

The NURSE ADVOCATE



By Nurses for Nurses

Issue 4. December 2013

CONTENTS

Letter from	1
Professor Ann-Marie Cannaby	
Nurses: The Impact	2
of Job Satisfaction on Patient Outcomes	
Nursing Executive	2
Noticeboard	
New HMC Ambulatory	3
Hospital (AMIS)	
International Nursing News	4
Understanding Mental Health	4
How to Reduce Blood Sample	5
Hemolysis	
Service Overview:	6
Women's Hospital Emergency Department Nurses	
HMC Celebrates Top	6
Projects at Awards Ceremony: Stars of Excellence	
Continuous Education for	7
Effective Nursing	
UCQ Nurse Educators:	9
Bridging the Gap	
Surgical Safety Checklist:	9
Nurses are Key	
Educational Resources	10
Nurse Inspiration and Humor	11
AWH Nurses Join Forces	12
with NCCCR to promote Breast Cancer Awareness	
The Nurse Spotlight	12
Useful Links	13
Crossword	14

Communication is Vital to our Success

By Professor Ann-Marie Cannaby – Executive Director of Corporate Nursing



Professor Ann-Marie Cannaby
Executive Director of Corporate Nursing

The Nurse Advocate was created to ensure that all nurses could read about what was happening across Hamad Medical Corporation (HMC). It is important in all aspects of our lives to feel informed, a part of the group or family and to feel valued.

As part of my role it is important to communicate, discuss and seek feedback from you all. For nursing to be successful, communication is

central to all our roles; talking to patients, families and other healthcare professionals is vital to improving care. Discussing, debating and asking questions are all part of advocating for patients.

It is important that within wards, units and across specialties, meetings are held to discuss not only what is happening, but also how you can improve care and organization in your areas. If you are not having regular meetings, discuss this with your team and establish one so that everyone can contribute.

Over the next few weeks and months there will be many changes and I will be asking for your thoughts. I would be grateful if you would take the time to be involved in professional nursing and service issues. It is not just my duty, but the duty of us all to communicate in order to facilitate coordinated improvement and growth.

Nurses: The Impact of Job Satisfaction on Patient Outcomes

Researched by: Kristine S. Luzano, RN, GH



“Pleasure in the job puts perfection in the work.” - Aristotle.

Data from the National Database of Nursing Quality Indicators (NDNQI), a quality improvement program of the American Nurses Association (ANA), show that there is a direct link between nurses’ job satisfaction and patient outcomes. Marla J. Weston, PhD, RN, FAAN, Chief Executive Officer

of the ANA states that many years worth of research has consistently supported the link between satisfaction and outcome.

The desirability of keeping one’s job also seems to play a key role in improving patient outcomes as well. During a

two-year time span, nursing survey data revealed that a 25% increase in job enjoyment, and a 29% increase in intent to stay, was associated with an overall quality-of-care increase by 5-20%. NDNQI data also showed that fall injury rates decreased by 17% in four years, hospital-acquired pressure ulcer rates decreased by 24-59% in two years and infection rates decreased by 87% in two years. The ranges are reflective of the

differences among nursing units and why reporting at the nursing unit level matters. This data supports the need to highlight nurse job satisfaction as a priority.

There are many factors which contribute to nurse satisfaction, many of them organizational, such as working hours, salary, education or promotional opportunities and shift patterns. But there are other factors that nurses themselves contribute to, like looking after their health, getting enough rest, being cooperative with colleagues and having a positive outlook that should also be considered when promoting nurse satisfaction.

Sources: www.nursezone.com: [Why Nurses’ Job Satisfaction Matters to Patients by Jennifer Larson](#) <http://nursing.advanceweb.com>: [Nurse Job Satisfaction Improves Patient Outcomes, NDNQI Data Show.](#)

NURSING EXECUTIVE NOTICE BOARD



ANCC Education Provider Site Gap Analysis

The American Nurses Credentialing Center (ANCC) conducted a gap analysis of our current nursing educational portfolio between November 10-14. The ANCC Accreditation Program identifies organizations worldwide that demonstrate excellence in continuing nursing education (CNE). Accredited organizations use evidenced-based ANCC criteria to plan, implement and evaluate the highest quality CNE activities. As a result, health ministries, nursing organizations, employers, and continuing education enterprises rely on ANCC accreditation to call forth advanced nursing practice and improved outcomes. Nurses can choose the highest caliber of education to meet certification or licensure requirements. The Nursing education team has met the requirements for application and are expecting to hear the outcome of the ANCC review by the early spring 2014.

Nursing Career Framework Launch Event

The launch event for the ‘nursing career framework’ was held on November 17th and 18th at the Staff Club in Hamad Bin Khalifa Medical City and at Al Khor and Al Wakra Hospitals between December 2nd and 3rd. The launch was a huge success with over 1100 nurses attending one of the eight sessions. The sessions comprised of an overview presentation, delivered by Professor Anne-Marie Cannaby, which was followed by attendees having an opportunity to discuss the elements of the framework in more detail in the exhibition room.

The purpose of the nursing career framework is to provide professional development guidance, through a structured career ladder, which defines required educational requirements and experience for each role as well as the behaviors, role expectations and skills required for success.

