DOCTOR OF NURSING PRACTICE

2020 ADVANCED SCHOLARLY PROJECTS

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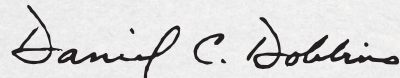
A Message from The President

Dear DNP Graduates:

It is my honor to congratulate you on successfully completing our Doctor of Nursing Practice program. Your dedication and hard work has put you in a position to be a leader in the healthcare field. Your scholarly efforts have been most impressive, and you have earned the respect and admiration of your faculty, fellow students, and professional colleagues.

At this very special time, I extend to you my heartiest congratulations and wish you well as you pursue your chosen careers. Now is one of those times in history that our society is in critical need of strong and visionary leadership from our health care professionals. The work you do is critical for a healthy community and I know you are well prepared to assume roles of significant leadership.

On behalf of the entire McKendree University community, I salute you on a job well done and congratulate you for this singular achievement, and I thank you for your efforts that serve us all.
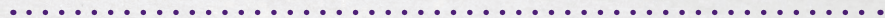
Sincerely,

Daniel C. Dobbins

Daniel C. Dobbins
President

A Message from The Provost

Congratulations, Doctor of Nursing Practice graduates! I am proud of you for completing the DNP program at McKendree University during a particularly challenging time in healthcare. I admire your diligent work and commitment to achieving the highest level of learning in your field. It is a pleasure to showcase your Advanced Scholarly Projects in this publication.

Your projects have undoubtedly had a direct impact on healthcare services in your communities. As you graduate with your doctoral degree, I hope that you will take pride in having "made your mark" at McKendree University and beyond. Best wishes for continued success as nurse leaders!

Christine M. Bahr, Ph.D.
Provost

A Message from The Program Director

I want to extend my heartfelt congratulations for your successful completion of your Doctor of Nursing Practice in Ethical Leadership! You have done an outstanding job in the program, and I am proud of your accomplishments. Throughout the DNP program, you capitalized on your strengths and harnessed those strengths to promote your ethical leadership practice.

It has been an unprecedented time in healthcare. Despite the tremendous challenges experienced in healthcare, you have all persevered and continued to successfully reach your goal. Your leadership skills set the example for others in our profession. The DNP nursing faculty are proud of your accomplishments, and along with you, celebrate your success.

I wish you all the best in your future nursing leadership practice. Thank you for choosing McKendree University for your DNP in Ethical Leadership! May each of you continue to ethically lead the future of nursing within your practices!

Dr. Richelle Rennegarbe
Nursing Division Chair
DNP Program Director

2020 DNP Cohort Titles for Advanced Scholarly Projects

Paving the Way to Quality Care: Improving Sepsis Care in Illinois Critical Access Hospitals

Erica Blumenstock

D.N.P., MSN, R.N., CPPS
Ethical Leadership

Project Chair
Dr. Richelle Rennegarbe

Purpose

Sepsis continues to negatively impact morbidity and mortality of hospitalized patients. The purpose of this project is to improve patient outcomes in Illinois Critical Access Hospital Network (ICAHN) hospitals. In order to improve patient outcomes, education and assistance will be provided to hospitals on improving sepsis care in order to improve patient outcomes by the development of a sepsis care tool-kit.

Methodology

The goal of the project was to improve sepsis care within ICAHN hospitals. A modified gap analysis survey was sent via email to the ICAHN participants. After the survey analysis was completed, a sepsis care tool-kit was developed. This tool-kit included current evidence-based practice guidelines, state and federal policy and reporting requirements, and information regarding the The Joint Commission (TJC) sepsis certification. After the tool-kit development, a live presentation was offered to members of the ICAHN Quality and Infection Control peer group. The peer group was composed of Quality and Infection Control staff from participating ICAHN facilities. The effectiveness of the presentation and tool-kit was evaluated via a survey. Participants of the live face-to-face presentation were provided with a written survey that included the project debriefing, and consent. Consent was obtained by tacit approval by voluntary participation in the presentation and completion of the post-presentation survey. The post-presentation survey was reviewed to identify progress toward the project outcomes.

