How We Enjoyed a Successful Magnet Virtual Site Visit

February 26, 2021

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Goals and Objectives

• Replicate a traditional in-person site visit virtually
• Leverage technology for a smooth presentation
  – Avoid glitches/interruptions which would detract from the visit
  – Seamlessly share content
• Provide visit experience equivalent to our excellence in nursing practice
• Allow appraisers to appreciate the rich culture and humanity of MSK
• **Memorial Sloan Kettering Cancer Center** (MSK) founded in 1884
• Designated as a Cancer Center by the National Cancer Institute
• Among the top USN&WR oncology hospitals for 25+ years
• Locations in NYC (11), Westchester (1), Long Island (3) and NJ (3)
• Over 20K staff, 4500 of which are registered nurses
Our Timeline

Feb 3
• Re-designation documents submitted

Apr 23
• Document accepted
• Straight to site visit
• Lead appraiser announced

Aug 4-5
• Mock virtual site visit

Sep 14-16
• Magnet virtual site visit

Nov 23
• Re-designation Announcement
Schedule

- Schedule was first developed based on an on-site visit; confirmed virtual in mid-June by ANCC
- A virtual site visit schedule has different planning needs, our strategies were based on session type:
  - **Themed/Meal sessions**: planned meetings with invited participants, e.g., Executive Leadership, Nursing Research, Quality & Safety
    - Needed conference space with laptops/headsets for those who could not remotely attend
    - Could control for social distancing
    - Could control for A/V quality, environment and possible distractions with remote attendance
  - **Unit tours**: comprised of inpatient units, urgent care clinics, peri-operative/procedural areas and outpatient facilities
    - Needed multiple mobile carts with camera/microphone
  - **Appraiser review sessions** (with CNO/MPD, file/data review)
  - **Private session** with appraisers
  - **Open Forum**
Scheduling Requirements

- Developed “Magnet 2020 at a Glance” – converted ANCC site visit agenda to an Excel spreadsheet
- Included critical information:
  - Day, Date, Start time, End time
  - Name of session and assigned appraiser
  - Zoom link, meeting ID and passcode
  - Location (Room, Tour, or n/a)
  - Tech needs for session: # laptops, rolling carts
  - Assigned MSK support – moderator, tech support, Magnet Master
- Provided full and individual schedules for each of the appraisers
  - Appraiser could either use link, or if in Zoom, enter ID/passcode to switch meetings
- Alternated conference rooms (reserved 1 for each appraiser for concurrent sessions) to allow to decant on-site participants, clean equipment and reseat next session – total 6 conference rooms at Main Campus
- Typical themed session time = 45 mins, tours varied from 30 – 90 mins (depending on size)
  - Planned breaks b/w sessions (15 mins) and appraiser meal breaks (30 mins)
## Schedule Example: Planned Sessions and Unit Tours

### February 26, 2021

<table>
<thead>
<tr>
<th>Day</th>
<th>Date</th>
<th>Start Time</th>
<th>End Time</th>
<th>Interview Session</th>
<th>Lead Appraiser</th>
<th>Appraiser #2</th>
<th>Appraiser #3</th>
<th>ROOMS</th>
<th>Zoom Link</th>
<th>Zoom Meeting ID</th>
<th>Zoom Meeting Passcode</th>
</tr>
</thead>
<tbody>
<tr>
<td>Day 2 - Tuesday</td>
<td>15-Sep</td>
<td>10:55 AM</td>
<td>11:40 AM</td>
<td>Nursing Research and Clinical Trials Nursing</td>
<td>X</td>
<td></td>
<td></td>
<td>RRL</td>
<td><a href="https://meet.mskcc.org/j93541833">Link</a></td>
<td>Meeting ID: 935418354</td>
<td>Passcode: 427980</td>
</tr>
<tr>
<td>Day 2 - Tuesday</td>
<td>15-Sep</td>
<td>11:40 AM</td>
<td>12:10 PM</td>
<td>BREAK for Appraiser Lunch</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Day 2 - Tuesday</td>
<td>15-Sep</td>
<td>12:10 PM</td>
<td>12:55 PM</td>
<td>Lunch: Session 1 (Specialty Roles in Oncology Nursing)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Day 2 - Tuesday</td>
<td>15-Sep</td>
<td>12:10 PM</td>
<td>12:55 PM</td>
<td>Lunch: Session 2 (Day Shift: Direct Care RNS)</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Day 2 - Tuesday</td>
<td>15-Sep</td>
<td>12:10 PM</td>
<td>12:55 PM</td>
<td>Lunch: Session 3 (Day Shift: Direct Care RNS)</td>
<td></td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Day 2 - Tuesday</td>
<td>15-Sep</td>
<td>12:55 PM</td>
<td>1:05 PM</td>
<td>BREAK: Prepare for Next Session</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Unit Tours

