



Nominee: **Clara Winfield**, Surgical Admission Suite

Phone: 4349245455 | Manager: Karen Thomas | Director: | Administrator: Donna Via

At UVA at least 12 months?: True | Nominee is an RN?: True | Nominee does not carry the title of CN 1, CN 2, Manager, Director, or Administrator: True

Nominated by: Christina Knicely

Exemplars:

EXEMPLAR 1:

Promotes an environment of staff empowerment and ownership and capitalizes on opportunities to transform negative staff perceptions into productive outcomes.

Clara Winfield is a leader's leader. She demonstrates outstanding leadership qualities and is a mentor and role model for others who are developing their leadership skills. Her leadership style is encouraging and open and is a major reason we have been successful with Shared Governance in the Surgical Admission Suite (SAS).

We have always had a Shared Governance Structure, but the committee members were generally Clinician III or IVs which caused a great deal of tension between the nurse leadership group and the Clinician 2s who viewed the time away from the bedside as extra work for them. Since they were not involved in unit committees or unit projects they did not see the benefits or the outcomes. With the PNSO Shared Governance refresh, Clara inspired and engaged not only the nursing leadership of the unit but was able to foster excitement in the clinicians that had a negative view of committee work and projects. She has guided and encouraged the entire nursing staff into owning and engaging in Shared Governance in fun and creative ways. Our unit had a Shared Governance rally where each committee chair was invited to recruit members with enticing "advertisements". We had a cook off event with soups and yummy desserts to during the week of Shared Governance kick off. To show our units support and engagement in Shared Governance, Clara also arranged for a photo opportunity with the SAS staff holding up signs supporting Shared Governance that is now on the PNSO web page! Never in a million years did I think that every RN in SAS would be excited and participate in Shared Governance, but Clara has made it happen. Even the biggest naysayers have joined a committee and are participating in projects and research! Clara has taken the "mystery" out of what the work of the unit has been so that now every RN feels engaged and encouraged to be a part of nursing practice. There is less tension between clinicians and more support for committee work. She is coaching and mentoring all unit committee chairs in facilitating effective meetings, using the PNSO meeting template, and making sure minutes get posted on the Z drive folders. Clara makes sure that every clinician has input into professional practice and shares meeting minutes with all staff members. As an example of her creativity and making sure that Shared Governance is fun, the Quality Committee that she chairs, calls their report "Q-Tips!" In addition to facilitating the local level shared governance committees Clara is the co-chair of the Nursing Awards Committee, is a member of the perioperative quality committee, was a past Magnet Champion, and a Clinician IV chair of a Career Panel.

EXEMPLAR 2:

Utilizes innovative approaches that improve patient or program outcomes.

Getting patients who are first cases (30) to the Operating Room on time is imperative in ensuring productivity for the day is efficient. One surgical service that consistently was delayed was orthopedics. This patient population, in addition

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to needing the standard preoperative procedure, also required Regional blocks for pain management. This extra procedure was consistently causing delays leading to frustration. Clara is the only consistent charge nurse preparing patients who are scheduled as first cases and saw a way that could potentially influence the process for accuracy, safety, and timeliness. She collaborated with our unit manager, the surgical director for Operating Room (OR), and project management employees to improve first case efficiency for the orthopedic populations. The success of this project in getting patients to the OR has been so tremendous that other surgical services are now requesting to be a part of the plan.

Another process Clara improved was in patient identification. Our practice in SAS was to identify the patient when they arrived to the unit not when they arrived to the Family Surgical Waiting Lounge, where patients check in and wait to be called to the OR. As a leader in the area of patient safety, Clara realized that to improve patient safety our SAS patients should be identified as soon as they arrive to the Surgical Family Waiting Lounge. After SAS practice committee agreed to change the current practice, Clara educated the Lounge employees in how to properly identify the patient while maintaining patient confidentiality.

EXEMPLAR 3:

Conveys a strong sense of advocacy and support for the staff and for the patient.

Clara is dedicated to customer service and makes it a top priority in the Perianesthesia service area. She spends a lot of time and energy assuring the surgical experience for patients and families goes beyond their expectations. The Surgical Family Waiting Lounge (SFWL) is where patients and their families arrive and wait for their surgical procedure. This is also where families wait to hear from the surgeon and the Post Anesthesia Care (PACU) nurse. The employees and volunteers in the SFWL are not health care providers so Clara oversees them to ensure they have the education and tools to provide professional and supportive atmosphere for families and patients during this stressful time. Last year when there was a customer complaint about the lounge employees Clara developed an action plan. To improve customer service of the lounge staff she educated the staff by having them view the Computer Based Learning (CBL) programs on customer service and then meet with each staff member individually. She impressed upon them that they are the families' first impression when arriving to the hospital and developed an educational plan and evaluated how the process improved customer impression. She observes and evaluates the staff routinely to ensure that professionalism is being displayed. In addition to educating the staff Clara, has developed a brochure for families with information on what they can expect during the surgical process to help alleviate some anxiety.