Results

The modified gap analysis survey had a completion rate of 22%. The gap analysis identified that participants were experienced in healthcare, but 65% of participants had only worked in their current position less than five years. This identified a need to provide an toolkit to help participants gain the necessary knowledge of sepsis guidelines. The gap analysis provided information on specific areas of the existing guidelines that needed information to bridge the knowledge gap. A post-presentation survey was conducted upon conclusion of the presentation with an 87% survey return rate. One hundred percent of survey participants strongly agreed (82%) or agreed (18%) the presentation was appropriate to the purpose and objectives. The participants were asked to evaluate the tool-kit format, 74% of participants strongly agreed and 26% agreed the tool-kit format was easy to understand. The participants were asked to evaluate the tool-kit's ability to increase knowledge of current sepsis bundle guidelines, 74% strongly agreed, 22% agreed, and 4% were neutral on the ability of the tool-kit to improve knowledge of bundle guidelines. Participants were asked to evaluate the likelihood the content presented would be used to update existing sepsis policy, 48% strongly agreed, 44% agreed, and 7% were neutral when asked if the information would be used to update existing sepsis policy.

Implications for Practice

The project outcomes demonstrated barriers exist within critical access hospitals in implementation of evidence-based practice guidelines and further work is needed to provide these organizations with tools to improve sepsis care. The use of an electronic tool-kit was found to be an effective method of providing information and resources to ICAHN organizations. The existing electronic tool-kit can be used as a framework to provide information regarding future healthcare initiatives.

Improving Admission Assessment of Individuals with Autism Spectrum Disorders

Purpose

The purpose of the project was to identify a current knowledge gap regarding Autism Spectrum Disorder (ASD) and determine if an educational module would improve the knowledge gap of registered nurses (RNs) on a Medical/Surgical (Med/Surg) floor at Southern Illinois Healthcare (SIH) Memorial Hospital of Carbondale (MHC) regarding the unique needs of the ASD individual based on the admission assessment.

Methodology

A quality improvement design was used to determine if currently employed Med/Surg RNs at SIH's MHC had a knowledge gap regarding the unique needs of ASD individuals that should be assessed during the admission process. Data was gathered on current knowledge using the KCAHW (Knowledge about Childhood Autism among Heath Workers) as a pre-test survey. Following the pre-test, participants completed an educational module designed to improve knowledge on the unique needs of the ASD individuals, including communication, social, behavioral, self-comfort, and dietary needs. Participants then completed the KCAHW post-test to determine if knowledge improved. Participants also completed a debriefing survey that contained non-identifying demographics, as well as both quantitative and qualitative feedback in the form of a Likert scale and comment sections. The debriefing survey provided feedback on the nurses' reflections regarding the educational module and how the module would impact or improve care of ASD individuals.

Results

The KCAHW pre-test demonstrated a knowledge deficit of the current RNs as 70.7% of the nurses were unable to achieve a 100% on the KCAHW pre-test. Using the KCAHW post-test, 100% of the RNs were able to achieve a 100% indicating an improvement in knowledge; however this cannot be attributed to the provided educational module. Results from the debriefing survey demonstrated 100% of the RNs either Strongly Agreed or Agreed that the educational module increased their knowledge on the unique communication, comfort needs of ASD individuals. Results demonstrated 97.5% of the RNs either Strongly Agreed or Agreed that the educational module increased their knowledge on the unique social, behavioral, and dietary needs of ASD individuals. Results also demonstrated 97.3% of the RNs either Strongly Agreed or Agreed that the educational module would encourage them to ask specific questions regarding the ASD individuals' unique needs during the admission assessment. Finally, 94.9% of the RNs either Strongly Agreed or Agreed that the educational module would improve their admission assessment of individuals with ASD.