Feedback from the nurses who attended was overwhelming positive. Nurses who attended but did not have an opportunity to provide their feedback may do so by following this link: <http://npms.hamad.qa/en/feedback/feedback.aspx>

New HMC Ambulatory Hospital (AMIS)

By: Elizabeth Ann Thiebe – Assistant Executive Director for Nursing in AMIS

Since 2008, Qatar has been consistently ranked among the top three fastest growing economies in the world, according to Business Insider.com. Due to this, Qatar's National Development Strategy estimates the country's population will reach 1.78 million in 2013 to 1.86 million in 2016.

Such growth will create challenges for the healthcare industry of Qatar. Hamad Medical Corporation answers the challenge by one of the new health facilities on the rise in Hamad Bin Khalifa Medical City – The Ambulatory and Minimally Invasive Surgery Facility or AMIS.

As one of the Commissioning Projects of HMC that nears completion, the AMIS facility will provide a state of the art surgical and outpatient care for our patients. This new hospital, under the leadership of Dr. Khalid Al Jalham will bring together exciting new ways of providing healthcare, equipped with new facilities and new procedures for our patients. To prepare for this new hospital, HMC has expanded its leadership team to include Ms Elizabeth



Dr. Khalid Al Jalham, Medical Director, AMIS



Ms Elizabeth Ann "Liz" Thiebe,
Assistant Executive Director for Nursing in AMIS

Ann "Liz" Thiebe, Assistant Executive Director for Nursing in AMIS. She will be progressing the foundations set by Dr. Badriya Al Lenjawi and will be leading the AMIS nursing workforce.

AMIS is designed to cater outpatient clinics for various surgical specialties along with newly designed pre-admission system which will efficiently assess patient's suitability for surgery and anticipated nursing care packages during recovery. In addition, AMIS will have the capacity for 14 operating theatres, admission, recovery and secondary recovery space. Architecturally designed like a 5-star hotel, this means we will have the ability to provide efficient surgical services in order for patients to go home on the same day, hours after surgery in a beautiful setting.

The AMIS facility is located in Hamad Bin Khalifa Medical City and can be seen as a middle tower of the blue glass building in Ahmed Bin Ali St.

For more updates on AMIS, keep a look out in the Nursing Advocate.

International Nursing News

Researched by Leonardo L. Vicente SN. OPHTA DCU / Rumailah Hospital

Nurses: An Ageing Workforce

According to an article by the International Centre for Human Resources in Nursing, entitled "An Ageing Nursing Workforce", by the year 2020 there will be more than a billion people in the age group of 60 and over.

As is often discussed in healthcare reports, an ageing population has many implications for healthcare demands and provisions, which includes the nursing workforce. For example, in the UK there are approximately 180,000 nurses who are set to retire over the next decade

Country	Average age of an employed nurse	Average age of retirement by law
Canada	44.6	65
Denmark	43.8	65
Iceland	44	67
Ireland	41.4	65
Germany	39.4	65
Japan	37.9	60
New Zealand	44	60
Singapore	35	62
Thailand	41	60
United Kingdom	42	65
United States	46.8	N/A

and in the US over 40% of the nursing population is over the age of 50. This trend is appearing world-wide and could mean that a considerable amount of nurses will be retiring at a time when more nurses than ever will be needed.

It is suggested that to meet the healthcare demands of the ageing population, retention of older nurses is essential. This can be achieved through introducing changes in retirement age, attention to age discrimination (allowing those who are capable and willing to continue in appropriate roles), job redesign and pension benefits.

*Table and statistics sourced from:

http://www.icn.ch/images/stories/documents/publications/fact_sheets/2a_FS-Ageing_Workforce.pdf

Nurse Prescribing: an International View of Expanding the Nurse's Role in Pain Management

Researched By: Ritze P. Siason – SN Observation Unit / Rumailah Hospital

The World Health Organization Pain and Palliative Care Communications Program issued a release drawing attention to the aging population, the desire of people with terminal illness to spend their final days or weeks at home and the spread of AIDS in developing countries as some of the latest health trends driving changes in the roles and responsibilities of nurses today.

These health trends are expected to increase the demand for nurses who:

- are mobile and can work in the community
- can spend quality time at the bedside of advance stage terminally ill patients

- are qualified to provide pain management as part of comprehensive palliative care

In recent years, New Zealand, Uganda and the United Kingdom have all granted nurses permission to prescribe palliative care medications. Countries that have a well developed education system, such as the US, UK and Canada also offer advance training and qualifications to accommodate this.

Some countries, such as Australia and Sweden, allow nurses to prescribe medication at times when it is deemed necessary – for example, when there is a shortage of physicians to cater for the health needs of the population, often in dispersed rural areas. Yet, many countries

still do not allow nurses to prescribe medication.

Diseases such as AIDS and cancer are complex and require medical interventions at different stages. It is suggested that having a workforce of nurses who are well trained and authorized to administer pain medication will allow for more effective and efficient care for those patients. However, securing political support and persuading the legislature is part of the formal procedure necessary to ensure that legislation will be in place to allow nurses to prescribe.

Read more: <http://www.whocancerpain.wisc.edu/?q=node/180>

Understanding Mental Health: Questions and Answers

Contributed to by Mr. Ashish Badnapurkar, SN. Male Acute Psychiatry Unit. Rumailah Hospital

“Mental illness: a health problem that significantly interferes with an individual's cognitive, emotional or social abilities and can often result in a diminished capacity for coping with the ordinary demands of life.”