- **12:45 - 1:15 pm**: Unit Tours (30 mins)
  - M19
  - M16
  - M14
  - M13
  - M12
  - M11
  - M10
  - M9
  - M8
  - M7
  - M6
  - M5
  - M4
  - M3
  - M2
  - M1
  - ICU
  - ITU

- **3:15 - 3:30 pm**: Break: Prepare for next session

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MSK Magnet Virtual Site Visit

February 26, 2021
Technology: Meeting Platform

- Decided on Zoom vs other platforms (MS Teams, WebEx)
  - Picture quality deemed superior
  - Allowed greatest number of individual tiles
  - Secondary platform (MS Teams) planned if Zoom has technical issues
- Important to identify meeting properties
  - Session hosts needed to alternate (session ends once host leaves and won’t start until host present)
  - Moderators were named as alternative host
- Security added by requiring a passcode to the session (*best-practice per MSK IT*)
- **Note:** Zoom via Virtual Desktop or having more than one meeting platform open presented A/V challenges – addressed with education and tech support
Virtual Tours

- Tours comprised inpatient units, urgent care clinics, peri-operative/procedural areas and outpatient facilities
  - Planned to alternate 2 carts per grouped inpatient unit tour
  - Planned for 2 carts per facility
- Tours were pre-planned to highlight each unit or facility, having a conference room identified as a back-up
- Magnet Masters (lead staff champions) served as hosts, driving the carts and confirming audio/visual quality
  - As staff were masked, raised hands helped identify speaker
- Unit’s Nurse Leader (manager) welcomed the appraiser (and then announced their departure)
- Unit-based Magnet Champions provided a tour of the unit
- At least one “dry-run” performed to test for any “dead zones” as well as to help familiarize and get staff comfortable with this new modality
## Virtual Unit Tour: Example with Lead Appraiser

<table>
<thead>
<tr>
<th>Time</th>
<th>Unit</th>
<th>Master</th>
<th>Logistics:</th>
</tr>
</thead>
<tbody>
<tr>
<td>12:30 – 1:00p</td>
<td>M19</td>
<td>Danielle</td>
<td>Sign in at 12:15p Move to M15 at 1:00p</td>
</tr>
<tr>
<td>1:00 – 1:30p</td>
<td>M16</td>
<td>Jenn</td>
<td>Join at 12:45p (camera off/muted) Move to M10 at 1:30p</td>
</tr>
<tr>
<td>1:30 – 2:00p</td>
<td>M15</td>
<td>Danielle</td>
<td>Move to M05 at 2:00p (camera off/muted)</td>
</tr>
<tr>
<td>2:00 – 2:30p</td>
<td>M10</td>
<td>Jenn</td>
<td>(Danielle’s camera off/muted)</td>
</tr>
<tr>
<td>3:00 – 3:30p</td>
<td>M05</td>
<td>Danielle</td>
<td>(Jenn’s camera off/muted)</td>
</tr>
</tbody>
</table>

*Cheryl on back-up with extra mobile cart
Nursing Informaticist on site, IT on call
*** One meeting ID for all 5 unit tours ***
Themed Sessions in Conference Space

• Guidance given on room occupancy limit
• 6-foot tables provide proper distance b/w attendees
• Additionally, tables staggered on the diagonal

• Each table equipped with laptop and headset
• Laptops tethered for security as visit occurred over several days
• Power strips needed in some rooms, and power cords were taped to floor (tripping hazard)
• Rooms wired for network (more stable than Wi-Fi)

• Built time pre- and post- for set-up/break-down, testing
• Current meeting Zoom mtg ID / password on large screen for each session
• IT fixed Zoom app to stay open on laptops
• Magnet Masters assisted participants with sign on/tech check
In the Notes section, we provided the primary reason for the person attending the session:

- Rosters were sent to the appraiser team prior to the site visit
- Rule of thumb was 12-15 attendees/45 min session
- Saved time by omitting in-session introductions

The appraiser team found this helpful and efficient in framing their questions prior to the session.

