A newsletter from the office of the Executive Chief Nursing Officer

**Marilyn Dubree, MSN, RN, NE-BC**

**IN THIS ISSUE**
- Spotlight on Nursing Staff Bylaws Retreat
- Obstetrics, Newborn Nursery to get couplet care

**SHARED GOVERNANCE SHINES AT RETREAT**

More than 150 nurses at Vanderbilt University Medical Center gathered at the Student Life Center on July 18 for the Nursing Staff Bylaws Delegate Retreat.

The delegates are charged with communicating proposed bylaws amendments with their nursing colleagues and representing them during the biennial Nursing Staff Bylaws Convention on Nov. 14. They will share information gathered in the retreat with their departments and/or groups to determine how they will vote in November.

“This is an important day for us,” said Executive Chief Nursing Officer Marilyn Dubree, MSN, RN, NE-BC. “Our bylaws and our Shared Governance system and philosophy contribute to what I believe make Vanderbilt Nursing so incredibly special.”

During the half-day retreat, the group learned about the history and structure of the Nursing Staff Bylaws as well as the process for submitting and reviewing amendments.

“It’s a privilege for us to have Nursing-specific Bylaws that empower every member of our nursing staff to be involved in decision making and to be supported in their practice,” said Erin Tickle, continued on page 2

Our Shared Governance process takes center stage in this issue. Last month, we gathered for the Nursing Staff Bylaws Delegate Retreat, an event that is very dear to me. It is part of the biennial process to revisit and determine our staff bylaws.

This is not a “top-down” process, but rather a “bottom-up” method. Staff nurses from throughout the Medical Center in different specialties gather together to determine the bylaws that will continue to govern us. It is an empowering moment that goes to the very core of our values of giving every nurse a voice.

Also in this issue you will read about the transition to couplet care in our Obstetrics and Newborn Nursery areas. We are evolving to represent the best evidence-based practices in caring for mothers and babies in their first hours of life. It continues to be a very exciting time to be a Vanderbilt Nurse!

Enjoy this issue,
MMHC, BSN, RN, Director of Shared Governance.

Most of the agenda was dedicated to reviewing two kinds of amendments: 1) editorial amendments, which are typically updates to terminology and titles without changing meaning, and 2) substantive amendments, in which the changes are made to the meaning or function of a given bylaw.

The delegates considered 10 editorial amendments and four substantive amendments to be brought to the Bylaws Convention in November.

The delegates at the retreat are a part of history. VUMC has had nursing bylaws since 1980 and has recently held conventions during even-numbered years.

In fact, Vanderbilt was among the first medical facilities in the country to have bylaws.

Adrienne Ames, who was Associate Director of Nursing in 1980, remembers what it was like. Ames spearheaded the creation of the bylaws with Associate Director Frances Carson under the leadership of Director of Nursing Rosamund Gabrielson.

Ames noticed that physicians had bylaws and determined that nurses should have them as well. She worked with nursing leadership and every unit throughout the hospital to make it possible. “It needed to be at the unit level, not just at the top,” she said. “It needed to start at the units where the patient care was happening.”

She described creating the bylaws as a two-year process in a paper co-published with Carson in the American Journal of Nursing in 1980.

“Our objectives in developing nursing staff bylaws at Vanderbilt University Hospital centered on two key areas: patient care and nursing conduct,” the authors wrote. One objective was to ensure patients received the best care and to provide a vehicle for orderly change to improve care.

The other objective was to establish mechanisms to ensure excellent professional conduct, self-governance and shared decision making.

The document that Ames helped create in 1980 still stands today, though it is constantly revisited to keep up with the times.