– Qatar National Mental Health Strategy

What is mental health?

Mental health is a term that refers to the wellness of the mind – in much the same way as physical health means the state of wellness of the body. As with good physical health, good mental health can be maintained and illness can be prevented and treated. It is important to recognize that having a healthy mind is equally important as having a healthy body.

What do we mean when we say a person has a mental illness?

It literally means that they are unwell or are having health issues related to the mind. The degree to which these issues present can vary drastically depending on the condition they have; there are many different types of mental illness, some are more common than others,



some have mild symptoms and some have severe ones. Mental illness can manifest in different ways; it can have behavioral, social and physical consequences.

How common is mental illness?

Approximately one in five people in Qatar are affected by mental illness.

The implication of this statistic is that, realistically, a great number of patients that nurses deal with may have mental health issues to varying degrees – therefore, a better understanding of what mental illness is can only be helpful.

Who is more likely to get a mental illness?

Mental illness can affect men, women, adults and children at any age and in all social circumstances. Mental illness is not exclusive to any type of person.

What causes mental illness?

Mental illness is not attributed to a single factor. The Qatar National Mental Health Strategy explains that “multiple social, psychological, and biological factors determine the level of mental health of a person at any point of time. Mental illness, like physical illness, is caused by a complex interaction between these factors.”

Examples of mental illness

Mental health illnesses/disorders incorporate a wide range of conditions, including various forms of depression, bipolar disorder, psychosis, dementia, schizophrenia, phobias, seasonal affective disorder and anxiety – to name a few.

What types of things can be done to improve or maintain mental health?

Although fitness and exercise is more often linked with maintaining a healthy body, attention to these things can

also have a positive effect on the mind and contribute to mental wellbeing as well as physical. Eating well, getting enough sleep and exercising are all good ways to maintain good mental health. If a person is diagnosed with a mental illness there are a number of medical treatments, the selection of which depends entirely on the suitability of the person and their condition – some of the treatments are medication based and some are therapeutic. The important thing to note is that mental illness is treatable and people can overcome mental illness just as they do with physical illness.

How to Reduce Blood Sample Hemolysis in the Emergency Department

Researched by: Ambily Joseph RN, Adult Emergency. Al Wakra Hospital

Hemolysis is defined as the rupture or destruction of red blood cells due to the the release of hemoglobin and intracellular contents into the plasma. When hemolysis occurs, the blood sample becomes unsuitable for lab analysis in most cases. When this occurs, a second specimen must be obtained, which often results in an increased staff workload and additional patient discomfort. A re-collection of hemolyzed blood specimens can also mean a delay in patient care and lengthen a patient visit to the Emergency Department.

It has been highlighted that one of the main causes of hemolysis is improper specimen collection during the blood drawing process. Improper specimen collection can include:

- Improper vein selection
- Increased tourniquet time and manipulation of the extremity
- Not allowing the sterilizing alcohol to dry when preparing the skin
- Using an intravenous catheter gauge that is too big or small
- Pulling a syringe plunger back too fast and/or forcefully
- forcefully expelling the blood from a syringe into the blood tube
- Not following the order of draw
- Vigorously shaking the tubes
- Under filled tubes, causing improper blood-to additive ratio

- Mechanical trauma during transport may occur with the use of a pneumatic tube system, and variable factors associated with the system , such as length, speed, and number of times the specimen is transported

To avoid hemolysis when taking blood samples you should be aware of the following:

- The most common sites for blood withdrawal are the median cubital, basalic and cephalic veins from the antecubital region of the arm.
- The choice of the IV cannula gauge size is dependent on the patient's conditions. The most commonly used sizes are 16 through 22.
- You should apply the tourniquet 10 cm above the selected puncture site. Do not place it too tightly.
- The tourniquet should be released after no more than one minute, and excessive fist clenching should be avoided.
- Do not tap the vein as it causes hemolysis even before drawing the blood.
- Without touching, allow the venipuncture site to air dry.
- Avoid drawing the syringe plunger back too forcefully when collecting blood with a needle and syringe.

- Avoid pushing the plunger too forcefully when transferring to a tube.
- Strictly follow the order of draw:
 - Blood culture tube
 - Routine coagulation
 - Serum tubes
 - Heparin tubes
 - EDTA tubes
 - Other tubes
- Ensure all blood collection assemblies are fitted securely, to avoid frothing.
- Gently invert the blood collection tube and mix additive specimens thoroughly according to manufacturers' recommendations.
- Always use blood tube holders.
- Send the blood samples through the proper system as soon as possible.
- Educate nursing aids.

In summary, collection of blood using IV catheters was associated with significantly more hemolysis compared with standard vein puncture but we should follow these blood collection practices to reduce hemolysis and thereby improve patient care and staff efficiency.

References:
Nursing blood collection techniques and hemolysis rule in an Emergency Department; Journal of Emergency Nursing 2008, 3y, (1)
BD lab notes, Volume 13 no:1 – HMC Lab Guide

Service Overview: Nurses at Women's Hospital Emergency Department

Researched by Shilah G. Ancheta, SN, Women's Hospital



Emergency Department Nurses at WH

Women's Hospital (WH) Emergency Department (ED) is a busy and fast moving environment, open 24 hours a day, seven days a week. Nurses within this department contribute to the care of 40-80 emergency and non-emergency patients per shift, a total of 120-240 patients per day presenting with obstetrical or gynecological problems.

