

NURSING IN CHANGING
AND MULTIDIMENSIONAL
HEALTH CARE

HUS ANNUAL REPORT OF NURSING 2023

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The articles in the Annual Report of Nursing are examples of the excellent nursing development work carried out at HUS in 2023 and other excellent nursing activities in different units. The Editorial Board extends a warm thank you to all authors and photographers.

Cover image: Heli Kurimo

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Greetings from the Chief Nursing Executive

Almost a year has passed since the big reform of healthcare, social welfare and rescue services. A major change has taken place here in Uusimaa, where four wellbeing services counties, the City of Helsinki and HUS are operating. The wellbeing services counties are self-governing regions funded by the State. At the same time, HUS also underwent an organizational reform. Since the beginning of 2023, we have had a total of six profit areas, and other reforms also took place in the HUS Group. So changes have been made and will certainly be made in the future. We will need resilience, i.e. flexibility, reorientation and mental coping skills. We have had the chance to practice it and also learned a lot in recent years.

The HUS Strategy was renewed this year and, as a result, the HUS Nursing Strategy has also been renewed. The HUS Nursing Strategy is based on the Magnet Hospital® model and is concretized in participation structures in line with the model and thus in the work of each of us nursing professionals for the benefit of our customers. HUS nursing is developed in accordance with the Magnet Hospital® model. One of the fundamentals of the model is the possibility for nursing staff to provide high-quality nursing care. The knowledge-based systematic development of nursing and the monitoring and measurement of outcomes allow for continuous improvement of quality. Our challenge now and in the future is to ensure the attractiveness of the employer and our workplace as well as the retention of our nursing staff. We need to continue this work together, and the Magnet Hospital® framework provides an excellent structure for this.

The Comprehensive Cancer Center and the Heart and Lung Center are al-



ready well along on their Magnet Hospital® journey. The two departments have submitted an application for actual recognition. The Comprehensive Cancer Center is already preparing for a so-called site visit, or an audit visit in early January. The Heart and Lung Center has undergone corrections to some of the examples of excellent nursing care included

in the application, based on an assessment of the initial nursing documentation. The Hospital for Children and Adolescents and the Psychiatry Department are also continuing their journey towards the Magnet Hospital® recognition.

It is important for us to utilize customer's experiential knowledge and expertise in the development of our ser-

vices to further improve the customer experience. Customer experience is one of the five priorities in HUS new strategy for 2023–2027. One of the goals of the customer experience priority has been to develop a customer participation program. The OLKA® activities and experience activities (expert by experience activities, customer panels and research panels)

that are part of HUS customer participation activities and the related coaching is managed, developed and evaluated in cooperation with the personnel of the profit areas and units – towards the goal of “Finland’s best customer experience in 2027”.

I would like to warmly thank everyone for the past year’s cooperation and

the excellent nursing work carried out for the benefit of our customers!

*Happy New Year 2024
& collegial greetings,
Marja*

Marja Renholm, RN, PhD, is the Chief Nursing Executive at HUS.

The **HUS Nursing Strategy 2023–2027** is outlined on the inside of the back cover of this Annual Report. It can also be found in Eetteri (Potilaan hoito > Hoitotyö), which also contains a more detailed description of the indicators with their target values.

The first goal looms on the way to becoming a Magnet Hospital®

Marita Ritmala

The year 2023 was a particularly action-packed and exciting year in terms of Magnet Hospital®. In January, the Comprehensive Cancer Center and in June, the Heart and Lung Center submitted their criteria documentations for Magnet Hospital® recognition to the American Nurses Credentialing Center (ANCC). The Comprehensive Cancer Center’s documentation was already approved in early autumn, so the autumn was spent preparing for an evaluation visit in January 2024. The

Heart and Lung Center’s application was revised in the autumn, and its approval and possible move to the evaluation visit phase will be decided in the spring of 2024.

The evaluation visit to the Comprehensive Cancer Center in January 2024 will be performed by three experienced professionals with long-time nursing experience. The visit will last for three days and include individual and group interviews with representatives of all professional groups.

Kerry Jones, former Director of the Magnet Hospital Program at the Nottingham University Hospitals, visited HUS in October to advise how to prepare for the evaluation visit. She made several simulation visits to both the Comprehensive Cancer Center and the Heart and Lung Center. The nurses enthusiastically and competently presented the activities of their units and their nursing development work to Kerry.

