Customer Success Case Study

Torrance Memorial Medical Center: 401 Beds
Torrance, CA
EBSCO Customer since 2004
EBSCO Solutions:
- DynaMed
- Nursing Reference Center
- Rehabilitation Reference Center
- CINAHL Plus with Full Text
- Cochrane Central Register of Controlled Trials
- Cochrane Database of Systematic Reviews
- Cochrane Methodology Register (CMR)
- Database of Abstracts of Reviews of Effects (DARE)
- Health Business Full Text Elite
- Health Technology Assessments (HTA)
- MEDLINE with Full Text
- NHS Economic Evaluation Database (NHS EED)
- Nursing & Allied Health Collection: Comprehensive
- Psychology and Behavioral Sciences Collection
- Rehabilitation & Sports Medicine Source

“Nursing Reference Center aligns nicely with Magnet and Joint Commission requirements. I was particularly impressed with the rigorous process used to develop the evidence-based practice resources. The practice setting is continually challenged to provide care based on the best evidence. I feel confident that the content in the Nursing Reference Center meets this requirement.”

Linda Lillington, RN, DNSc.
Nurse Researcher
Clinical Education
Torrance Memorial Medical Center

<table>
<thead>
<tr>
<th>Challenges</th>
<th>Solutions</th>
<th>Benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Provide an on-line comprehensive clinical resource for nurses that: 1. Is evidence-based 2. Available at Point-of-Care 3. Aligns with Magnet and The Joint Commission 4. Is updated continuously 5. Contains drug, patient education, skills and procedures, and CEUs 6. Has free remote access 7. Is user-friendly</td>
<td>• Performed a Magnet gap analysis in 2006 as a baseline measurement of Magnet principles and standards • Identified gaps and formulated a comprehensive plan to: 1. Increase number of certified nurses 2. Develop shared governance 3. Understand the need for nursing research and evidence-based practice in a Magnet-designated hospital</td>
<td>• Torrance Memorial now has 45 department Operations Councils and its model was highlighted in a recent ANCC publication, Guide for Establishing Shared Governance: a Starter’s Toolkit as a best practice • Over the past two years, Torrance certified nurses rose from 11% to 23% • With the addition of Nursing Reference Center, Torrance Memorial Medical Center now has the evidence-based reference tool that supports Magnet and assists in its final journey to Magnet Designation.</td>
</tr>
<tr>
<td>• Promote the value of the resource utilizing the employee website, flyers, newsletters, and classroom instruction</td>
<td>• In 2010, chose Nursing Reference Center as their evidence-based nursing resource to assist them in the development of evidence-based practice and nursing research</td>
<td></td>
</tr>
<tr>
<td>• Overall Objective: Utilize the resource to achieve the Gold Standard of Nursing: Magnet Designation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Overview:

Torrance Memorial Medical Center is a locally-governed, 401-bed, non-profit medical center in Southern California whose purpose is to provide quality healthcare services, predominantly to the residents of the South Bay, Palos Verdes Peninsula and Harbor communities. They are a Bariatric Center of Excellence and the first hospital in the city of Torrance to be awarded The Joint Commission's Certificate of Distinction as a Primary Stroke Center.

For the past four years, Torrance Memorial has been working toward its ultimate goal: Magnet Designation. Its Magnet journey has been chronicled in this case study as Torrance was able to identify major hurdles and tackle them head on. Providing evidence-based clinical resources for nurses, such as access to EBSCOhost’s Nursing Reference Center, has not only enhanced the clinical team’s knowledge, but it has also sparked curiosity and a sense of adventure when it comes to innovative ways to produce positive patient outcomes.

Challenges:

The Torrance Memorial Medical Center Magnet Journey

Torrance Memorial’s Magnet Journey began in 2006 when it performed a “gap analysis”. The gap analysis provided a baseline measurement that clearly and specifically established just where the organization was in relation to the specific Magnet principles and standards. The results of Torrance Memorial’s gap analysis revealed three items that would prevent it from becoming a Magnet designated facility. They were:

1. The total number of certified nurses did not meet the benchmark
2. Lack of a shared decision making structure (Shared Governance)
3. A need for Nursing Research and Evidence-based Practice

In order for Torrance Memorial to develop a comprehensive plan to alleviate the gaps, the first step was to fully understand the Magnet Process.