At the WH's Emergency Department, many patients present in labor, some facing complications and others arriving

after giving birth at home, in the car or in the ambulance. As a team we work together, efficiently and with a priority for providing our patients with optimum care during this stressful time.

The Emergency Department Nurses, who are led by Sr. Alia A. Serour, are always on the go and in the middle of the action. The nature of their work means they regularly have the risk of exposure to blood, bodily fluids, secretions, mucous membranes, damaged skin and

contaminated environments. Infection prevention and control is a very high priority for the WH ED nurses and they apply strict adherence to policies and guidelines to ensure protection for patients and themselves. Some of the basic components of standard precaution are:

- Hand hygiene
- The use of personal and protective equipment
- Respiratory hygiene and cough etiquette
- Maintenance of a clean environment

We see nursing care and medical intervention at its best in the Emergency Department. Every day is a new journey as we experience varied presenting cases and support the patients as they go through their experience. However, at the end of a long and tiring shift comes the most satisfying element to being a nurse in the Department, knowing that we made a difference in the safe delivery of the children, despite any complications.

HMC Celebrates Top Projects at Awards Ceremony: Stars of Excellence



Dr. Hanan Al Kuwari presenting to Women's Hospital's Gynecologic Oncology Multidisciplinary team

Hamad Medical Corporation (HMC) held its fourth annual staff awards ceremony, Stars of Excellence, at the Qatar National

Convention Center on November 16th. The event, which was attended by over 800 members of HMC staff and

international guests, saw 17 projects win awards and a further 13 projects receive recognition for their achievements.

The winning projects were selected from more than 250 submissions based on their performance against key criteria, such as how the project compares and is benchmarked against international best practice, what direct improvements came about as a result of the project and how the project has impacted on patient care and the overall patient experience.

Hanan Al Kuwari PhD, Managing Director of HMC said the standard of projects submitted to the Stars of Excellence program was exceptionally high.

"It is important for organizations to recognize and reward achievements. The Stars of Excellence awards program is HMC's way of acknowledging all the hard work done by teams across the organization that have made a positive difference to the services we provide. Every year I am so impressed by the standard of the submissions to the program; there is so much outstanding work going on at HMC and a real commitment from our staff to ensure we are providing the safest, most effective and compassionate care to each and every one of our patients.

"An example of this exceptional teamwork is the Ambulance Service project, which was given the Managing Director's Special Award. The project involved implementing clinical guidelines to make the service more efficient and effective in dealing with pre-hospital patient care. The outcomes of the project are beneficial for the organization but, most importantly, to our patients.

Nasser al Naimi, Executive Director of the Center for Healthcare Improvement said that the projects that were submitted for the Stars of Excellence program were from all over the organization.

"This is the fourth year we have managed the Stars of Excellence program and every year we are impressed by the quality and the range of submissions. The awards ceremony is a way to recognize teams from all across HMC that have made a significant and measureable contribution to the quality of care provided to our patients, and serves as motivation for the organization to continually seek out new ways of improving healthcare services in Qatar."

Submissions to the Stars of Excellence program are made under the categories of health, education and research. The winning projects cover a range of disciplines.

Winners

Managing Director's Special Award

Implementation of the Ambulance Service Clinical Guidelines

Health: Practice Award

Star of Excellence = HMC/SickKids Early Intervention Program
Rising Star = Gynecologic Oncology Multidisciplinary team

Health: Performance Category

Star of Excellence = Reduce waiting time of Myocardial Perfusion Scan

Rising Star = Fast Track to redesign patients flow in Women's Hospital Emergency Department

Health: Leadership Award

Star of Excellence = HMC-Wide Implementation of Coding in ICD-10-AM

Rising Star = National Diabetic Centre in HMC

Health: Service Award

Star of Excellence = Breast Surgery Improvements

Rising Star = Trauma and Surgery Quality and Patient Safety

Health: Technology Award

Star of Excellence = Hamad Patient Contact Centre

Rising Star = LUCAS Chest Compression Device

Education Award

Star of Excellence = Educational Series on Building Therapeutic Nurse-Client Relationship

Rising Star = Medical Professionalism at Workplace

Glowing Star = K2 Fetal Monitoring Training Program

Research Award

Star of Excellence = Hamad General Hospital Injury Prevention Program: Translating Research into Public Safety

Rising Star = Pediatric Emergency: Nurtures Research Culture

Glowing Star = Epidemiology of vitamin D deficiency among elderly population

Continuous Education and Research for Effective Nursing

Researched by Nymrod M. Palarao, Surgical ICU SN, Hamad General Hospital and Kristine S. Luzano, RN, HGH

"Never let us consider ourselves as finished nurses...We must be learning all our lives."

- Florence Nightingale

"Nursing research is a scientific process that validates and refines existing knowledge and generates new knowledge that directly and indirectly influences nursing practice."

- NursePlanet.com

Learning facilitates improvement

Recent economic changes have made almost all industries and most facilities in the world today more competitive and more demanding. As things change, often driven by modernization and improvement, new standards are set and new expectations are defined. Most industries have to be dynamic to survive, which requires having a workforce who is willing to learn, adapt and accept that education in their field continuously.

Personal satisfaction and learning

Alongside the need to facilitate improvement and survive in a competitive industry, it is suggested that the most fulfilled workers are the ones who are challenged and who continue to achieve after their initial education ends. According to an article by Dan Weber, "Being stagnant in a profession may cause boredom and a feeling of insufficiency."