Implications for Practice

Data demonstrated a current knowledge gap regarding the unique needs of ASD individuals by the RNs at SIH's MHC Med/Surg floor. Education of RNs regarding the ASD individuals' unique needs that should be assessed during admission is a key element in improving the current knowledge gap, as well as improving patient outcomes. Once education has occurred, RNs can begin to incorporate improved assessment techniques of ASD individuals into daily practice.

Heather Hampson

D.N.P., MSN, R.N., CPPS
Ethical Leadership

Project Chair
Dr. Richelle Rennegarbe

Carey Gerber

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D.N.P., MSN, R.N., CPPS
Ethical Leadership

Project Chair
Dr. Janice Albers

Modification of the Hospital Environment to Promote Patient Sleep

Purpose

The purpose of the project was to determine if evidence-based sleep-promoting interventions and environmental modifications among inpatient medical surgical patients had an affect on patient reported sleep quality.

Methodology

A quasi-experimental design was used to determine patient care staff beliefs and attitudes regarding patient sleep before and after an educational presentation on evidence-based sleep interventions and effective practice changes to promote sleep. Data regarding staff beliefs and attitudes was gathered using a survey developed by the principle investigator in conjunction with content experts. Patient participation consisted of a control group and an intervention group. The intervention participants were given choices of sleep preferences to aide them in achieving restorative sleep. Choices included having the door closed, adjusting the thermostat, wearing their own pajamas, having the blinds closed, extra blankets, ear buds for white noise or music, an eye mask, ear plugs, and socks. Practice and environmental changes aimed at improving sleep were implemented on the intervention hallway. Practice changes included not having conversations near patient rooms, clustering care, offering bathroom opportunities prior to sleep, pain medication as needed, limiting overhead pages, and turning down lights at night. Patient participants in both the control and intervention groups completed the Richards Campbell Sleep Questionnaire following a night of sleep.

Results

Staff data revealed agreement that sleep is important for patient healing and noise levels on the unit decreased throughout implementation. An increase in interdisciplinary cooperation and awareness of white noise availability was identified. A decrease in satisfaction regarding the patient sleep environment by staff from 53.9% pre-implementation to 10% post-implementation demonstrated an elevated awareness of the need for sleep environment changes. All patients receiving interventions reported a good night's sleep and a quiet sleep environment. Seventy-five percent of patients on the intervention hallway were awake very little compared to 42.9% of control group participants. Seventy-five percent of patients receiving interventions fell asleep almost immediately compared to 64.3% of participants in the control group. Patients in the intervention hallway went back to sleep quicker than control group participants as well (75% and 35.7% respectively).

Implications for Practice

Education regarding the importance of patient sleep is crucial for change. Simple practice and environmental changes are effective for improving patient sleep in the hospital setting. Improved patient sleep leads to better health outcomes. This project represents the start of a change that will result in patients receiving the quantity and quality of sleep they both need and deserve.

Online Career Pathways, Job Satisfaction, and Retention

Purpose

The purpose of the project was to evaluate, in the context of a multigenerational registered nurse workforce in an acute care hospital, if an evidence-based mentoring intervention in conjunction with the use of online career pathways impacted job satisfaction and retention compared to nurses who had access to the online career pathways alone.

Methodology

A longitudinal mixed method study design was implemented for this pilot mentoring project. Convenience sampling was used. This project consisted of four components. The pre- and post-survey, both, utilized the McCloskey/Mueller Satisfaction Scale (MMSS), the Job Satisfaction Survey (JSS), and demographics. Additionally, utilizing the theories of Bernard Bass, Jean Watson, and Abraham Maslow there was the creation and implementation of an authentic and therapeutic evidence-based mentoring session. Mentees volunteered to participate in these individual mentoring sessions and were interviewed for insights into the benefit of mentoring in conjunction with the online career pathway.