We also screen-captured the session as evidence of attendance (as unable to obtain signatures).
Appraiser Review Sessions

• Reserved small room for CNO/MPD/Appraiser team sessions
  • Each morning, we provided a short video of what facilities our appraisers would virtually visit
  • Also used this room for HR file review
    • HR files prepared in advance and shared via Zoom meeting
• Materials normally reviewed on Day #1 we sent to the appraiser team in advance:
  • Addressed deficiencies (due 5 days prior to site visit)
  • PowerPoint presentation of Public/Staff Notice documentation
    • Provided images of signage, advertising, inter/intranet notices and attestations of facility signage throughout 30-day period
  • Pt/Staff complaints
  • Updated organization charts
  • MSK themed session attendance rosters
Appraiser Private Session

• Every site visit requires a private session to meet with a Magnet appraiser confidentially

• We used the waiting room feature in Zoom. To assure confidentiality:
  • MSK IT opened the meeting and transferred host privileges to the appraiser
  • Waiting room feature allowed appraiser to admit one person at a time to the session
  • Attendees in waiting room are unaware of each other
  • Instructions/training was provided to the appraiser before the site visit

Presentation slide summarizing site visit preparatory activities compiled for appraiser team

Notification of Private Session with Magnet Appraiser
The Open Forum for our inaugural designation was special and memorable – a packed house and a “wowed” appraiser team. We wanted to relive the magic!

We used Zoom Meeting (vs Webinar) which allowed up to 500 participants

We planned a few opening remarks (introductions of appraiser team, CEO) and then used “raise hand” feature to identify interest

NI Moderator hosted: provided brief opening instruction on Zoom etiquette, managed muting/unmuting and called on raised hands

Concluded with closing remarks by our CNO and a 3-minute video capturing MSK nursing heroism during the pandemic

Mission accomplished!!!
Other Important Strategies

1. Test, retest, and test again
   • MSK IT and Nursing Informatics collaborated on preparatory activities
   • Identified and managed equipment inventory (# of laptops/headsets, # mobile carts)
2. Provide opportunity for nurses to familiarize themselves with the technology
   • Multiple mock surveys were conducted for the unit tours
   • Nursing Informatics held virtual Magnet Q&A about the technology
3. Involve nursing staff whenever possible
   • 7 full-time Magnet Masters in the final weeks dedicated to education and training of unit-based staff – balanced with ongoing concern about increasing risks of COVID exposure
4. Communication
5. Training and Education
6. Defined Roles
Communication

- Developed a Magnet intranet webpage as a resource hub
- Used Outlook calendar to schedule site visit sessions
  - Initial “Save-the-Date” invitations sent to hold approximate date/time on calendars
  - Once invitations were accepted, updates were made to the calendar invite (e.g., adding Zoom meeting links)
- Need a team to check and double-check information
- Non-traditional meeting start times required specific communication
- Assembled a virtual Command Center using an alternate platform (MS Teams) – chat feature proved invaluable
- Communicated with our appraiser team via text messaging
- Dedicated MSK IT help line for appraisers available throughout
Meeting times scheduled for 10 minutes prior to start of session
Training and Education

- Nursing Informatics developed training and education for staff participants, moderators and appraisers
- Critical **not** to assume appraisers were well-versed in technology
  - Planned “Meet and Greet” about 10 days prior to site visit
  - Scheduled a 90-minute meeting to review roles and responsibilities of meeting participants
  - Provided Zoom training
  - Reviewed hand-off and logistics of Private Session
Session Roles and Responsibilities

This strategy was one of the keys to success

- **Magnet Master**: (camera off/ muted) Helped on-site participants sign into meeting, took notes, time-keeper, captured attendance, updated Command Center on status (e.g., all participants present)

- **Meeting Moderator**: (Nursing Informaticist) Performed introductions, reviewed etiquette, directed “traffic” by calling on raised hands, concluded session

- **Technical Support**: (camera off/ muted) Participants could direct message MSK IT staff in chat with any issues

- These roles were also assigned during the unit tours, with Magnet Masters performing introductions and NI/IT serving as support
Questions?