How is this applicable to the nurse role and why is it so important?

Continuing education is a very important element for nurses as the healthcare industry is one that is constantly changing, improving and developing best practice to ensure optimum patient care at all times. Consequently, learning is a must for nurses and in many cases is a mandatory part of the modern nursing role.

What do we mean by continuous learning?

There are many ways in which a nurse can learn and the topics they can explore can range from being general to highly specialized. Nurse education can be acquired through various mediums, including:

- Self study
- On the job training or orientation
- Academic courses
- Seminars
- Workshops
- Lectures
- Symposiums

What are the key benefits of continuous learning for nurses?

Professor Rafath Razia of the Principal

Government College of Nursing, Hyderabad, highlights the following as the key benefits of continuous learning for nurses:

- Improved knowledge and skills
- Better performance
- Quality patient care
- Increased job satisfaction
- Attitude change
- High motivation

In addition to enabling us to provide the safest and most effective care, embracing continuous learning will contribute to our aims of becoming a world-class nursing service.

An example of how HMC nurses are contributing to continuous education

On September 8, 2013, a group of nurses from different departments in HMC were featured in a local newspaper publication, The Qatar Tribune. The article highlighted their dedication to improving nursing care through research. These nurses are part of the Association of Filipino Nurse Researchers in Qatar (AFNRQ), which aims to promote interest in research among nurses and collaborate with different institutions to support this goal.

The AFNRQ President, Mark D. Santos, RN, MAN, who is currently working as a Trauma Database Analyst in Hamad General Hospital (HGH), said that the group was formed because he believed that learning does not stop with the awarding of your Bachelor's or Master's Degree. The message is that as nurses we should strive for continuous professional improvement in order to be the best we can be for our patients and to improve for our own professional benefits. In order to follow this advice, we nurses should always bear in mind that we have to rely on researched-based practice to ensure that we deliver the highest quality of care.

"Nurses should also invest their time and effort in developing their skills in research, as the healthcare system grows more complex. With nursing research we will be able to contribute to the development, refinement and expansion of a scientific approach to nursing, which will be beneficial not only to nurses but also to patients and the healthcare system," Santos said.

The Nursing Newsletter Committee will aim to keep you updated with the groups' progress and any new associated developments.

University of Calgary – Qatar’s Standardized Patient Program: Bridging the Gap between Theory and Practice

Researched by – Jennifer Grinstead Mason RN, University of Calgary – Qatar

Do you remember being assigned to your first patient? I remember my first day in nursing; I was terrified, my legs were unstable, I was breathing quickly, my mind went blank and I refused to go into the hospital. Fortunately for me, a fellow student pulled me through the doors. I had been a straight “A” nursing student for a full year. I knew all the theory about patient care and communication; however, I had never even been in the same room as a patient!

There is famous quote: "Tell me, I will forget. Show me, and I may remember. Involve me, and I will understand." – Confucius. This idea serves today’s nursing educators as a guide to bridge the gap between learning theory in a classroom and actual patient care.

Simulation in healthcare has been used for many years to practice psychomotor skills in nursing. Over the past year, nurse educators at the University of Calgary-Qatar (UCQ) have started to use Standardized Patients (SP’s) as a specific simulation strategy to provide students with an opportunity to interact with “patients” prior to entering their first clinical setting.



Jennifer Grinstead Mason, RN
University of Calgary – Qatar

A SP is a person who is hired and paid to portray a patient. The SP role—plays a patient with a particular health history for the purpose of teaching and testing nursing student’s clinical skills. During a scenario with a learner, the SP responds to questions by the student and, in some cases, undergoes specific physical examinations. The word "standardized" means that the SP repeats his or her story in a consistent manner to numerous students. When students engage with a standardized patient they not only have

the opportunity to practice psychomotor or communication skills with them, they also receive patient feedback regarding their performance. The SP is asked to tell the student how he/she as a patient, felt during the interview or assessment.

Becoming an SP requires a good memory, excellent listening skills and concentration during student scenarios and student health assessment examinations. An SP must have the ability to understand and follow instructions in English and provide feedback in English as the Nursing Program at UCQ is delivered in English.

The University of Calgary-Qatar currently has the first nursing Standardized Patient Program in the GCC. The UCQ Standardized Patient Program is an essential part of the modern nursing educational experience. The student experience with Standardized Patients is vital to their development as a practicing nurse. At UCQ, students are provided with rich educational opportunities that will bridge the theory/practice gap for new graduates entering professional nursing practice.

Surgical Safety Checklists: Nurses Key to Implementation

Researched by Ruby Yves Ignacio SN- OPHTHA-OR / Rumailah Hospital

In June 2008, the World Health Organization (WHO) launched a second Global Patient Safety Challenge, ‘Safe Surgery Saves Lives’, to reduce the number of surgical deaths worldwide. In the same year it launched the Surgical Safety Checklist as a tool to address this challenge.

The surgical safety checklist is intended to give surgical teams an easy and efficient set of priority checks for ensuring patient safety and facilitating team work and communication in all operations performed. The checklist identifies three phases of an operation



which corresponds to a specific period in the normal flow of work: Before the induction of anesthesia (“sign in”), before the incision of the skin (“time out”) and before the patient leaves the operating room (“sign out”). In each phase, a checklist coordinator must confirm that the surgery team has completed the listed tasks before the operations starts.