Results

Feedback received from the three mentees regarding the mentoring was positive and each verbalized gratitude for the valuable benefit of the mentoring. Key elements identified for future mentoring included; a list of scheduled tasks, institutions offering training for career expansion, and current role development ideas. Discussing the career map, mentee one 'love[d] the idea of the map' and mentee two thought the map was 'incomplete.' Mentoring exhibited minimal effect on the pre- and post- survey job satisfaction results. Question 18 from the MMSS was missing in the post-survey impacting the results. Using SPSS 25, there was no significant difference in pre- and post-survey demographics. Due to a low number of

respondents in the > 42 age groups, only the Gen Z and Millennials were included in generational analysis. Comparing these generations, the Mann-Whitney U test revealed Gen Z respondents were more satisfied with the 'flexibility in scheduling your weekends off' than Millennials, with a p-value of 0.041. Comparing all participants, three factors illustrated the pre-survey participants were statistically more satisfied than the post-survey participants through the Mann-Whitney U test. First, 'there is really too little chance for promotion on my job' with a p-value of 0.012, second 'people get ahead as fast here as they do in other places', with a p-value of 0.029, and third 'the benefit package we have is equitable', demonstrated a p-value of 0.049. The Chi-Square test established statistical significance between Gen Z (n= 13) who responded moderately satisfied and Millennials (n= 9) who replied very satisfied with a p-value of 0.049 regarding 'hours that you work.'

Implications for Practice

Overall, a significant number of new nurses leave practice within their first year, negatively impacting organizational finances and patient care. Mentoring greatly influences a nurse's confidence and commitment to the organization. Generational differences of the nursing workforce create added hurdles to recruitment and retention. Based on preliminary qualitative findings, evidence-based mentoring in conjunction with career pathways warrants further examination and mentoring can be effective when interacting with colleagues of all generations and may improve job satisfaction and retention.

Christopher M. Kavaliunas

B.B.A., D.N.P., MSN, R.N., NE-BC
Ethical Leadership

Project Chair
Dr. Janice Albers

The Effects of Rapid Improvement Events in the Emergency Department on Employee Satisfaction

Erin McGuire

D.N.P., MSN, R.N.
Ethical Leadership

Project Chair
Dr. Richelle Rennegarbe

Purpose

The purpose of this project is to implement rapid improvement events (RIEs) in the emergency department setting and determine the effects on employee satisfaction. Employees in the emergency department setting often experience frustrations in the daily operations of patient care. RIEs are formalized activities utilized by organizations to achieve rapid and dramatic improvements that are capable of progressively shifting the culture. The key concept is continuous improvement, or taking the process apart and putting it together in a better way. RIEs are meant to empower and unleash creative power of people actually involved in the work, in an attempt to design a more effective and efficient process. This project sought to improve employee satisfaction post-implementation of RIEs.

Methodology

Prior to implementation of the RIE, staff was educated on the process and the necessity of the DNP project. Education was provided via voiceover presentation and distributed electronically to each ED staff member. Employee satisfaction was evaluated utilizing the Wellness Council of America Job Satisfaction Survey. This survey included 30 questions pertaining to job satisfaction, and four demographic questions. The participants answered questions with a response of "yes" or "no". The staff received the survey pre- and post-implementation of the RIE. The RIE was conducted over a period of four days by the project coordinator and the ED director.

Results

Upon reviewing the data, there were several factors to consider post-implementation of the project. Because there were approximately 50% less respondents, the data may not have accurately depicted the overall satisfaction levels of the department. The questions that illustrated the greatest decreases in satisfaction were questions four and 20; both demonstrated a 50 percent decrease in "yes" responses. Question four asked if the respondent had energy at the end of each workday to engage in personal interests. Question 20 asked if creativity and innovation were supported. During the RIE, nurses were the only individuals present. Because the majority of the respondents in the post-survey were non-nurses, this may account for the decrease in the "yes" responses. Three questions demonstrated a 30 percent decrease in "yes" responses. These questions were: values fit with the organizational values; individuals aligned with the organizational mission; and manager reviewing progress. The overall findings of this project did not demonstrate evidence of increased satisfaction among the individuals who participated in the survey. It was recommended to appoint champions and increase education efforts on RIEs if the organization is to continue this project.