The Magnet Process

The Magnet Recognition Program® was developed by the American Nurses Credentialing Center (ANCC) to recognize health care organizations that provide nursing excellence. The program provides a vehicle for disseminating successful nursing practices and strategies. Recognizing quality patient care, nursing excellence, and innovations in professional nursing practice, the Magnet Recognition Program provides consumers with the ultimate benchmark to measure the quality of care that they can expect to receive. The Magnet Recognition Program is based on quality indicators and standards of nursing practice. The Scope and Standards for Nurse Administrators and other “foundational documents” form the base upon which the Magnet environment is built. The Magnet designation process includes the appraisal of qualitative factors in nursing. These factors, referred to as “Forces of Magnetism”, were first identified through research done in 1983. Since then, the 14 Forces of Magnetism have been divided into 5 Model Magnet Components.

With its gap analysis completed and a thorough understanding of the Magnet process, Torrance Memorial needed to choose an on-line, comprehensive clinical resource for nurses that was evidence-based, available at the Point-of-care and aligned with Magnet...
requirements and the Joint Commission. This resource would be instrumental in assisting Torrance in its final journey to Magnet designation.

**Solutions:**

**How Nursing Reference Center Supports Magnet Certification**

The decision to endorse Nursing Reference Center as the information resource of choice for nursing and allied health professionals clearly reflects a commitment to clinical excellence and advocacy for patients and staff. Best practices in patient care and safety, as well as access to the primary literature from the world-renowned CINAHL database - a virtual library - further demonstrates this commitment.

The Commission on Magnet created five model components to communicate the importance of Magnet organizations in shaping future changes essential to the continued development of the nursing profession and to quality outcomes in patient care. *Nursing Reference Center™ supports all five of the Magnet components:*

1. Transformational Leadership: Hospital leadership committed to Nursing excellence while fostering new ideas and innovations.

2. Structural Empowerment: Nursing staff is developed, directed, and empowered to accomplish organizational goals and achieve desired outcomes.

3. Exemplary Professional Practice: Establishment of strong professional nursing practice utilizing the latest available evidence-based information.

4. New Knowledge, Innovation and Improvements: Includes new models of care, application of existing evidence, new evidence, and visible contributions to the science of nursing.

5. Empirical Quality Results: Compares nursing and workforce outcomes, patient and consumer outcomes, and organizational outcomes to qualitative benchmarks.

*Nursing Reference Center* provides the latest national guidelines and evidence-based information for benchmarking, whether process or outcomes-oriented. These drivers of excellence become the basis for the organization’s policies and practices, ensuring continual improvement in clinical outcomes.

One of the deficiencies identified in the Magnet gap analysis at Torrance Memorial was the lack of a formalized shared decision-making structure. With the help of an *Interdisciplinary Team* that included employees from EVERY area of the hospital, from pharmacists, to nurses to physicians and many more, Torrance was able to create a sustainable shared governance structure.

Another area requiring attention was the need to increase the number of certified nurses at the bedside. Maricarmen Luhrsen RN, BSN, Shared Decision Making Manager, Torrance Magnet Recognition Program stated, “Our professional development council promoted national certifications and the medical staff provided support for conference attendance and review course reimbursements. We were very fortunate to find our Nurse Researcher who has built an Evidence-based Practice/Nursing Research Fellowship program that many staff nurses are very excited about,” said Luhrsen. This program has been
instrumental in showing nurses how research, evidence-based practice, and innovation can contribute to excellent empirical outcomes in a professional practice culture.

Nursing Research Evidence-Based Practice Fellowship Program Overview:
During this program, which can take from six months to a year, the nurses work on developing a nursing research or evidence-based practice project on a topic that they identify within their work environment. Fellows participate in classroom instruction, one-on-one mentor meetings with an advanced practice nurse (APN) mentor and doctorally prepared nurse researcher, development of a nursing research or evidence-based project, and begin project implementation. Fellows are then asked to disseminate project results/progress to colleagues at the Medical Center. At the close of the project, fellows are encouraged to submit an abstract for presentation at a local and/or national professional nursing conference or develop a manuscript for publication.