Immense efforts are being initiated to implement this worldwide and Hamad Medical Corporation adopted the checklist to be used in all theaters. After a series of seminars and trainings arranged for all relevant surgical teams, the surgical checklist was implemented formally in June 23, 2013.

The compliance was strictly monitored by the chosen monitoring tool (log sheet with percentage of compliance with surgical safety checklist) which was submitted to the International Patient

Safety Goals (IPSG) committee to identify issues and conflicts within the period of three months.

The implementation was very challenging for the Ophtha O.R. nursing team in Rumailah, as not only does the implementation of new procedures take time to imbed, but for this particular system, many individuals had to comply to make the checklist work effectively. For example, the surgical team needs to ensure they are involved in all the phases of the Checklist, including nurses, anesthetist and surgeons. Ms. Ruby Yves Ignacio, SN within the Department, explains some of the difficulties she faced, “When we first started to use the checklist it was difficult to get everyone to comply with the new system because it took some additional time to fill out the checklist and were keen not to delay surgery.”

Ms Ignacio described how nurses have played a very important role in getting the Department to where it is now; fully utilizing the Checklist. *“As nurses, we played an important role in empowering the use of the Surgical Safety Checklist for the safety of our patients. Although resistance was present along the way; nurses took control. They became consistently firm and adhered strictly in coordinating and structuring information exchange, speaking out clearly and aloud enough to get the attention of everyone in the theater. They have used a lot of strategies to draw attention to everyone and ensure the participation of the whole team.”*

The O.R. staff now has 100 percent compliance in utilizing the Checklist, a statistic that is closely monitored, and as a result we are able to provide a higher level of patient safety.

Educational Resources:

Researched by: Tawfiq Elraoush, RN, MSN, Sr. Educator

HMC Corporate Events:

The 1st Nursing Acute Pain Management Study Day:

This event is to be conducted on December 10th, 2013. Areas to be covered are: the role of acute pain services in pain management, physiology of acute pain, assessment of acute pain, pharmacological management of acute pain, local anesthetic infusions and nerve block for acute pain, epidural analgesia and patient controlled analgesia. For more details contact Mr. Atef Al-Tawafsheh, Advance Clinical Nurse Specialist-Pain Management Services-HMC (AAITawafsheh@hmc.org.qa)

Nursing Education Department programs:

1. Cancer Foundation Program:

This 3-day program will provide a generic foundation in the area of cancer for qualified nurses. These nurses will work on the whole, in non-oncology specialty areas. The main objective is to

increase the base knowledge of nurses generally to enhance patient care for those with cancer, admitted or diagnosed within non-specialized clinical areas. For further information regarding this short course, please contact Martyn Main, Senior Nurse Educator (mmain@hmc.org.qa).

2. Evidence-Based Practice Program:

This program is an interactive participatory and educational. It is designed to provide an understanding of evidence based practice as applied to care and management strategies; which underpin the provision of interventions that impact positively on patient outcomes. The aim of the learning experience is to facilitate an understanding of evidence based practice; how the theory is formulated and the key components within the process. It is being delivered to senior nurses, nurses and leadership level staff. Between January and September 2013, over 180 participants attended the evidence based practice workshops.

Anecdotal evidence suggests that these courses have been a good source of information for all those who have attended so far. Perhaps one of the most important outcomes is the expression of interest by a number of the staff to develop their knowledge even further and the desire to increase their contribution in areas of research and quality improvement processes such as audit of care. For more details please contact Ms. Fiona Milligan, Senior Nurse Educator (FMilligan@hmc.org.qa).

3. Staff Nurse to Charge Nurse Development Program:

Nurses are both healthcare providers and healthcare coordinators – they have clinical and managerial components to their roles. This training program has been designed to assist staff nurses in transitioning into a charge nurse position and to help them meet the challenges and demands of their profession, both now and in the future. For more details please contact Mr. Fawwaz Al Amiri, Nurse Educator (FALAMIRI@hmc.org.qa).



Nurse Inspiration and Humor

Researched by Kristene Joy C. Facultad. SN. Hamad General Hospital

All nurses have their own personal moments when they might ask themselves, "Why am I a nurse again?" This is often a passing thought during a difficult shift or at the end of a tiring day. During these times we all need a little inspiration or some humor to lift our spirits. The newsletter committee has decided to share with you some of their favorites.

Funny reasons to be a nurse:

- When it comes to needles, it's better to give than receive
- Celebrate every special day with your friends.....at work



Inspirational quotes:

"Constant attention by a good nurse may be just as important as a major operation by a surgeon."

-Dag Hammarskjold,
a Diplomat and Author.

"When you are a nurse you know that every day you will touch a life or that a life will touch yours."

- Author unknown

Funny quote:

"You know you're a nurse if.... you triage the laundry when at home....this pile needs immediate attention, this pile can wait, this pile, with a little stain stick, will be ok until you get back to it."

-Donna Wilk Cardillo. RN, Keynote Speaker, Humorist and Motivator.



