



Seattle Children's®
HOSPITAL • RESEARCH • FOUNDATION

Nurse Conference Committee (NCC) Meeting Minutes

Date: November 6, 2023

Time: 9:00-11:00 AM Location: WebEx

NCC Members	Delegate	7/26/23	9/6/23	10/18/23	11/6/23
Bonnie Fryzlewicz	TBD	Present	Present	Present	Present
Danica Pytte	Tammy York	Present	x	Present	Both Present
Paulene Toussaint	Holly Beauchene	x	x	Present	Both Present
Holly Beauchene	-	Present	Present	Present	Present
Kara Yates	-	Present	Present	Present	Present
Kelsey Gellner	-	Present	Present	Present	x
Kristie Page	TBD	Present	Present	Present	Present
Laura Licea	TBD	x	x	Present	x
Linda Burbank	-	Present	Present	Present	Present
Lindsey Kirsch	-	Present	Present	Present	Present
Lori Chudnofsky	Molly Aaseby	Present	Present	Present	Present
Mary Field	TBD	X	x	Present	Present
Sam Forte	-	x	Present	Present	Present
Annika Hoogestraat	-	Present	Present	Present	Present
Stefanie Chandos	-	Present	x	x	x
Katie Podobnik	-	Present	Present	Present	Present
Te'onna Adams	-	Present	Present	Present	Present
Therese Hill	-	x	Present	Present	Present
Guest(s): Maureen O'Brien, Sharon French					
Notetaker: Sarita Wall					

ITEM NO.	AGENDA TOPIC	DISCUSSION	COMMITTEE ACTION
I.	WPV/ASR: <ul style="list-style-type: none"> No tolerance violence policy. Comprehensive security screening. Cost/benefit of metal detectors/wands/dog, etc. Active shooter drills – when and frequency. HEAL signage update on destruction. BST representative on each unit. 	<ul style="list-style-type: none"> What has been done to report to nursing, as a whole, on workplace violence/assaults? <ul style="list-style-type: none"> There will be more formal communications coming after the Safe Work Environment committee aligns priorities. Phase I of the PBMU Task Force is to implement “Staff Facing” communications to start in January. What is SC doing to prevent physical assaults? <ul style="list-style-type: none"> There has been a rise in aggression towards staff nationwide (according to peers in other psych facilities). Working on systematic changes Training – When there is a physical threat, physical intervention is required. Have been meeting at the high acuity huddles to try and understand if there’s something more to be done. <ul style="list-style-type: none"> Charge Nurses. Attending. Medical Director. Area leader/LOC. Ukeru – Blocking pads. Developing clinical standard work pathways Looking at staffing and retention. <ul style="list-style-type: none"> Cross training to allow more staff to float. Security has budget to help cover incentive pay instead of offering incentive pay individually. <ul style="list-style-type: none"> Each unit does NOT have their own budget for security. Right side budget for mental health watch needs and etc., and not using security. <ul style="list-style-type: none"> Hiring up to have the right number of resources. Currently discussing setting clear parameters around security presence in PBMU. Staff support (up to 10-12 hours after incident.) <ul style="list-style-type: none"> Get staff medical care. 	<ul style="list-style-type: none"> Maureen to follow up with Security leadership to dispel budget rumors and report back via email. Invite Laura Knapp to discuss ED mental health plans and present the PBMU Task Force dashboard. Paulene to communicate PBMU Task Force roster. Bonnie to connect with Security leadership to see if cost/benefit of metal detectors/wand s/dog, etc. has been done and report back via email. Mary to take badge alert system to the SWE committee for discussion.

ITEM NO.	AGENDA TOPIC	DISCUSSION	COMMITTEE ACTION
		<ul style="list-style-type: none"> • Debrief of event within the shift. • Ground and reset (taking care of self). ▪ Intent vs. Cognitive. <ul style="list-style-type: none"> • Complicated to determine. <ul style="list-style-type: none"> ○ Trauma response. ○ Trying to get something desired. • PBMU Task Force. <ul style="list-style-type: none"> ○ Currently creating sub-committees • When to call law enforcement. <ul style="list-style-type: none"> ○ Develop a tool to help staff decide if they want to involve law enforcement. ○ Task Force creating equitable. ▪ Immediate interventions. <ul style="list-style-type: none"> • High acuity huddles. • Environmental Safety (removing objects that could be used to make weapons). • Consistent review of PRN medications. • Daily care plan checks. • Frequent communications about escalation pathways. • Increased HR and leadership visibility (physical and written). ▪ Prevention (what is being done to prevent WPV) <ul style="list-style-type: none"> • On the next Safety Work Environment committee agenda. • Need to assess what is in place and what needs to be done further. ▪ Active Shooter Drills. <ul style="list-style-type: none"> • In addition to training modules, there's a need for requirements and cadences for each unit to have active shooter training and drills. ▪ Communication. <ul style="list-style-type: none"> • Explore having communications come from the union in addition to SC. 	<ul style="list-style-type: none"> • Paulene to follow up about workplace violence/racism org-wide communications and signage. • Bonnie, Paulene, and Mary to collaborate on effective communication about WPV. • Therese to send photos of peer signage to Paulene.