Maureen Lal, Director of the ANCC Magnet Hospital® Program in the USA,

APPLICATION PROCESS



Figure 1. Application process for the Magnet Hospital® recognition. The years represent the timeline for the different phases of the application process of the Comprehensive Cancer Center and the Heart and Lung Center.

In fact, the name “Magnet Hospital” was originally chosen to describe the attractiveness of an excellently performing hospital among nurses.

also visited HUS in November. She gave a lecture on the principles and benefits of the Magnet Hospital®, met with nursing and medical directors and visited several wards to discuss nursing care with clinical nurses. She was very enthusiastic about everything she saw and heard, except perhaps the wet and dark weather.

The journey to becoming a Magnet Hospital® is a long and multifaceted (Figure 1). The journey involves the demonstration of excellent shared leadership in nursing, the structures that support nursing, professional practice and its research and development. The outcomes are excellent quality of care, satisfied patients and high levels of job satisfaction among nurses. In fact, the name “Magnet Hospital” was originally chosen to describe the attractiveness of an excellently performing hospital among nurses.

When nurses are satisfied and committed to their work, the quality of care is excellent, which also attracts patients.

The Magnet® model is the framework for nursing care throughout HUS, which means that the departments lead and develop nursing care in accordance with the Magnet® model. The Hospital for Children and Adolescents and the Psychiatry Department are also on the journey to the Magnet Hospital® recognition.

Marita Ritmala, RN, PhD, is the Director of HUS Magnet Hospital program.



*Kerry Jones on a simulation visit to the Hematology wards MEK7A and MEK7B at Triangle Hospital. Her questions are being answered by Assistant Nurse Manager **Ville Uusikartano** and Nurses **Tiina Talvitie** and **Katri Kauppinen**. The situation is followed by Advanced Practice Nurse **Kirsi Lindfors** from the Hospital for Children and Adolescents (between Ville and Tiina) as well as Advanced Practice Nurse **Aino Kormilainen** and Coordinating Nurse Manager **Virpi Medina** from the Comprehensive Cancer Center (furthest back).*

EXCELLENT LEADERSHIP

Excellent leadership requires a nursing leader who has a clear vision of leading for the best of the patients and the nursing staff. The results of excellent leadership are reflected in the nursing professionals' feeling that they are being heard, their work is appreciated, and they are supported in their role as healthcare professionals. As in the previous year, areas such as increasing the appeal of nursing as a profession, recruiting new employees, and supporting engagement to nursing work were emphasized in HUS nursing leadership in 2023. In addition, nursing leaders were heavily involved in access to care projects.

Improving access to care in Neurosurgery

Johanna Koivu, Jenni Mäntynen, Virve Ruotsalainen and Päivi Takala

Impacts of reduced access to care in Neurosurgery

Waiting list in Neurosurgery

According to the Finnish Institute for Health and Welfare (THL 2023), nearly 178,000 patients nationwide were waiting for access to non-urgent specialized health care in August 2023. Nearly 30,500 of them had been waiting for more than six months. This number had risen by 9,400 patients between April and August.

In HUS Neurosurgery, access to care has become significantly more difficult over the last few years (Figure 1). In October 2023, the number of patients waiting for more than 180 days for surgical treatment was 661.

In the care of neurosurgical patients, the difficulty of access to surgery is reflected in the different stages of the whole patient process. In order to change

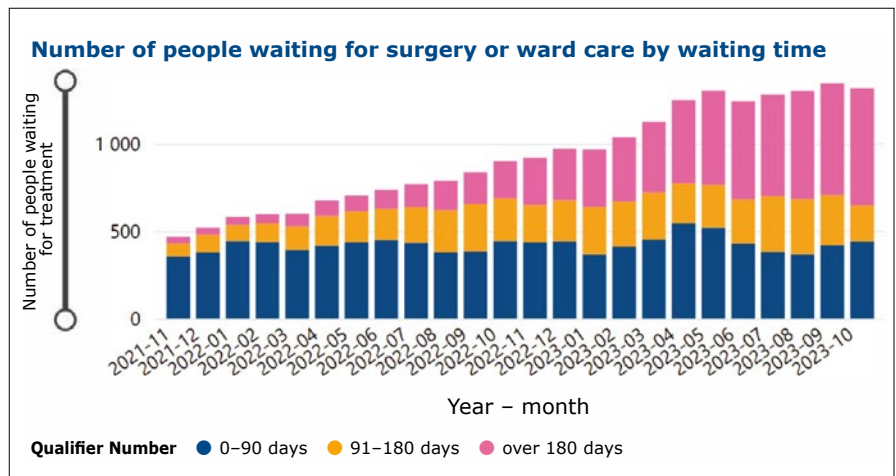


Figure 1. Power BI report on the waiting list in Neurosurgery.

the situation, several development measures have been taken over the year in cooperation between the Neurocenter and Perioperative and Intensive Care, which have resulted in a noticeable halt to the lengthening of the waiting list.