If you have any inspirational quotes, jokes or funny stories, please share them with us by emailing to Nursing.
Newsletter@hmc.org.qa

AWH Nurses Join Forces with NCCCR to Promote Breast Cancer Awareness

Researched by Fatma Naji, HN, Al Wakra Hospital

After skin cancer, breast cancer is the most common kind of cancer in women. Every year during the month of October, the world supports Breast Cancer Awareness Month through a variety of initiatives. In addition to a number of Hamad Medical Corporation activities to support this event, Al Wakra Hospital nurses joined forces with the National Center for Cancer Care & Research team for a campaign to highlight the importance of early detection, protection and treatment. All information was provided in English and Arabic.

The overall purpose of the campaign, which took place at the Mother and Child Division at the Outpatient Department on 28 - 29 Oct, 2013, was to raise awareness about the importance of annual screening and how it can save lives. Importantly it highlighted to women



of 40 years of age and above, the importance of having an annual mammogram. The effort to raise awareness for breast cancer continued throughout the month of October.

“Our message to community as nurses should be that early detection is the best way to prevent women from dying from breast cancer.”

The Nurse Spotlight

HMC is fortunate to have a number of exceptional nurses. In the nurse spotlight we hope to share with you the achievements of our colleagues to celebrate their contributions to our profession.

This month we are celebrating....

WHO: Ms. Noronha Maria Daisy
POSITION: Charge Nurse
HOSPITAL: NCCCR

As well as being a dedicated charge nurse at NCCCR, Ms. Noronha Maria Daisy, ‘Daisy’ to her friends, is a valuable member of the Nursing Newsletter Committee. She works hard to contribute to The Nurse Advocate and provide us with interesting articles to share with our fellow nurses. We asked her some questions to find out more about her:



1. Where are you from?

I am originally from Goa, India. I was born in Mangalore. Before coming to Doha, I settled in Bombay and consider that to be my home.

2. Tell us about your experience in nursing?

I have been a nurse for 27 years. Out of the 27 years I have spent 24 years

working specifically within oncology in a variety of nursing roles. I am very proud to be a nurse and feel that I touch a great deal of people with my work. I am always keen to learn and improve as I recognize that nursing is a very challenging job and one that should be taken seriously.

3. How long have you worked at HMC and in what roles?

Initially I joined HMC in 2003 as a Staff Nurse (SN) for BMT. In 2005 I was promoted to charge nurse (CN). I currently undertake supervisor duties, work as a cancer awareness coordinator and I am involved in nursing education within NCCCR.

4. What do you find challenging in your role and what is the most enjoyable part of your job?

The best part of this job for me is that

every day is a new day, and I get the opportunity to learn something new. I feel that as a nurse I am at the center of the healthcare team which is a nice feeling. I also like that being a nurse puts me in a position to be a role model for health. I take care of my health and I have not had any sick leaves in the last ten years! Being a nurse has also allowed me to develop. I have adopted many new roles and been involved in many different activities. I am happy to have had the opportunity to accomplish all of the things I have so far.

Nursing is a challenging job and being a nurse within a cancer hospital can be particularly challenging at times. There are things that we deal with, such as witnessing the downs of people's lives, which we all find difficult because we care. Nursing generally is challenging because as care givers we need to always be alert and never let tiredness get the better of us; we must always remember that we are in a position whereby making

a mistake can be life-threatening. The dynamic nature of nurse work means that we have to learn new things which can be challenging when our workload is already demanding – learning new things can take time. Although I know I am helping and providing the best care I can, there are some circumstances where I feel helpless when I know I can only provide comfort and not a cure to our patients. It is difficult to not become close with patients when you are caring for them over a number of weeks or months. Shift work is a challenging aspect of being a nurse – particularly the night shifts. From the beginning you have to accept that you have to make certain sacrifices. But what motivates us is knowing how important our work is.

5. Why did you get involved in the newsletter?

I was very keen to get involved in the newsletter because I think it's a great way to connect people. There are thousands of nurses in HMC and we all

can go about our work without hearing some of the wonderful things happening in other hospitals and departments. It's nice to be able to share our views, Ideas and stories. The Nurse Advocate can change people's views and create a positive outlet for nurses. I am happy to be part of the newsletter and would like to thank my sub-committee and friends for encouraging and supporting me.

6. What are your professional goals for the future?

I am planning to further my education (post BSN). I am already in the final stages of my application process to the University of Calgary - Qatar. I also plan to learn the Arabic language as I think learning Arabic fluently will make me more effective in my job. In the near future I would like to get involved in nursing research activities and will do something more involved in community development – to contribute towards motivating and encouraging children and youth to adopt a healthy lifestyle.

USEFUL LINKS *Provided by Tawfiq Elraoush, RN, MSN, Sr. Educator*

There are many useful resources available through the intranet. This month we offer you two websites relating to continuing nurse education:

