utilizing in-home technology and Advanced Clinic Access.
- Continue to pursue necessary regulatory actions to resolve barriers to practice.
- Finalize efforts with the Drug Enforcement Agency (DEA) and the VHA to establish guidelines for the prescription of controlled substances.
- Establish guidelines that promote a work environment that enhances recruitment and retention of APNs.
- Develop an annual VA APN conference.
- Discern best practices, utilize clinical practice guidelines, and devise strategies for implementation in collaborative nurse research.
- Explore distance learning mechanisms for continuing education of members and other stakeholders.

*“VA is a very unique institution. It is so supportive of nurse practitioners, and physicians. They give us tremendous freedom and support. They allow us to be extremely creative and problem solve. They get you involved in problem identification and strategy development. The support and professionalism is not matched anywhere in the community.”*

**Jeanette McCain**, RN, MS, ARNP,  
Nurse Practitioner



# Patient and Staff Safety,

## A Nursing Priority

*“The most exciting thing for me about our Center is the emphasis on translating research into clinical practice and policy that result in keeping veterans and nurses safer from injury and adverse events. Our interdisciplinary perspective among clinicians, health services researchers, rehabilitation researchers, and policy makers creates a synergy that fuels our commitment to making health care safer for veterans.”*

Gail Powell-Cope, PhD, ARNP, CRRN,  
Associate Director,  
Patient Safety Research Center-VISN 8

Today’s modern health care environment has proven capacity to produce astonishing results, yielding cures for once fatal illness and injury, alleviating pain, restoring mobility and function, sustaining life, and improving its quality on a regular basis. Unfortunately, the same unique surroundings have demonstrated a vulnerability to the occurrence of negative events.



A systematic, integrated approach to prevention – through early and appropriate response to evident and potential problems – is the key to patient and staff safety. In VHA, patient and caregiver safety is a core principle that guides the care provided to America’s veterans. VHA has established a National Patient Safety Center (NPSC)

(<http://vawww.ncps.med.va.gov/>) to implement and collaborate with various patient safety programs and initiatives throughout the system. There are also multiple projects, funded both nationally and locally, examining causes and possible solutions to patient and staff safety issues. The Patient Safety Research Center-VISN 8 addresses patient safety from a nursing perspective and is committed to solving problems that nurses face daily. The Center is one of four VA centers that have been funded to do patient safety activities. They focus on two patient safety areas key to nurses: safe patient mobility and safe patient handling.

*Below are examples of patient and staff safety initiatives within VHA.*

### National Patient Safety Center:

(VA Nurses hold key roles)

- **No-fault adverse event reporting system**
- **Medical Team Training Initiative** – To build interdisciplinary communication and reduce errors.
- **Root Cause Analysis mechanism** – To discern necessary provider and system safety enhancements.
- **Bar Code Medication Administration (BCMA) Breakthrough Collaborative** – To identify necessary improvements for the automated medication system.

### Patient Safety Research Center-VISN 8:

(Director – Audrey L. Nelson, PhD, RN, FAAN)

**Foci of the Center include –**

- Preventing patient falls and fall-related injuries
- Safe hospital beds, focusing on bedrail entrapment and bed-related falls
- Safe patient handling and movement
- Technology to prevent pressure ulcers in spinal cord impairment
- Preventing elopement and falls associated with wandering
- “No Lift” program for staff safety

### Other Initiatives:

(VA nurses hold leadership roles)

- “Near Miss” and Best Safety Practices reporting mechanisms
- Community/State Collaboratives for safety training and education



*“They’re always there when I need them. They’re always willing to go the extra step no matter what that might be.”*

William Overturf, Jr.



# Recognizing Nursing Excellence:

National VA Award Recognition Programs



ONS has established several formal and informal mechanisms for recognizing the day-to-day achievements of VA nurses.