ITEM NO.	AGENDA TOPIC	DISCUSSION	COMMITTEE ACTION
		<ul style="list-style-type: none"> Review peer signage (UW, Swedish, etc.) for ideas on messaging to staff. 	
II.	Staffing: <ul style="list-style-type: none"> Staffing units per state plans. What is being done about staffing holes? FMLA – policy with regards to recognizing sick and vacation time hours. 	Preventing trends of understaffing. <ul style="list-style-type: none"> Ongoing daily priority. Need better systems in place to track staffing plans. Working with units on how they are communicating with the staffing office when staffing plan isn't met. New staff is starting this month as well as in February. <ul style="list-style-type: none"> All units have hired to their max. There is a lag when the new hires are able to step into staffing. Andrew Mullenix will be able to look at sick time usage data over the past year to understand how to plan. Skill level/Properly trained staff. <ul style="list-style-type: none"> There is a plan with Surgical R6 to accelerate some of their training to be able to pull some of the difficult patients. Lack of RNs creating a lack of CNA support. <ul style="list-style-type: none"> In the process of addressing CNA staffing and hiring and how to fill gaps. Ask for additional nurses when there isn't enough CNAs. To help manage some watches, we are in the early phases of exploring the feasibility of virtual sitter technology for some of our patients -- won't be a fit for all but may decrease our overall sitter use. There hasn't been any specific messaging that's been sent out on how to use a nurse for patient watch vs. a CNA, however there will be some communication going out soon. The preference is to use the CNAs for patient watches and then to cover any floor support holes-backfill with RNs (either as unit resource OR reduced assignments). 	<ul style="list-style-type: none"> Nothing further needed.
III.	Ambulatory residency postings: <ul style="list-style-type: none"> Updates 	<ul style="list-style-type: none"> SC will be pausing the ambulatory nurse residency program due to not having a way to hire directly for ambulatory after one year residency. <ul style="list-style-type: none"> Don't know which units will have openings (when/where). 	<ul style="list-style-type: none"> Nothing further needed.

ITEM NO.	AGENDA TOPIC	DISCUSSION	COMMITTEE ACTION
		<ul style="list-style-type: none"> ○ Limited because more senior RNs may apply for openings. 	
IV.	Conclusion of topic raised at last meeting: <ul style="list-style-type: none"> • Linda Burbank 	Transparency/Trust/Competence <ul style="list-style-type: none"> • WSNA called for immediate action and more transparency about what is being done in the moment. <ul style="list-style-type: none"> ○ Nurses aren't feeling heard. ○ Nurses aren't feeling that SC is a safe place to work. ○ Nurses aren't feeling safety is a priority. • WSNA requested updated org. chart for transparency. • WSNA recommended immediate action to prevent further safety events. 	<ul style="list-style-type: none"> • Bonnie to send the link for the org chart to Lindsey for distribution.

Committee Action Items: *Inform, Discussion/Feedback, Decision, Action*
Include: *Who, What, When*

Next Meeting: TBD, Virtual Meeting

Committee Action Items – Rolling Queue		
Topic	Assigned To:	Status
GCO: <ul style="list-style-type: none"> Follow up offline and provide an update via email. 	Bonnie Fryzlewicz	In progress
Follow up from letter to Bonnie: <ul style="list-style-type: none"> Present CLABSI data . Gather Acute care data regarding staffing plans/census and discuss ambulatory data. Forward email to Bonnie regarding Bellevue surgery nurses. Follow up with Bellevue surgery leaders. Share with leaders how to be more intentional about speaking and addressing EDI items proactively. Evaluate root cause for a resolution. Evaluate root cause for a resolution. 	Bonnie Fryzlewicz Kristie Page Linda Burbank Bonnie Fryzlewicz Bonnie Fryzlewicz Paulene Toussaint Paulene Toussaint	In progress In progress In progress In progress In progress In progress In progress

Workplace Violence/ASR: <ul style="list-style-type: none"> • Leaders to find a way to leverage committees to ensure the correct people are at the table and use NCC time to report out after those discussions. • Follow up with Juliet on HEAL signage. • Follow up with Security leadership to dispel rumors of each unit having their own security budget (in regard to incentivizing security resources) and report back via email. • Invite Laura Knapp to discuss ED mental health plans and present the PBMU Task Force dashboard. • Communicate PBMU Task Force roster. • Take badge alert system to the SWE committee for discussion. • Follow up about workplace violence/racism org-wide communications and signage. • Consider different communication pathway regarding WPV to WSNA RNs. • Send photos of peer signage to Paulene. 	SCH Nurse Leaders	In Progress
	Maureen O'Brien	In Progress
	Bonnie Fryzlewicz	In Progress
	Paulene Toussaint	In Progress
	Paulene Toussaint	In Progress
	Mary Field	In Progress
	Paulene Toussaint	In Progress
	Sam Forte	In Progress
Conclusion of topic raised at last meeting: <ul style="list-style-type: none"> • Send the link for the org chart to Lindsey for distribution. 	Therese Hill	Complete
	Bonnie Fryzlewicz	Complete
Topic	Frequency	Next Agenda this would be on
Expense reimbursement	Twice per year	March 2024

Education Budget Metrics: <ul style="list-style-type: none"> • Education leave hours (budgeted vs actual) • Professional leave hours (budgeted vs actual) • Total funds awarded (can report out on this two times/year) • Any denials of leave requests (and the nature of the denials) 	Twice per year	March 2024
WSNA Roster	Quarterly	January 2024