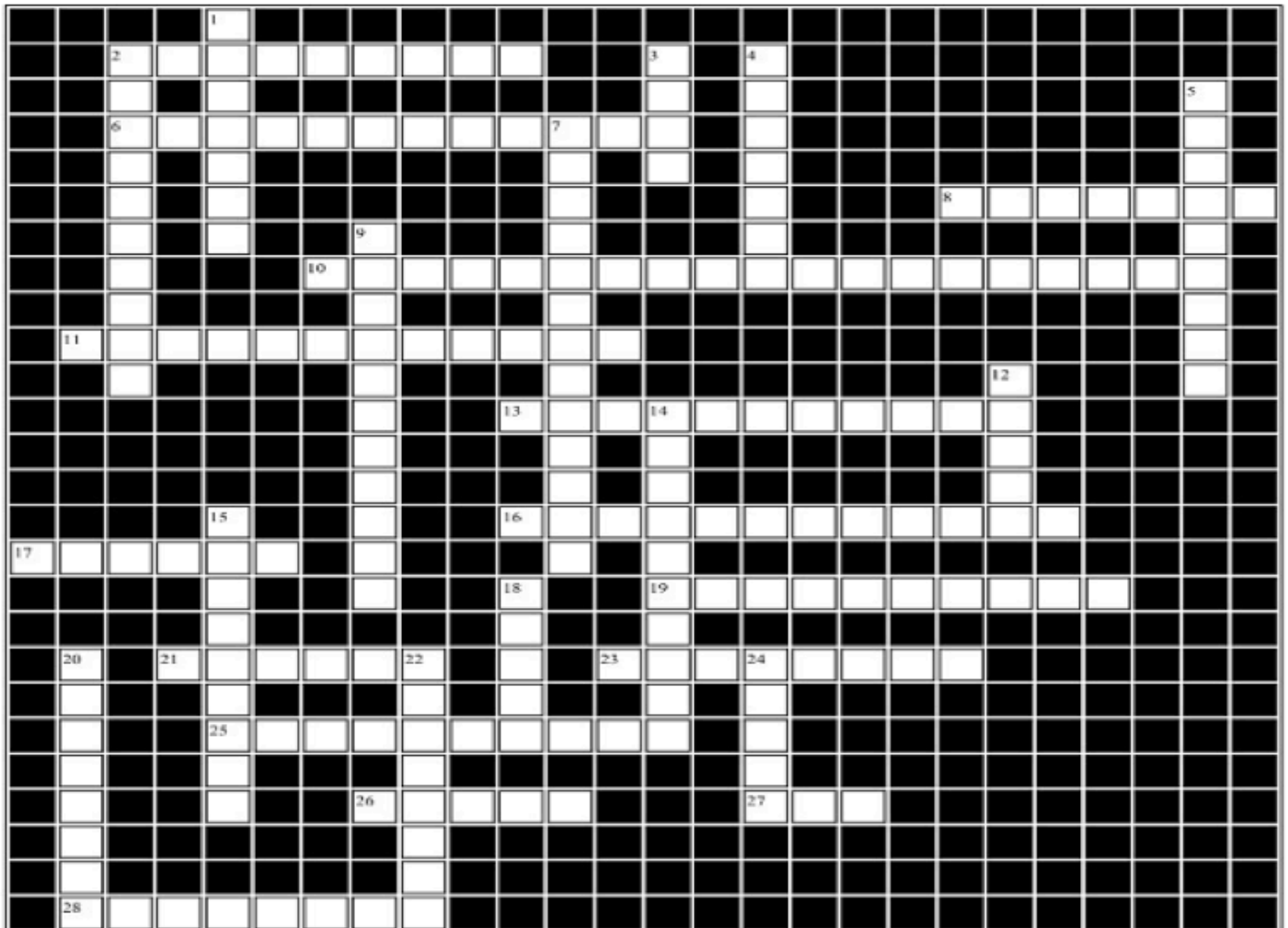
- <http://www.mededseminars.net/> – The MED.ED website is an accredited ANCC provider that is accepted by Nursing Education Department. It is a continuing education resource.
- <http://w3.rn.com/>: RN.com is a leader in continuing education for nurses. It advances the quality of healthcare by delivering relevant and contemporary clinical education to healthcare professionals. It is also committed to supporting continuous professional development.



Cross Word

Infection Prevention and Control

By: Bethany Brown – [<http://www.armoredpenguin.com/crossword/Data/best/nursing/infection.prevention.01.html>]
 Researched by: Ritze P. Sison – SN – Observation Unit / Rumailah Hospital



Across

2. Type of mask use for droplet precautions'
6. VRE is the abbreviation for Vancomycin Resistant _____
8. Antiviral used to treat Influenza Illness or Exposure
10. Respiratory protection required for entry in Airborne Isolation Rooms (5words)
11. Use this hand hygiene method for C diff.
13. An example of High-Touch surface in Pt's. Environment
16. _____Healthcare workers can spread the Flu to workers and patients
17. C Diff. _____are known to survive at least 90 days in the environment
19. Pandemic Flu is caused by this type of Influenza Virus
23. Precautions used for known/suspected TB
25. Preferred specimen for detecting VRE colonization
26. This infection causes diarrhea
27. When contaminating hands using a waterless alcohol product, hands should be rubbed together until they comes _____
28. Type of infection which assumes everyone is affected

Down

1. Precautions used for C Diff.
2. Vaccination, hand hygiene, PPE use, and safe handling of soiled linen and sharps are _____ measures
3. Methicillin-Resistant Staph Aureus Abbreviation
4. You should wash your hands for at least _____ seconds
5. An infection that requires Droplet precautions
7. Skin Prep agent for line insertion
9. Most effective measures to prevent spread of infection
12. Number of negative specimens required to D/C Airborne precautions
14. Healthcare workers should receive this series of vaccines
15. Hepatitis A and C Diff. are spread by this route
18. Most common site of MRSA Colonization
20. TAMIFLU must be started within 48 hours of flu _____to be effective
22. A patient with salmonella gastroenteritis requires this type of precautions
24. Hepatitis B & C, and HIV are spread by this.