



Seattle Children's[®]
HOSPITAL • RESEARCH • FOUNDATION

Nurse Conference Committee (NCC) Meeting Minutes

Date: February 21st, 2024

Time: 1:00-3:00 PM Location: WebEx

The purpose of the Nursing Communication Committee (NCC) is to enhance communication between SCH Leadership and the nursing staff, fostering collaboration to address issues affecting the nursing team. The committee's role is advisory in nature, focusing on providing recommendations rather than making decisions.

NCC Members	Delegate	12/13/23	1/10/24	2/21/24	4/3/24
Bonnie Fryzlewicz	TBD	present	present	x	
Danica Pytte	Tammy York	present	present	present	
Paulene Toussaint	Jacoby Yee/Kaycee Barber	present	present	present	
Kara Yates	-	present	present	present	
Kelsey Gellner	-	present	x	x	
Kristie Page	TBD	present	present	present	
Laura Licea	TBD	x	present	present	
Linda Burbank	-	present	present	present	
Lindsey Kirsch	-	present	present	present	
Lori Chudnofsky	Molly Aaseby	present	x	delegate present	
Mary Field	TBD	present	present	present	
Sam Forte	-	present	x	present	
Annika Hoogestraat	-	present	present	present	
Stefanie Chandos	-	x	x	x	
Katie Podobnik	-	present	present	x	
Te'onna Adams	-	present	present	present	
Therese Hill	-	present	present	present	
Guest(s): Jacob Yee					
Notetaker: Sarita Wall					

ITEM NO.	AGENDA TOPIC	DISCUSSION	COMMITTEE ACTION
I.	Approval of January 10, 2024, meeting minutes	<ul style="list-style-type: none"> Motion to approve January 10, 2024 meeting minutes 	1 st Therese Hill 2 nd Annika Hoogestraat
II.	Hospital Staffing Committee: No new updates	<ul style="list-style-type: none"> No updates 	Nothing further needed
III.	Workplace Violence: <ol style="list-style-type: none"> BST – definition Te’onna Adams ADO 02-11-24 regarding no hands on from security. Verbal and Harassing Language Task Force update. Environmental Assessment on ELT agenda update. Work on security coordinating with department leaders for scheduling active shooter drills. 	<p>Lead by Mary Field</p> <p>Behavioral Support Team (BST)</p> <ul style="list-style-type: none"> ASR is the umbrella program BST is a component under the ASR along with SW, Security, Patient and Family Experience, and CDHE <ul style="list-style-type: none"> BST are 1st line responders <ul style="list-style-type: none"> They can coach via phone, in-person (bedside) They may bring in additional resources <p>ADO Regarding BST Response</p> <ul style="list-style-type: none"> WSNA officers spoke to a specific ADO; inquiring if/when it is appropriate to go hands on <ul style="list-style-type: none"> In the presented example, BST responded via phone and did not come to the bedside. In result: <ul style="list-style-type: none"> Hux reset expectation with the BST team to come to the bedside when requested <ul style="list-style-type: none"> Additionally, SC leaders requested nurses to be clear and ask for BST to come in-person if needed SC leaders will create scripting or suggested phrases/words to indicate if bedside support is needed for BST use The group agreed that the improvement of the BST response process should be restorative and equitable, as it impacts staff/patient relationships <p>Question:</p> <ul style="list-style-type: none"> What to do in the interim if the BST team is unavailable? <ul style="list-style-type: none"> BST team has an internal process to escalate for help. In addition, there are other members of the ASR program 	<ul style="list-style-type: none"> Paulene and Mary to work with the ASR director to create an additional document for staff, and to create scripting for the BST team Mary to provide an update on the environmental assessment prior to the next NCC meeting via email (this is complete, email sent to Lindsey on 2/28) Mary to work with Melanie on improving the WPV minutes