Year of changes

In Neurosurgery, the move from Töölö Hospital to Bridge Hospital in February

2023 also contributed to the difficulty in accessing care. In connection with the move, two neurosurgery wards were merged. Creating a common operating culture in the new environment is essential to ensure effortless multidisciplinary cooperation. The physical facilities are also different, which meant that the division of labor in the ward had to be rethought. New support services, such as

patient transport services and bed care, were introduced.

In addition to the move, the changes in the Neurosurgery policy and the transfer of surgery and intensive care to Perioperative and Intensive Care at the turn of the year due to HUS organizational reform made it necessary to get used to new models of cooperation. These affected the ease of cooperation in the spring.

Development measures

Development of daily operations in the new ward

In order to overcome the challenges associated with the move and to improve access to inpatient care, the HUS Development Unit provided assistance in identifying practical areas for improvement. Development Manager Kaisa Wiman and Project Manager Niina Haaksluoto visited the ward in March 2023 to observe the professionals' work (Figure 2).

Based on the observations, it was agreed to implement about 20 development measures to streamline daily operations. The aim was also to free up the nursing professionals' time for direct patient care. The development measures were related to reporting, division of labor and tasks, division of labor between different professional groups and tasks related to medical equipment logistics. The ward implemented these measures during the rest of the spring.

The development measures led to an improvement in the ease of daily operations. A follow-up observation in August 2023 showed that the development measures had freed up more time in the nurses' shifts for direct patient care.

Improving access to care

As access to elective surgical treatment becomes more difficult, changes at different stages of the patient process need to be taken into account. Due to the difficult waiting list situation, there is an increased need for outpatient clinic

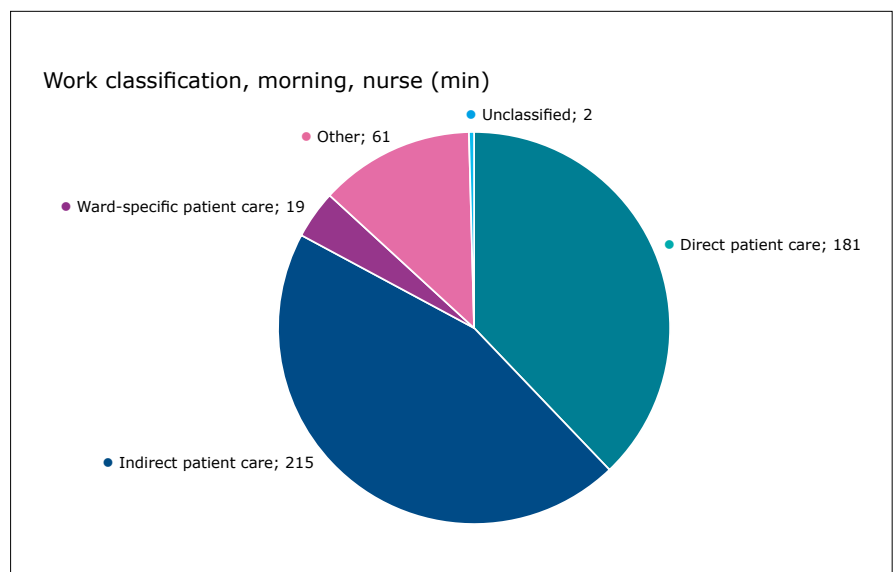


Figure 2. Work classification, morning shift, nurse (Haaksluoto & Wiman 2023).

operations. The planning of care and the preparation of patients for upcoming procedures are central to the success of patient care, and this has been taken into account in the planning of staff competence and recruitment.

Because of the rapidly lengthening waiting list, the patient care process had to be updated so that we are able to provide patients with timely care and up-to-date information. Prolonged waiting times mean, for example, an increased need for repeated imaging examinations and, if necessary, even re-evaluation of the decision to operate. In addition, we are working to meet the needs of patients who have been waiting for a long time while they wait. Our aim is to utilize the digitalization of health care to support patients while they wait for surgery. The patients want to be informed about the current waiting list situation. Many patients who have been waiting for a long time suffer from pain on a daily basis, and surgical treatment brings them a significant improvement in their quality of life. This means that we need to develop outpatient services in specialized health care so that processes also support the patients who are on the waiting list.