“I’m excited to see how staff leaders are building and strengthening shared governance at Vanderbilt,” she said. “It’s very gratifying that I was part of that.”
“This is a really important day for us. Our bylaws and our shared governance system and philosophy contribute to what I believe make Vanderbilt Nursing so incredibly special.” — Marilyn Dubree, MSN, RN, NE-BC, Executive Chief Nursing Officer, Vanderbilt University Medical Center

“What a big day, an important day this is. You now have the responsibility of the legacy for carrying these bylaws on. Your fingerprint will be on these bylaws forever. Thank you for your participation today and in the years to come.” — Robin Steaban, MSN, RN, NEA-BC, Chief Nursing Officer for Vanderbilt University Adult Hospital and Clinics

“This is a document that will always be there. It is our legacy and we have a responsibility to keep it whole and true.” — Kathie Krause, MSN, RN, NNP-BC, NEA-BC, Chief Nursing Officer for Monroe Carell Jr. Children’s Hospital at Vanderbilt

“Whenever somebody comes in from another organization and they follow me around, they are always impressed with our Shared Governance Structure. I’ve even had people say, ‘Oh my gosh, that’s what I learned in school.’ And that’s what we do. I am so proud of that.” — Laura Webb, MSN, RN-BC, Interim Chief Nursing Officer, Vanderbilt Psychiatric Hospital

“It’s a privilege for us to have Nursing-specific Bylaws that empower every member of our nursing staff to be involved in decision making and to be supported in their practice.” — Erin Tickle, MMHC, BSN, RN, Director of Shared Governance

“It was an honor to spend the day collaborating with nurses from across the VUMC entity to work on the document that shapes Nursing Professional Practice here at Vanderbilt.” — Kim Isenberg, MSN, RN, CPNP AC-PC, NE-BC, APRN, Manager for Pediatric PATCH, Sedation, and ENT, Monroe Carell Jr. Children’s Hospital at Vanderbilt

“It was a privilege to serve, lead, learn and be involved in creating the story of nursing practice. Nursing Bylaws for me means we stand strong as distinctive professionals that take pride of ownership in our practice that makes us valuable, different and unique among other health care professionals.” — Glendyle Levinskas, BSN, RN, CNOR; Main OR Trauma/Renal 10, Vanderbilt University Adult Hospital

“It was an honor to serve as a delegate at the Nursing Staff Bylaws retreat. To me, the bylaws represent the significance of the contributions of nursing here at Vanderbilt.” — Stacy Hinkle, BSN, RN, Vanderbilt Psychiatric Hospital
For the past year, the VUH 4E Obstetrics and VCH Newborn Nursery teams have been working on implementing a new nursing care model called Couplet Care.

Couplet Care (also known as Mother-Baby Care) is when one nurse cares for both mom and baby. It is an evidence-based best practice that facilitates family bonding, supports breastfeeding, and increases patient satisfaction by promoting the nonseparation of mother and baby throughout the postpartum period.

From the staff perspective, it will enhance the continuity of care, improve communication and encourage multidisciplinary collaboration from the team. Because of the large scope of this project, the Women’s Health and Newborn Nursery leadership teams began planning for this transition in early Spring 2017.

Leadership began engaging the staff immediately by getting feedback through a retreat, meet-and-greets, regular workflow meetings, surveys and an engagement board. The staff created the workflows for the new unit in small teams made up of representatives from 4E Obstetrics and Newborn Nursery.

Beginning in January, nurses, care partners and medical receptionists from each team began cross-training on the opposite unit to become proficient in Mother-Baby Care. Through the hard work of the staff, the transition to this Couplet Care model will occur on Aug. 13. The majority of the current 4 East and Newborn Nursery staff members have come together to form one team that will be known going forward as the VUH 4 East Mother-Baby Obstetrics Unit.

“The new partnership and collaboration has enabled individuals and team to work toward our common purpose—to provide excellent care for our babies and moms,” said Marlee Crankshaw, DNP, RN, CNML, Administrative Director, Neonatal Services. “I am proud to be a part of this team effort.”

“The journey to transition nursing culture from a traditional care model to an evidence-based, family-centered approach has been very rewarding,” added Holly Ann Judge, MSN, RN, Associate Nursing Officer for the Women’s Patient Care Center. “We have a very short time with new parents and the couplet model empowers nurses to improve care delivery, patient education, and overall satisfaction. It’s a very exciting time for our team.”

VUMC is so thankful to have such hard-working staff members that have stepped up to make this transition a success. We are proud to offer this new model of care for our patients and will continuously work to offer our patients the highest quality of care.