Another example of Clara's concern for patient/customer service is the way she advocates for the elderly population. This patient population is often seen in SAS and many come from nursing facilities. These patients arrive many hours prior to their scheduled surgeries due to transportation issues. This can be a tremendous burden on the elderly who have other medical issues. Clara consistently negotiates with the surgeons and the Operating Room (OR) staff to have these patients surgeries moved to an earlier time to ease the burden on these patient's.

Demonstrates expert clinical knowledge and expertise in professional nursing practice

Clara is a member of the Association of PeriAnesthesia Nursing, Clara at one time only one of three RNs in SAS that was certified. As the facilitator of our Nursing Leadership Committee, Clara inspired the rest of the unit leaders to form a study group and become certified. This activity also inspired several of our newer clinicians as well. In SAS we now have 7 certified nurses; Clinician II, III, and IVs, and several more are studying to take the exam this spring! She is also a member of Sigma Theta Tau Beta Kappa Chapter and is running for office of Fundraising. For many years Clara has been our unit's organizer for the Day of Caring event.

As one of the consistent shift managers on the unit she has developed a charge nurse manual, orients staff new to the role, and mentors others who want to grow and improve in their leadership abilities. Her technical expertise in

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Intravenous Therapy has led her to mentor and train medical students, residents, and anesthesia technicians in the insertion of intravenous lines.

Clara has been a research mentor in SAS for many years and involves all RNs who were interested in improving our practice and patient satisfaction ratings. In April one of these research studies is being published in the Association of PeriAnesthesia's professional magazine! She is currently mentoring a new group of RNs in another research study that will also have an effect on patient satisfaction and may improve practice for all diabetics. Clara has presented her research studies in poster and podium presentations not only in the state Virginia, but the in Arizona as well. She tirelessly looks a ways to improve the practice of perianesthesia nursing, especially in the area of patient satisfaction.

Clara's professionalism, leadership qualities, and commitment to customer service are just a few of her outstanding characteristics. She has been the backbone to SAS for many years and without her expertise and commitments the unit would not function efficiently. Clara is well known to all interdisciplinary team members of the entire perianesthesia service area. She continually sets higher personal goals, and I find her energy, enthusiasm, and professional commitment admirable! She does all of this and supports not only her peers, but her manager as well, and never asks for anything in return. She is always the one recommending others for Nursing Awards it is now time that she be recognized for her commitment to her unit, her institution, her profession!

Nominee: Clara Winfield, Surgical Admission Suite**Phone:** 4349245455 | **Manager:** Karen Thomas | **Director:** | **Administrator:** Donna Via**At UVA at least 12 months?:** True | **Nominee is an RN?:** True | **Nominee does not carry the title of CN 1, CN 2, Manager, Director, or Administrator:** True**Nominated by: Karen Thomas**

It is with great pleasure that I nominate Clara Winfield, RN Clinician IV, for the 2013 PNSO Transformational Leader award. I have had the honor and privilege of working with Clara for the past 25 years in the Surgical Admission Suite (SAS) as a clinician colleague and more recently as her nurse manager. If the nomination allowed you to timeline an individual's commitment, contributions and qualities it would be clearly evident that Clara has embodied and lived out the qualities of a transformational leader for quite some time. However, I understand I must focus on the past year.

Exemplar 1: Helps to create an environment of professional development.

Clara is committed to the professional development and growth of the staff in SAS. She makes time to talk to staff, learn their interests and support their goals. She has mentored a Clinician 2 to successful advancement on the clinical ladder. She is in the process of mentoring another clinician to challenge the ladder in the upcoming year. This individual has all of the necessary qualities and skills to be successful, but lacks confidence. Clara has identified opportunities for this clinician that has enabled her to gradually step out of her comfort zone and build her confidence. Another clinician who infrequently performed in the charge nurse role desired to improve her leadership skills and to be assigned in this role more often. The clinician shared her desire with Clara. Clara reassigned the days she was scheduled to be in charge to the clinician and took the clinician's patient care assignments. As a mentor, Clara was able to provide constructive, in the moment feedback and now this individual is one of five primary morning charge nurses. Clara was also approached by the Clinician IV in the PACU, who recently advanced, and was asked to share how she has been successfully embraced as a leader in SAS.