ONS conducts monthly system-wide conference calls that serve several purposes, one of them being to offer national, public recognition by announcing individual nursing accomplishments, e.g., certifications, awards, publications, elected or appointed leadership positions, etc. VA has two formal nursing recognition programs in place – a Departmental recognition by the Office of the Secretary for VA and a service recognition program by the Office of Nursing Services.

*“Nursing is so diversified. VA offers a very comprehensive system for the nurse. They allow creativity and a certain autonomy. If you come with ideas, there’s help for you to explore those ideas to see how feasible they are to pursue. It’s just a great place to work.”*

Mary L. Hampton, RN, MS,  
Deputy Associate Director, Nursing Service

## Secretary’s Award for Excellence in Nursing and Secretary’s Award for Advancement of Nursing Programs

The Secretary, Department of Veterans Affairs, recognizes nursing excellence each year by awarding the Secretary’s Award for Excellence in Nursing to staff nurses who exemplify excellence in their day-to-day service of our veterans. VHA facility leadership forward nominees of nursing candidates from each nursing category: RN, LPN/LVN, NA, and RN in an expanded role (e.g., advanced practice nurse, nurse manager, instructor, researcher).

The Secretary’s Award for Advancement of Nursing Programs is awarded to one Nurse Executive and to one Facility Director who demonstrate contemporary and progressive leadership in the advancement of nursing programs and who are recognized, beyond the facility, for a commitment to supporting nursing practice and fostering career growth and development.





### The 2003 winners of the Secretary's Award for Excellence in Nursing:

To learn more about all the winners, go to <http://vaww.appc1.va.gov/nursing/page.cfm?pg=64>



#### Expanded Role RN – Award for Excellence

**Christopher Hermann**  
RN, MSN, APRN, BC, NP-C

*Practice:* Respiratory therapy, COPD (chronic obstructive pulmonary disease), sleep apnea, asthma, and sleep dysfunction

*Facility:* John D. Dingell VAMC, Detroit, MI – VISN 11

#### RN – Award for Excellence

**James Horstmyer**  
RN, NP-C

*Practice:* Vascular surgery-preoperative testing; completed Master's Degree program and is now certified as a Nurse Practitioner

*Facility:* Wilmington VAMC, Wilmington, DE – VISN 4

#### LPN – Award for Excellence

**Patricia Johnson**  
LPN

*Practice:* Home-based primary care  
*Facility:* VA Western NY HCS, Buffalo, NY – VISN 2

#### PCA – Award for Excellence

**Shirley Cline**  
PCA

*Contribution:* Developed process improvements for care provided by nursing assistants: Nursing Assistant End of Shift Report and documentation template

*Facility:* Bronx VAMC, Bronx, NY – VISN 3

### The 2003 winners of the Secretary's Award for Advancement of Nursing Programs:



#### Nurse Executive

**Frankie Manning, RN, MSN**  
*Initiatives:* Same Day Unit, Outreach Health Screening, Women's Veteran Coordinator; academic outreach programs (Adopt-A-Student)  
*Facility:* VA Puget Sound HCS, Seattle, WA – VISN 20

#### Facility Director

**Linda F. Watson, RN, MSN**  
*Initiatives:* Nursing Care Management for high-risk populations, nurse-managed patient safety program  
*Facility:* VA Central Alabama HCS, Tuskegee, AL – VISN 7

## The 2003 winners of the Secretary's Awards



(L to R)

Frankie Manning, Patricia Johnson, Markus Townsend\*, Judith St. Onge\*, Secretary Anthony Principi, Christopher Hermann, Shirley Cline, James Horstmyer

(\* accepting for Linda F. Watson: Markus Townsend, son; and Judith St. Onge, RN, PhD, Nurse Executive, Central Alabama Veterans Health Care System)

*Office of Nursing Services  
Innovation Award*



Innovation, as well as processes that promote and recognize innovative employees, has been a touchstone for VHA and VA for several years. Dynamic leadership is only one of the necessary tools for an organization to continuously improve the way it conducts business, which in this case is providing the best possible care for our Nation's veterans. Achieving progressive, forward-thinking improvements requires the combined talents and experience of the employees who provide that service daily.