In an effort to take Torrance Memorial Medical Center through the final steps of the Magnet process, Nurse Researcher, Linda Lillington RN, DNSc began in March of 2010 to look for an on-line, evidence-based resource for nurses. Gary Hull, EBSCO Field Sales Representative, and Christian Barrock, Sales Director, sent an email to Peggy Berwald, RN, MSN, Senior Vice President, Patient Services/CNO at Torrance about Nursing Reference Center. Shortly afterwards, Linda met with them and was impressed with the quality of the resource. “I was particularly impressed with the rigorous process used to develop the evidence-based practice resources. The practice setting is continually challenged to provide care based on the best evidence. I feel confident that the content in the Nursing Reference Center meets this requirement,” said Lillington. According to Lillington, Nursing Reference Center was chosen because it is evidence-based, it aligns with Magnet and The Joint Commission, it includes drug, patient education and skill/procedures information and CEUs. It offers free remote access and is user friendly. “Being fairly new in my position, having a representative from Nursing Reference Center (Gary Hull) available and willing to provide on-site training was a real plus. The staff appreciated the one-on-one training, ability to ask questions, and ability to see the full capability of the resource.”

During the trial of Nursing Reference Center, Staff Nurse Laura Dugas, RN, CEN in the Emergency Department sent unsolicited feedback to Torrance’s CNO and CEO: “This resource is AMAZING! I have been able to look up patient illnesses. I am part of our department’s journal club and it has helped me find discussion-worthy articles to improve our patient care. Thank you for the opportunity. I hope our hospital can find the funds to maintain access.”

Since purchasing Nursing Reference Center in June of 2010, many people have been involved in the promotion of this valuable resource, including Anita Klecker, MSLS Health Sciences Librarian/CME coordinator, Linda Lillington, RN, DNsC., Nurse Researcher, and Barbara Lequire, MSN, BSN, PNP, BC, Director of Clinical Education. They have done an amazing job getting the word out by utilizing the employee website, flyers, newsletters and classroom instruction. See figures 1, 2, and 3.

Benefits:
With the formulation of the hospital’s interdisciplinary team, Torrance Memorial’s shared governance structure was born. Not only do they now have a total of 45 department
Operations Councils, but their model was highlighted in a recent ANCC publication, *Guide for Establishing Shared Governance: A Starter's Toolkit*, as a best practice.

Thanks to Torrance’s professional development council, the number of certified nurses rose from 11% to 23% over the past 2 years. Finally, with the addition of *Nursing Reference Center*, Torrance Memorial Medical Center now has an evidence-based reference tool that supports Magnet requirements and will assist Torrance in its final journey to Magnet designation (see fig. 4 and 5).

The initial Magnet application of intent was submitted on August 24, 2009. Torrance will be submitting their web-based documentation to the commission on Magnet on February 1, 2011. The commission will review their documentation and decide how the organization scores in the area of Excellence. From that point, they will be notified within 60 days if their organization qualifies for a site visit. “We expect this to occur sometime in May 2011,” said Maricarmen Luhrsen RN, BSN. “A three-day site visit from Magnet surveyors will follow. The Commission on Magnet will come to verify if what we have submitted in our document is, in fact, enculturated in our organization. Within 30 days (June/July 2011) of the site visit, we will be notified if we have achieved the gold standard for nursing....Magnet Designation.”

*Figure 1 - Torrance Memorial’s Employee Website called Focal Point. This provides links to EBSCOhost, DynaMed and Nursing Reference Center*
New Medical Library Service: Nursing Reference Center

The Medical Library is pleased to announce the online availability of EBSCO’s Nursing Reference Center. Nursing Reference Center is a comprehensive reference tool designed to provide relevant clinical resources to nurses and other health care professionals, directly at the point-of-care. This database offers staff nurses, nurse administrators and nurse faculty the best available and most recent clinical evidence from thousands of full-text documents.

Features of the Nursing Reference Center include, but are not limited to:
- Conditions & Diseases
- Evidence-Based Care Sheets
- Drug Information
- Lab & Diagnosis Detail
- Best Practice Guidelines
- Patient Education Resources
- Continuing Education
- Nursing Skills & Procedures
- Cultural Competencies
- Point-of-Care Reference Books
- Full-Text Journals
- Research Instruments
- Legal Cases
- The Latest Medical News

Nursing Reference Center is produced and reviewed by nurses, ensuring that nurses are accessing the most relevant information available to meet day-to-day patient care requirements. To access Nursing Reference Center on the internet enter http://search.ebscohost.com. A link is also available on Torrance Memorial’s Focal Point page. For user ID, password and additional information please contact Anita Klecker, Health Sciences Librarian/CME Coordinator, at ext. 4720 or Jeanne Hannah in Clinical Education at ext. 4610.