Clara is also committed to her own professional development. She is currently taking a statistics course, so she can enroll in the MSN program at UVA. Clara was one of the first three clinicians to become certified in SAS. She encouraged other staff and helped them study and prepare. Currently, seven out of twenty-two RN's in SAS are certified and another group is preparing to test in the fall. Clara is an active member of several PNSO Committees. She is a member of Sigma Theta Tau Beta Kappa Chapter, is actively involved in UVA and community-related organizations and activities (PACEM, Habitat for Humanity, Day of Caring) and served as a team leader at the UVA RAM clinic in July of 2102. Clara is a research mentor in SAS and has successfully recruited all staff who want to be involved in research at the bedside. The research studies, with her leadership, have been presented in poster and podium presentations in Virginia, as well as Arizona and California. In April, one of the studies is being published in the Journal of PeriAnesthesia Nursing.

Clara is always exploring ways to increase staff involvement and to motivate them to excellence. One of the initiatives she led was the development of "Standards of Pride" for SAS. She successfully involved all staff and the final document was renamed "Sustaining a Spectacular Unit" to align the language with the organization's mission statement (document available upon request). Initiatives like this, led by Clara, as well as the exemplars that will follow, have contributed to greater employee engagement and greater RN Satisfaction in SAS. This is supported by our scores in both surveys being consistently higher than the organization.

Exemplar 2: Promotes an environment of staff empowerment and ownership and capitalizes on opportunities to transform negative staff perceptions into productive outcomes.

Clara has been a strong supporter of the PNSO Shared Governance Model since it was introduced at UVAHS in the early 90's. When the PNSO announced the Shared Governance "refresh", Clara was enthusiastic and optimistic about the opportunity to expand and improve the current model in which we practiced in SAS. In that model, the committees were mostly comprised of Clinician 3's. This compounded the sense of division that had been present among the clinician 2 and clinician 3 groups. Clara knew that in order to be successful and to unify the staff, everyone would need and want to be involved. She immediately began to engage staff in conversation about how they thought the structure should be set up in SAS, what level of involvement they wanted to participate in, and how they thought it could be put into operation. Staff have always had a high level of trust and respect for Clara. They were very receptive to her enthusiasm and began to inquire more about the shared governance concept. She also knew in order to get true "buy in" from all staff, she would need to appeal to their interests. One of Clara's unique qualities, which are an asset to her success as a transformational leader, is her sense of fun and adventure. Another is her creativity. Clara engaged the leadership group to develop a "marketing" campaign for each of the four committees to solicit interest. It was not only fun and entertaining; it was an "ice breaker" that began to repair the division in the unit. It resulted in every staff person signing up for a committee...even our PCA's. Since the Shared Governance "kick-off" in January, all four committees have met monthly. Attendance has been great and there has been a high level of involvement from everyone. Clara is the chair of the Research Committee and it is the largest committee of the four. They have started on the next research project. Some of the outcomes from this committee include: literature reviews, protocol builder, development of consent and data collection tool and the creation of a power point presentation for the upcoming PNSO Evidenced Based Practice Symposium. As a result of this success, Clara along with the chair of the SAS practice committee was asked to present at the PNSO Cabinet "How the SAS Shared Governance Model Has Evolved" (power point available upon request). This is a true testament to Clara's ability to inspire and motivate a divided group. The group was able integrate a concept that empowers them to use their knowledge and expertise to develop, direct and sustain their professional practice.