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		<p>that can help in instances where there are multiple needs for BST happening concurrently</p> <ul style="list-style-type: none"> ○ There are additional resources listed after the ASR algorithm including contact phone numbers and staff can use the skills they learned in the Safe and Healthy Working Environment class <p>Verbal and Harassing Language Task Force</p> <ul style="list-style-type: none"> • A draft of the policy update was sent to task force members requesting feedback by end of day 2/22/24 <ul style="list-style-type: none"> ○ After final review, it will be added to PolicyStat • WPV committee is set to review updated patient facing signage and patient and family education handouts on 2/26 <p>Environmental Assessment on ELT Agenda</p> <ul style="list-style-type: none"> • This is on the 2/27 agenda <ul style="list-style-type: none"> ○ Mary to update Lindsey via email prior to the next NCC meeting <p>Active Shooter Drills</p> <ul style="list-style-type: none"> • This was discussed at the last WPV Task Force Committee meeting and was assigned to Jonathan Jones and Sue Anderson <ul style="list-style-type: none"> ○ A tiered implementation plan was requested <ul style="list-style-type: none"> ▪ This will prioritize patient facing departments first and then the non-patient facing departments ○ This is on WPV Task Force Committee agenda for update on 2/26 • WPV Task Force Committee meets monthly <ul style="list-style-type: none"> ○ Currently the meeting minutes roll up to the Employee Health and Safety Committee ○ Mary and Hux are creating a CHILD page for WPV, so the minutes can live there ○ WSNA officers requested more detailed minutes so that those that weren't able to attend will understand discussions, resolutions, and commitments 	

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		<ul style="list-style-type: none"> ▪ Mary to work with Melanie on improving the minutes ○ Mary is working with an analyst to create a real time dashboard for the WPV Task Force. <p>Security Documentation</p> <ul style="list-style-type: none"> • Security does not document in EPIC. They do their documentation in a different system. • The WPV Task Force Committee discussed how to bring visibility because security does not document in EPIC • WSNA officers expressed how difficult it could be for frontline staff to track what work has been done (by security) unless an actual partnership plan or BRAP is in place 	
IV.	<p>People Operations Matters:</p> <ol style="list-style-type: none"> 1. Collaboration with SCH/WSNA for state support. 2. GCO – timing and length of time for WSNA presentation. 3. Job accommodations – North Clinic and gender affirming care. 	<p>Lead by Paulene Toussaint</p> <p>SC and State Collaboration</p> <ul style="list-style-type: none"> • Paulene to meet with Kashika Arora for planning and will report back to the group at either the April or May NCC meeting <p>General Clinical Orientation (GCO) – lead by NPD</p> <ul style="list-style-type: none"> • The team discussed how to work together to gain more time to present, answer questions, and interact with new members (day 2 orientation presentation) <ul style="list-style-type: none"> ○ Currently, there is only 20 minutes allotted ○ WSNA is requesting 45 minutes and preferably at the end of the day • Paulene will reach out to Melissa Liu and Deb Ridling to discuss options <p>North Clinic Job Accommodations (JD) – Gender Clinic Affirming Care</p> <ul style="list-style-type: none"> • WSNA officers received feedback that some NURSEs were given accommodations to decline giving adolescent injections 	<ul style="list-style-type: none"> • Paulene to provide an update on SC/WSNA collaboration for state support (MH) • Paulene to reach out to NPD leadership to discuss options for GCO presentations

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		<ul style="list-style-type: none"> • WSNA officers are requesting expectations to be set in job descriptions (JD) to give incoming staff visibility before applying for relevant roles <ul style="list-style-type: none"> ○ Current JDs does not speak to this specifically • Paulene advised that religious accommodations are by law, and there are requirements SC must follow when someone requests an accommodation <ul style="list-style-type: none"> ○ Paulene stated on behalf of the org. that “gender affirming care is healthcare, and that is the position what we’re taking wholeheartedly. Patient and family care is our priority” ○ SC leadership is trying to balance accommodation requests without discriminating/ostracizing any specific populations ○ SC leadership requests WSNA officers to encourage staff to go through accommodations process if they are refusing to do certain tasks due to personal beliefs • Paulene will update the team as much as possible while maintaining the privacy of those involved <ul style="list-style-type: none"> ○ The updates will be standardized due to this not being specific to North Clinic and more of a broader issue 	
V.	<p>WSNA Questions:</p> <ol style="list-style-type: none"> 1. Magnet celebration 2. Ambulatory residency and OT issues if not resolved at February 14, meeting prior to NCC. 3. Immigration issues – What type of sponsorships by SCH and not. 4. Bellevue Surgery Center – Why the decrease in surgeries/procedures and increase in mandatory no pays? 5. OR light fixture failure injury and RNs fear 	<p>Lead by Lindsey Kirsch</p> <p>Magnet Recognition Celebration Feedback</p> <ul style="list-style-type: none"> • WSNA officers received the below feedback from some nurses that expressed their discontent that there wasn’t a celebration that they could be involved in after receiving Magnet designation <ul style="list-style-type: none"> ○ Leaders celebrated without the nurses ○ Communication was late and there were no thank you from supervisors • Mary to share feedback with Bonnie • SC leadership is in the planning stages for nurses in celebration of Magnet designation. They weren’t expecting to meet with Magnet until March • WSNA officers requested more transparency and communication to avoid this type of issue in the future 	<ul style="list-style-type: none"> • Mary to provide Magnet feedback to Bonnie • Paulene to provide an update about immigration after meeting with Mari • Bonnie to provide an update after working with Laura on Bellevue IR