Figure 3 - EBSCOhost Resources Training Flyer

New Online Resources for Staff

When: August 11, 2010 at 1515-1600 - West Tower Auditorium

Who Should Attend: TMMC Staff, Managers, Directors interested in learning about new point-of-care resources providing current evidence and information for:
- Conditions & Diseases
- Drug Information
- Practice Guidelines
- Skills & Procedures
- Patient Education Resources
- Evidence-Based Care Sheets
- Competencies and CEUs
- Basic & Advanced Lit Searches

Individual nursing unit in-services are also being provided 8/11/10. Check with your CNS for the scheduled time for your unit.

Contact Clinical Education with any questions: ext. 4610
What’s in the literature?

Dr. Bernadette Melnyk from the Arizona State University College of Nursing has written a series of articles about the steps in the EBP process for the American Journal of Nursing (AJN). According to Melnyk “EBP is a problem solving approach to delivering health care that integrates the best evidence from studies and patient care data with clinician expertise and patient preferences and values. When delivered in a context of caring in a supportive organizational culture, the highest quality of care and best patient outcomes can be achieved.” (Melnyk et al. 2009)

The seven steps of the EBP process include:
Step 0: Cultivate a spirit of inquiry
Step 1: Ask clinical questions
Step 2: Search for best evidence
Step 3: Critically appraise the evidence
Step 4: Integrate the evidence with clinical expertise and patient preferences and values
Step 5: Evaluate the outcomes of the practice decisions or changes based on evidence
Step 6: Disseminate EBP results

Check out the series published every other month starting with the AJN, November 2009 issue (vol. 109, No.11) available at http://journals.lww.com/ajnonline/pages/issuelist.aspx

A Point-of-Care Resource for Nurses

Hold the Date…

Have you been searching for evidence to help you provide the best patient care? The Nursing Reference Center (NRC) is now available online (access via Focal Point link – EBSCOhost, Dynamed, Nurs Ref Cntr - user ID and password available from Anita Klecker ext. 4720 or Linda Lillington ext. 5728). In-service sessions are scheduled on Wednesday, August 11, 2010. The NRC representative will be visiting each unit to provide a brief overview of the NRC capabilities. An afternoon session is also scheduled in the auditorium, from 3:00 – 4:00 pm. Please join us to learn more about this very useful resource.
What is a PICO question?
Nurses routinely identify clinical problems and question the best care. A good clinical question addresses a problem of interest and provides a statement of the question that needs to be answered or a situation that needs a solution. The **PICO Framework** is helpful in formulating clinical questions. PICO components include:

- Patient population of interest (P)
- Intervention or area of interest (I)
- Comparison intervention or group (often the current standard practice) (C)
- Outcomes

Below is an example of using the PICO Framework to develop a clinical question.

<table>
<thead>
<tr>
<th>Problem: Chemotherapy-induced nausea and vomiting</th>
<th>PICO Component</th>
<th>Specifics of Interest</th>
<th>Example Question</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Population (P)</strong> (e.g. patient population, age, gender, ethnicity, diagnosis or condition)</td>
<td>How do I describe a group of patients similar to mine?</td>
<td>In patients receiving chemotherapy who are experiencing moderate nausea and vomiting</td>
<td></td>
</tr>
<tr>
<td><strong>Intervention (I)</strong> (e.g. treatment, drug, diagnostic test, procedure, exposure, etc.)</td>
<td>Which main intervention, drug, treatment, procedure, test, exposure, etc. am I considering?</td>
<td>Is the use of ginger</td>
<td></td>
</tr>
<tr>
<td><strong>Comparison (C)</strong> (optional, e.g. may include standard of care, control group or placebo group)</td>
<td>What is the main alternative to compare with the intervention?</td>
<td>As effective as prochlorperazine</td>
<td></td>
</tr>
<tr>
<td><strong>Outcome (O)</strong> (e.g. quality of life, tumor response, desired behavior, increased knowledge, decreased cost, etc.)</td>
<td>What can I hope to accomplish, improve, measure, or affect?</td>
<td>In reducing nausea and vomiting</td>
<td></td>
</tr>
</tbody>
</table>

Try a lit search in EBSCOhost - Nursing Reference Center: Chemotherapy AND Nausea AND Ginger

A well-formulated clinical question will help focus the literature you want to search to answer the question more quickly. The best way to become more skilled at developing good clinical questions is to practice. Nurses are excellent critical thinkers. As you care for patients on a daily basis, begin to take note of opportunities where you might be able to identify knowledge gaps or uncertainty about why you are providing a certain intervention or treatment or even whether other treatments or interventions may result in better patient outcomes.