Exemplar 3: Positively Influences Change

First case on time starts for the operating room is a SAS goal as well as a Surgical Services goal that has a direct line of site to the organizational goal "I Build". Multiple processes involving multiple teams are necessary to get patients prepared and into the OR on time. The SAS goal is to have first case patients (between 27 and 30 patients) "SAS" ready by 0710. Our goal is currently 85% and we are meeting it. Getting a patient "SAS" ready involves checking them in, doing a brief preoperative assessment, completing the preop checklist, additional items on the Epic navigator, IV insertion (which can involve the need for labs to be drawn), occasional EKG's, if not done prior to day of surgery, medication administration and education. Clara consistently does patient care for first cases and is one of the primary charge nurses. Her leadership in this role as well as the behaviors she role models has led to our success. However, Clara believed that if we were consistently meeting our goal then we could exceed it. She collaborated with staff and management to identify opportunities to increase efficiency. The patients and staff already arrive at 5:30am and bringing them earlier was not an option. Initially, staff determined there were no opportunities. They believed they were doing everything they possibly could do. Clara shared ideas on how they could restructure the morning processes to improve efficiency. One idea was to have each first case nurse meet the first group of patients when they arrived in SAS after being escorted from the first floor Surgical Family Lounge. This would allow the nurse to take the patient to their room and start their preop earlier, as opposed to waiting for the volunteer to room each patient, instruct them to change, and then have the nurse enter the room. Initially, staff was not very receptive. They had developed their individual steps and processes to getting patients ready and this did not fit. Clara listened to their concerns and shared what she thought the benefit would be. She encouraged them to do a trial for a month and they would reassess the process. The staff agreed and as a result, our "SAS" ready times for the month of March, 2013 were 90%. This may seem like a simple example because it was such a simple fix. That is exactly why I included it. It would have been very easy for a leader with a different style to say this is what we will do. However, because of Clara's transformational leadership

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style, she was able to create an environment where staff had a voice in the decision and therefore they were willing to try it. It resulted in a great outcome that was tangible for the staff and it is now well accepted.

Exemplar # 4: Utilizes innovative approaches that improve patient or program outcomes.

As evidenced in the exemplar above, Clara is very committed to efficiency, especially related to on-time first starts. This is well known in the Surgical Services department. Clara identified opportunities to improve efficiency and safety for the orthopedic patients, especially those receiving regional blocks. As a result, she was asked to be a member of an interdisciplinary team, to improve first case on time start percentages for orthopedic surgery. This team evaluated the process from the time the case was scheduled in the Orthopedic Clinic, through to incision in the operating room. Clara was instrumental in documenting the opportunities for improvement in the assessment stage of the project and identifying strategies to test in the pilot phase. After identifying the opportunities, Clara participated with the rest of the team in evaluating strategies offered as “best practice” from the Advisory Board and following through with the testing of those strategies, e.g. Start Time Matrix, Physician Assistant Checklist in Clinics, SAS Charge Nurse as Facilitator, In Room Start Time Matrix up to Incision, Nights Shift Checklist etc. Clara was then involved in reviewing the pilot data against the target (80%) to measure success. She also served as the point person in SAS for the testing of the new process and actively facilitated discussion at the SAS staff meeting regarding the next steps of the project – e.g. from SAS to Incision. Prior to the start of this initiative, in March of 2012, the orthopedic on time first starts for the main OR was 46%. As of April 5th 2013, the 13 week average is 76%.

True evidence of a successful transformational leader is not only the ability to transform the unit’s values, beliefs and behaviors to align them with our organizational goals, but to also demonstrate the ability to sustain the transformation. Clara has without question proven her ability to consistently succeed in this organizational challenge. It is evidenced by the continued success of the unit’s Shared Governance Model, sustained improvement of orthopedic on time first starts, patients being “SAS” ready by 0710, continued professional growth, staff development, and the unit Employee Engagement and RN Satisfaction scores being consistently above the organization’s score.

As a result of Clara’s transformational leadership style; her knowledge and skills, combined with her enthusiasm, vision and commitment, she has been instrumental in leading the SAS staff to a higher level of commitment and professionalism as well as their desire to grow. By accomplishing this, she is gradually helping to transform staff who have been followers into effective leaders, who will be able to take on the responsibility to motivate new staff and to create new visions that will continue to transform the unit’s values, beliefs and behaviors.

I hope that after reading these exemplars, you will agree that Clara Winfield is the best candidate to receive the 2013 PNSO Transformational Leader Award.

I sincerely thank you for the opportunity to support Clara’s nomination. Please feel free to contact me if you need anything further information.

Karen K. Thomas
Nurse Manager
Surgical Admission Suite
Preanesthesia Evaluation and Testing Center



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Nominated by: Russell Nealy, RN

Exemplars:

EXEMPLAR 1:

Shared Governance...I've heard that SAS has always had, and I think that it is true that we've always had the opportunity for this. I'm not sure we've actually had it though. I think "management" has always handpicked who does what when something needs to get done. Clara is a force trying to break thi mold. She actively encourages others to "step up." For our current committees, she actively recruited to all staff for participation on an individual basis. Her personal interactions made a difference.

EXEMPLAR 2:

Clara is a patient-staff resource for so many things it's unbelievable.