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	<p>retaliation for using sick time.</p> <p>6. B Braun pumps – Need for continued super users.</p> <p>7. Incentives – Plans for continuing after this schedule?</p>	<p>Ambulatory Residency</p> <ul style="list-style-type: none"> • Danica submitted the residency proposal <ul style="list-style-type: none"> ○ Danica followed up with Linda for clarifying information ○ Linda will respond prior to further conversation • Overtime <ul style="list-style-type: none"> ○ All audits were complete (including manual audits) ○ Encourage staff to reach out if they are still having issues <p>Immigration Issues</p> <ul style="list-style-type: none"> • Paulene is working with Mari Fujino on the immigration process and SC sponsorships <ul style="list-style-type: none"> ○ Paulene will provide an update after meeting with Mari <p>Bellevue Surgery Center: Radiology/IR Issues</p> <ul style="list-style-type: none"> • WSNA officers requested clarity as to why Main Campus radiology recovery nurses are traveling to Bellevue to recover IR patients (mandatory) <ul style="list-style-type: none"> ○ Radiology FTE was acquired, then business did not expand as expected. FTE was given to PACU to help the ROI against the FTE with the understanding that the tasks in Radiology would still be accomplished. This is where it has lived for ~10 years <ul style="list-style-type: none"> ▪ There are no IR patients treated in Bellevue. The Radiology Recovery nurses work in Bellevue on a voluntary basis. The only Radiology Recovery RNs required to travel to Bellevue are new hires for the Forest B expansion. Multi-campus floating was included in their job description. ○ What changed? <ul style="list-style-type: none"> ▪ In August 2023 Radiology leadership approached BSC leadership about staffing their own admission/induction and awake IV's and the Bellevue PACU would continue to recover their patients 	<p>recovery practices</p> <ul style="list-style-type: none"> • Kara to provide sick time retaliation examples to Paulene • Paulene to research sick time usage retaliation and work on a resolution • Molly to follow up with NPD to see if there will be continued use of BBraun pump super users • Paulene to follow up with Chris Patin on the status and respond to Linda via email

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		<ul style="list-style-type: none"> ▪ Radiology was approached by Corrie Casey and Laura Licea to remove the tasks from the PACU RN’s responsibility. This was a lengthy conversation that volleyed on where the FTE should sit. At the time of the conversation Radiology was onboarding staff for the future MRI scanner go live – that timeline was pushed back, so Jay had extra staff that we thought we could rotate to Bellevue to support the required timeline that was given to Radiology to have the tasks removed (Feb 5th, 2024) ▪ It is planned to increase the FTE for Bellevue in the FY25 budget to support a full time RN instead of rotation as the MRI scanner will be up and running by 10/24 ▪ Radiology RN will be helping with induction and monitoring the patient during exam. The patient will move to PACU following the exam and hand off occurs. Bellevue’s PACU is only involved with the recovery of the Radiology patients ○ Why are Main Campus recovery RNs being required to travel? Why aren’t Bellevue recovery RNs doing the work instead of Main Campus recovery RNs? <ul style="list-style-type: none"> ▪ The RNs are not REQUIRED to travel. We accepted volunteers from the Radiology RN pool group to support the business. The RNs who “opted in” are scheduled in both the Bellevue location and main campus. The days that they are on shift in Bellevue are rotated fairly/consistently between the small group. In addition, each Main Campus Radiology nurse received a basic orientation to Bellevue’s campus and a workflow was created to align with how Bellevue operates and to incorporate Main Campus best practices. Each RN received their orientation at least 1 month prior to go-live with a balanced shift rotation after go-live to increase their level of comfort 	