In 2003, ONS implemented a nursing-specific, national award program to recognize those nurses who exemplify the spirit and ingenuity that lead to best practices. The Office of Nursing Services Innovation Award program honors the top ten teams that demonstrate nursing leadership in quality improvements and have a positive impact on patient care.

For the inaugural year, ONS and the National Nurse Executive Council (NNEC) established a theme of "care coordination and patient self-management." Submissions from multiple interdisciplinary teams were reviewed by a committee of experts to identify the top ten best practices across VHA. Proposed initiatives were evaluated based on the degree and significance of nursing leadership in design and/or implementation of the best practice and the extent to which the intervention addressed quality issues related to care coordination and patient self-management.

The winners were recognized by the National Leadership Board, with membership in attendance that included: Robert Roswell (then Under Secretary for Health), Acting Under Secretary Jonathan Perlin (then VHA Deputy Under Secretary), VHA Deputy Under Secretaries Laura Miller and Frances Murphy, VISN Directors, and Chief Officers.

The 2003 Office of Nursing Services Innovation Award winners and their innovative best practices are posted on the ONS Web site at

<http://www1.va.gov/nursing/page.cfm?pg=51>.

*Plan Ahead* – Get ready for  
2004–2005 ONS Innovation Award

*Theme for 2004:*

Programs or initiatives that enhance the diversity of the VA nursing workforce and/or address culturally sensitive patient care.

*Theme for 2005:*

Nurse/physician collaboration programs or initiatives that demonstrate positive impact on workforce challenges and/or patient outcomes.

## Shaping the Future of VA Nursing



The Chief Nursing Officer is a member of VHA's National Leadership Board (NLB), ensuring that nursing is further integrated into the governance and decision-making process of the Department.

NLB is chaired by the Under Secretary for Health, and membership consists of all VISN Directors and VACO Chief Officers. NLB is the strategic planning and policy-making body for VHA. There are six NLB committees, each having responsibility for addressing key aspects of the VHA enterprise: Strategic Planning, Health Systems, Finance, Informatics and Data Management, Communications, and Human Resources. The Chief Nursing Officer co-chairs the NLB/Health Systems Committee; in addition, there

is nursing representation on all NLB Committees. To learn more about NLB and its activities, go to <http://vaww.vsscportal.med.va.gov/nlb/>.

ONS also participates in the National Partnership Council, an advisory body that reports to Secretary Principi. This Council advises the Secretary and VA leadership on matters associated with labor-management relations. They promote cooperative labor-management relations, which result in improved services to veterans and a positive workplace for employees. As in the past, ONS and the Chief Nursing Officer, who holds a seat on the Council, will continue to strengthen relationships with employees, representatives, and leadership.

### *ONS Communication & Resource Strategies*

- Nursing Service monthly conference calls; minutes posted on ONS Web site
- Quarterly Nursing Issues Forum conference calls, showcasing high priority topics
- Nurse Professional Standards Board (NPSB) monthly conference calls for Board Chairs and Nurse Executives
- Web site/Internet [<http://www1.va.gov/nursing/>]
- Web site/Intranet (Internal VA access only) [<http://vaww.appc1.va.gov/nursing/>] – This site is a primary communication channel with VA Nurses. Content includes current news items, tools/resources, project updates, and related links that are relevant for all levels of nursing. All VA nurses are encouraged to visit this site regularly, share the information with colleagues, and participate by offering suggestions for Web site improvements.
- Training, executive management forums, strategic planning opportunities via conferences/meetings

### *National Commission on VA Nursing*

The National Commission on VA Nursing (NCVAN) was formed in 2002, under P.L. 107-135, to advise and recommend to Congress and the Secretary of Veterans Affairs, legislative and organizational policy changes to enhance the recruitment and retention of nurses and other nursing personnel in the Department. The NCVAN issued an interim report in July 2003 and a final report in May 2004. The Office of Nursing Services has worked closely with the Commission over the past two years and looks forward to incorporating their advice and recommendations to strengthen VHA strategic goals and initiatives. For more information about NCVAN, go to their Web site at <http://www1.va.gov/ncvan/>.