EXEMPLAR 3:

she's a research mentor having successfully paricipated in published research herself



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Nominated by: Sharon Van Sickle RN, Clin 3; Ann Faisant, RN, Clin 3; Lisa Farmer, RN, Clin 3

Exemplars:

EXEMPLAR 1:

It is with great pleasure that we nominate Clara Winfield for the PNSO "Transformational Leader" award for 2013. Clara is known in the perioperative region for her professional nature and has the gift of engaging support from coworkers and the whole interdisciplinary team.

Clara is the Chair of our local Quality and Research committees and is actively involved with all other unit committees. Her talent and interest in research has been evidenced by her ASPAN publications in the previous years. Our research team is a large group and Clara has been able to mentor and appreciate all as valuable contributors.

She has been leading staff and leadership meetings for the past year and has generated an elevated level of support from the team in general. She is always respectful to patients and all staff members and highlights the positive attributes of her coworkers.

Clara had a direct impact on the transition to "Shared Governance" and arranged a celebration to ignite passion and interest. She spoke at staff meetings and rallied that each one of us get involved with committees at some level. She made a large poster and injected humor by using poems and fun art.

Clara serves on the PNSO Awards Committee and has done so for several years now. She continues to be a member of the Clinician III advancement panel. She has been teaching CPR for many years and is appreciated for her easy going demeanor while doing so. Clara is well known in the region for her expert I.V. skills and is often sought out by the Anesthesia team for the most difficult I.V. access.

She is a stellar charge nurse and has a global insight unlike any other. Over the past 6 months she has been involved with a key group of people regarding first case readiness and this project has proven to improve start times in the O.R. This tool will now be utilized with other services to demonstrate the effectiveness of patient flow and readiness.

Clara is known as a valuable clinical resource and always has time for one to one discussion. She oversees the Surgical Family Lounge and is developing an informational video for patients and their families. She has had a huge impact on patients first impressions at the portal of entry by working with the staff in the Surgical Lounge individually.

Clara has a strong community commitment and has been volunteering at RAM for several years now. She has been organizing "Day of Caring" for countless years and continues to do so.

We could go on and on about Clara's accomplishments and contributions. We trust and ask that she be recognized as the outstanding and talented clinician she is.

Thank you for your time.

Sharon Van Sickle, RN

Clinician III

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Surgical Admissions Suite
Ann Faisant, RN
Clinician III
Surgical Admissions Suite

EXEMPLAR 2:

Clara's advancement to the Clinician IV role in SAS was a natural transition for her as well as her coworkers. She has always been respected as a unit leader, but has since taken her leadership skills to the next level. Clara promotes an environment of staff empowerment and ownership daily. She is the one person on our unit that everyone feels comfortable going to for either clinical advice, mentoring for advancement/professional goals or help with conflict management. Our unit has always practiced Shared Governance and had highly functional committees. When the PNSO promoted a rejuvenated Shared Governance at the unit level, Clara was instrumental in taking our unit committees to the next level. She lead and promoted Shared Governance with a level of passion and excitement that was infectious. We had committee signups on a interesting and fun poster, kicked off with a Shared Governance unit party, and had a unit picture taken. These ideas were all lead by Clara. We now have nurses happily participating that have not been a committee member in years!

Lisa Farmer BSN, RN, CAPA
Clinician III
Surgical Admission Suite

EXEMPLAR 3:

Clara demonstrates expert clinical knowledge and expertise in professional nursing practice. She was one of our first nurses to obtain CAPA (Certified Ambulatory PeriAnesthesia Nurse) certification. With the PNSO push to increase the number of certified nurses at UVA, Clara successfully promoted certification on our unit. She helped develop and lead study sessions and spent her free time assisting her colleagues in studying. As a result, our unit had 4 nurses (me being one!) become certified this past fall, and more nurses than ever continuing to express an interest. Clara is also our BLS instructor and does bi-monthly recertifications for the entire perioperative region. She is ACLS certified. She is a member of ASPAN (American Society of PeriAnesthesia Nurses) and VSPAN (Virginia Society of PeriAnesthesia Nurses) and attends many of their coferecences/events. Clara is our unit Research Committee Chair and has sparked a new interest in Research in me. Having never really actively participated in a research project, Clara has been leading me through the process of writing and obtaining consent, protocol, and we will be presenting a poster presentation of our research project at the 2013 PNSO Evidenced Based Practice Day. I find Clara to be a natural teacher, coach, mentor, and cheerleader...and all these things together make her an amazing leader!

Lisa Farmer BSN, RN, CAPA
Clinician III
Surgical Admission Suite