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		<ul style="list-style-type: none"> ▪ The number of volunteers expand over the last few weeks as the team has communicated the change has been positive. (more positive than the original ASSUMPTION). A number of nurses have expressed interest in being scheduled in Bellevue for a majority of their shifts. However, managers make sure that all volunteers get a chance to rotate there in order to maintain competency. There has been a lot of positive feedback from the anesthesia team by having the Main Campus RNs work in Bellevue ▪ Milage is paid for those RNs that travel from 1 location to the next if “called back” to the main campus due to volumes. If no patients are scheduled then RN begins day in main department ○ Laura will research and has requested examples to examine. Bonnie to provide an update <p>OR Light Fixture Failure</p> <ul style="list-style-type: none"> • WSNA officers received feedback that there was fears of retaliation for sick leave usage amongst the nurses <ul style="list-style-type: none"> ○ The nurse that was injured had to go to ER for evaluation of injuries <ul style="list-style-type: none"> ▪ The nurse was told the evaluation was to protect the institution ▪ The nurse was offered time off but came to work the next day in fear of retaliation ○ Paulene will look into examples of sick time retaliation <ul style="list-style-type: none"> ▪ Kara pointed out that some nurse leaders are putting language about sick leave in annual evaluations <ul style="list-style-type: none"> • Kara will provide anonymous examples to Paulene ○ Things to keep in mind: <ul style="list-style-type: none"> ▪ Sick time is protected and should not be used negatively against staff ▪ Sick time is not capped 	

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		<ul style="list-style-type: none"> <ul style="list-style-type: none"> <ul style="list-style-type: none"> ▪ Negative sick time usage is assessed on a case-by-case basis and assessed equitably ○ WSNA officers requested coaching leaders on CBA language that speaks to evaluating nurses based on sick time usage ○ Laura will follow up with front line leaders to ensure they avoid disciplinary actions (including during the evaluation process) for using earned protected time • WSNA officers asked about communications to staff updating them on repair plans <ul style="list-style-type: none"> ○ Facilities is investigating the cause of the light fixture failure <ul style="list-style-type: none"> ▪ The assessment on Forest has been complete ▪ Currently assessing Mountain ○ Gary Walker will send a follow-up email to give more updates <p>BBraun Pumps Super Users</p> <ul style="list-style-type: none"> • Is there still a need for super users? <ul style="list-style-type: none"> ○ Molly to follow up with NPD to see if there will be continued use of super users <ul style="list-style-type: none"> ▪ It is monitored weekly? ▪ There are some units still using superusers, including: <ul style="list-style-type: none"> • ICUs • CBDC ○ Leaders have been rounding and working with BBraun on four issues, but overall, there are less concerns on inpatient units ○ Messaging has gone out to ICU leaders about incentivizing extra shifts for patient care and super users <p>Incentive Plans</p> <ul style="list-style-type: none"> • Kristie, Annika, and Kara met on 2/7 to discuss incentive and decided to continue through 3/17 (had initially been approved 	

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		<p>through 2/18 – partially to further accommodate BBraun implementation</p> <ul style="list-style-type: none"> ○ There’s still ongoing discussions regarding what, if any areas, may have a need • Kristie will work with departments to make a final decision • Once there is a plan, Kristie will update WSNA and communicate out to nurses • WSNA officers requested to have call available if incentives are going away <p>PBMU (new)</p> <ul style="list-style-type: none"> • Linda asked about the status having permanent security in the PBMU <ul style="list-style-type: none"> ○ Paulene to follow up with Chris Patin on the status and respond to Linda via email 	