*Shaping the Future  
of VA Nursing (continued)*

*“The thing that has been special for me is having an opportunity to work up close with those men and women who have served our country. I think that group of individuals provides a totally different perspective to health care and to commitment.”*

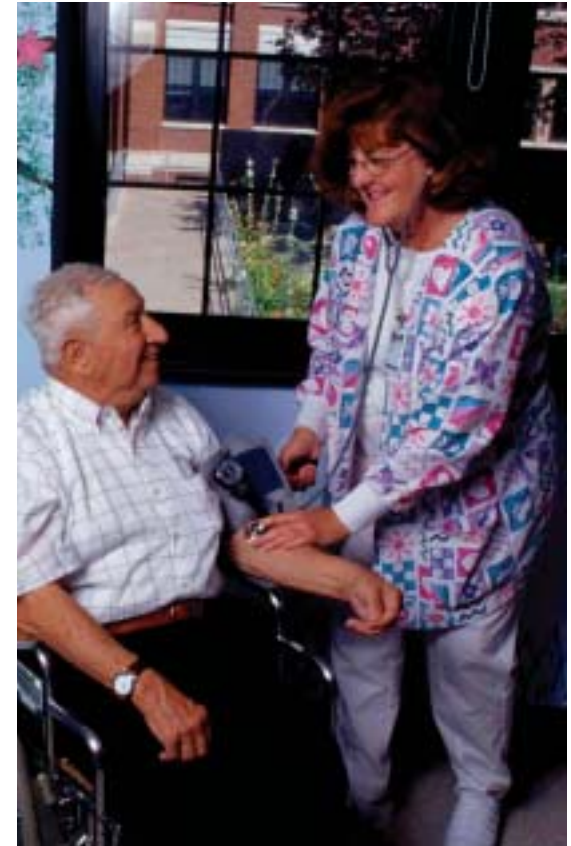
Eva DeShay, RN, BSB, Nurse Manager,  
Acute Inpatient Psychiatric Unit

*The Office of Nursing Services:  
Priorities and Goals*

- Advocates for nursing within all levels of the organization
- Serves as a resource for assistance and support for nurses throughout the system
- Facilitates the development of nurse leaders who assume key roles in transforming VHA
- Develops strategies to advise nursing practice and meet present and future needs of nursing staff caring for veterans

*Through combined, strategic efforts, VA nursing will pursue the following goals in our effort to positively impact our workforce and ultimately the patients we serve – America’s veterans:*

- Examine issues related to work environment and recruitment/retention/utilization of qualified nursing personnel at all levels
- Build leaders within our organization
- Design informatics systems that support the best possible nursing care and resource management
- Enhance patient-centered, coordinated care
- Build successful partnerships with professional, academic, and veteran organizations
- Advance the principles and application of evidence-based nursing practice and the research that informs this practice
- Enhance career development strategies and opportunities for career advancement
- Define nursing-sensitive indicators and measure the associated impacts on staffing, satisfaction, health outcomes, etc.



*2004  
Strategic Briefing*

*VA Nursing Service:  
Making a  
Difference in  
Veterans' Lives*



*"It is with great pride that  
we present this report,  
dedicated to the talented  
nursing staff of the  
Veterans Health  
Administration for their  
many contributions."*

The Office of Nursing Services

*“Quality is never an accident.  
It is always the result of high  
intention, sincere effort, intelligent  
direction, and skillful execution.  
It represents the wise choice of  
many alternatives.”*

**Willa A. Foster**

**Office of Nursing Services (108)**  
Department of Veterans Affairs  
810 Vermont Ave., NW  
Washington, DC 20420

Phone: 202-273-9237

Fax: 202-273-9119

Web site: <http://www1.va.gov/nursing/>