Implications for Practice

The short-term benefits of RIEs include improving quality of patient care by reducing time and costs associated with wasteful processes. The success of the project begins with staff buy-in. Researchers have determined that education alone is unlikely to illicit change in clinical behavior. Effective interventions to foster change include: systems reminders, change champions, audit and feedback performance measures, and multi-faceted education interventions. The organization should explore additional methods of education regarding RIEs to secure buy-in prior to implementation.

Long-term benefits of RIEs include improved employee satisfaction and empowering staff to identify and solve problems within the department. In order to successfully achieve the long-term benefits, RIEs must be maintained as a routine process within the ED. The administrative staff, particularly the Chief Executive Officer, expressed a desire to expand and continue training on RIEs to all nursing units within the hospital. RIE expansion includes all nursing units, as well as support staff and individuals involved in direct patient care. Further expansion will include ancillary departments, such as radiology, laboratory, and therapy services.

Improving Engagement and Collaboration among Nursing Residents through Escape Room Utilization

Purpose

The purpose of this project was to develop a curriculum change for the nurse residency at Southern Illinois Healthcare (SIH) to promote learning engagement for the nurse residents, specifically impacting the millennial generation, through an innovative escape room exercise. New graduate nurses need to provide safe, quality care to diverse patient populations in a consistently changing health care system. Research has shown that millennial nurses struggle to stay engaged based on how they interact, learn, and communicate. The literature demonstrates challenges surrounding engagement of the millennial generation as compared to other generations of new nursing graduates. Gamification and escape room activities are gaining popularity as an innovative method to provide an engaging learning opportunity in healthcare.

Methodology

A select group of SIH critical care nurse residents participated in an inaugural escape room exercise consisting of events that unfolded from clues and events in a simulated patient environment. The project gathered data from the escape room implementation by incorporating a Pretest/Posttest Questionnaire, an Engagement Survey to identify drivers of workforce engagement including cognitive, emotional, and physical attributes, as well as, an Escape Room Satisfaction Survey to examine engagement within millennial, critical care residents.

Results

The project results revealed the residents improved in posttest scores on the Pretest/Posttest Questionnaire resulting in a positive outcome after the escape room intervention was implemented. The Engagement Survey was used to measure on total levels of engagement (cognitive, emotional, and physical) and revealed 84% of participants were engaged upon completing the escape room activity supporting engagement among participants. The Escape Room Debriefing Survey was overwhelmingly positive, with many responses supporting future escape room activities within the residency curriculum.

Implications for Practice

This project serves as a curricular model for Nurse Professional Development departments and various other healthcare organizations examining integration of an innovative escape room activity to train staff to promote engagement. Implementation of the escape room activity demonstrated an increase in millennial engagement that could be linked to better patient outcomes, job satisfaction, team-building, and organizational retention. Healthcare educators need to adapt and change methods of content delivery to changing resident populations. Millennials respond to active learning strategies that require higher-level thinking, gaming with technology, and team dynamics as supported by generational findings. As leaders in healthcare, it is duty of nurse leaders to effectively integrate evidence-based programming to promote engagement to improve learning for the future nursing workforce.

Kristin Leann Yosanovich

D.N.P., MSN, R.N., CPPS
Ethical Leadership

Project Chair
Dr. Janice Albers

Faculty and Program Directors

Janice Albers, D.N.P., R.N., PHNA-BC, EBP-BC, CLC — Assistant Professor of Nursing, MSN Program Director

Kari Hart, D.N.P., R.N., CENP — Assistant Professor of Nursing

Richelle Rennegarbe, Ph.D., R.N., CENP — Professor of Nursing, Division Chair, DNP Program Director

Helene Seibert, Ph.D., R.N. — Assistant Professor of Nursing

Janice Wiegmann, Ph.D., R.N. — Professor of Nursing