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

Next Meeting: April 3rd, 2024, Virtual Meeting

Committee Action Items – Rolling Queue

Topic	Assigned To:	Status
<p>Follow up from letter to Bonnie:</p> <ul style="list-style-type: none"> • Present CLABSI 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 	Bonnie Fryzlewicz	In progress
	Linda Burbank	In progress
	Bonnie Fryzlewicz	In progress
	Paulene Toussaint	In progress

Workplace Violence/ASR

- 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 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.
- Communicate PBMU Task Force roster
- Take badge alert system to the SWE committee for discussion.
- Consider different communication pathway regarding WPV to WSNA nurses.
- Work with WSNA to create a cheat sheet draft for staff, and to create scripting for the BST team
- Speak to Hux about adding the BST topic to the next WPV committee agenda
- Provide update on the environmental assessment prior to the next NCC meeting via email
- Work with Melanie on improving the minutes

SCH Nurse Leaders

In Progress

Bonnie Fryzlewicz

In Progress

Paulene Toussaint

In Progress

Paulene Toussaint

In Progress

Mary Field

In Progress

Sam Forte

In Progress

Paulene Toussaint
Mary Field

In Progress

Mary Field

In Progress

Bonnie Fryzlewicz

In Progress

Mary Field

In Progress

PBMU Follow up:

- Paulene to gather PBMU/security historical data and invite security leadership to an upcoming NCC meeting to discuss what the work will look like and hear the needs of the PBMU staff in the spirit of collaboration.
- Paulene to email Linda a list of the retention team members.
- Paulene to send responses to PBMU questions via email.
- Henry and Josh to update their teams on the discussed updates during today's meeting.
- Paulene to send the model of care update to WSNA via email.
- SC leadership to add Josh, Henry, Shadi, and Adam to the new security roles planning meetings.
- Bonnie to confirm OT changes and send out communication via email to nurses by end of day today.
- PBMU nurses, Kristie, and Maureen to meet offline regarding incentives.
- Bonnie to pass this to ED leadership PBMU. mentioned willingness to help the ED mental health team.
- Follow up with Chris Patin on the status and respond to Linda via email.

Paulene Toussaint	In Progress
Paulene Toussaint	In Progress
Paulene Toussaint	In Progress
Henry Jones Joshua Pickett	Complete
Paulene Toussaint	In Progress
SC leadership	In Progress
Bonnie Fryzlewicz	In Progress
PBMU nurses Maureen O'Brien Kristie Page	In Progress
Bonnie Fryzlewicz	In Progress
Paulene Toussaint	In Progress

Cost/benefit of metal detectors/wands/dog, etc.	Bonnie Fryzlewicz will inform Lindsey Kirsch and Linda Burbank when the environmental assessment will be on the ELT agenda (including agenda items) via email	In Progress
ADOs filing and participation	Lindsay Kirsch to remind nurses to be collaborative with leaders for ADO follow-up	Complete
Collaboration with SCH/WSNA for state support	Paulene to provide an update on SC/WSNA collaboration for state support (MH)	Ongoing
Retention/recruitment efforts	Paulene Toussaint to invite Ian Johnson to the next NCC meetings on a quarterly basis to discuss recruitment data	In Progress
GCO: Ideas on how to collaborate on timing of presentation and amount of time to present	Paulene to reach out to NPD leadership to discuss options for GCO presentation	In Progress
New Items		
Magnet Recognition Celebration Feedback	Mary to provide Magnet feedback to Bonnie	In Progress
Immigration Issues	Paulene to provide an update about immigration after meeting with Mari	In Progress
Bellevue Surgery Center: Radiology/IR Issues	Bonnie to provide an update after working	In Progress

	with Laura on Bellevue IR recovery practices	
OR Light Fixture Failure	Kara to provide sick time retaliation examples to Paulene Paulene to research sick time usage retaliation and work on a resolution	In Progress
BBraun Pumps Super Users	Molly to follow up with NPD to see if there will be continued use of B Braun pump super users	Complete. BBraun super users continued in ICUs through 2/26. We are no longer using super users on any of the units.

Topic	Frequency	Next Agenda this would be on
Expense reimbursement	Twice per year	July 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 2x/year) ● Any denials of leave requests (and the nature of the denials) 	Twice per year	July 2024
WSNA Roster	Quarterly	April 2024