Patient processes have been developed in wards to reduce the workload. The development of effortless patient processes requires multidisciplinary cooperation and continuous monitoring and evaluation. In Neurosurgery, we have monitored patient flows over the past year and in particular the patient discharge process has been improved. In the autumn, the day surgery patient process was relaunched. In fast-paced patient processes and in units with a high patient flow, professional competence and effective guidelines play an important role in the success of care.

Retention power for Neurosurgery through staff development

The difficulty in accessing care is particularly evident in the Ward S7 due to the high workload. To reduce the workload, Neurosurgery has invested in strengthening the retention of nursing staff through the recruitment of additional staff, staff training measures and appropriate reward models.

The recruitment of nursing professionals for inpatient care has become more difficult in the last few years. In Ju-

ly, a dedicated nursing recruiter started working at the Neurocenter, which has allowed us to increase the visibility of nursing through various campaigns. We have also seen a higher level of applicant activity in recruitment since the beginning of autumn. HR planning needs to take into account different levels of competence, the needs for organizing care and the need for changes in the division of labor.

One important element in the retention of nurses is competence development. At the Neurocenter, we actively encourage participation in training courses offered by external providers and HUS. In addition, we offer our staff web-based initial orientation training aimed at neuroscience nurses as well as an advanced neuroscience nursing orien-

tation training. The activities of a Nursing Instructor have been a tremendous support in developing the competence of our staff. The focus of the Nursing Instructor's work has been on developing orientation, clarifying the roles of nursing professionals and developing quality nursing processes. A new orientation model is currently being developed for Neurosurgery, with the aim of providing more personalized orientation.

The competent staff in Ward S7 are committed to caring for neurosurgical patients. To reward staff, we piloted a reward model that is based on the number of hours worked in the ward in relation to the number of care days. The model has made it possible to reward committed nursing staff for their great contribution to the care of neurosurgical patients.

Johanna Koivu, RN, MHS, is a Nurse Director in Neurosurgery. Jenni Mäntynen, RN, MHS and PhD student, is the Chief Nursing Officer at the Neurocenter. Virve Ruotsalainen, RN (Master), is an Administrative Nurse Manager at the Neurosurgery Outpatient Clinic S3 and Ward S7. Päivi Takala, RN, is a Nurse Manager in charge of daily management in Ward S7.

References:

Haaksluoto N. & Wiman K. 2023. Havainnointien yhteenveto. Neurokeskus, Neurokirurgian osasto S7.

THL. 2023. Hoitopäätös erikoissairanhoidossa 31.8.2023. Tilastoraportti 56/2023 Available at: https://www.julkari.fi/bitstream/handle/10024/147423/TR56_ESH_2023_hoitop%C3%A4%C3%A4sy.pdf?sequence=1&isAllowed=y (23.11.2023)

Confidence and courage in work ability management – Psychiatry's experiences with Keva's Work Ability Management 360 service

Päivi Soininen, Susann Martin, Päivi Nurmio and Janna Koikkalainen

Background

The public sector pension institution Keva sought partners for the HUS Work Ability Management 360 service. The Work Ability Management 360 service provides a picture of the current state of work ability management and the strategic nature of work ability management. The service also provides information on the strengths and improvement areas in work ability

management and development proposals for strengthening work ability management and managing disability costs. At HUS, the Psychiatry Department took an interest in the project because of the emphasis on work ability support, reducing sick leave days and occupational health and safety issues in management, but also because of the nature of the activities. There are about 2,600 professionals working in Psychiatry. The basic task is

demanding psychiatric care: about 50% of the work is outpatient care (examination of patients and psychotherapeutic work) and 50% is inpatient care. Involuntary treatment puts a strain on the staff, both physically and ethically.

The aim of the project was to raise awareness of work ability management, the work ability management possibilities offered by HUS, its financial impact and impact on the employees themselves.

The project started in autumn 2022 with a project presentation by Keva (**Marika Malmström** and **Susanne Heikinheimo**). The project managers were Chief Nursing Officer **Päivi Soininen**, Labor Protection Manager **Susann Martin**, Chief Occupational Health Physician **Päivi Nurmio**, Rehabilitation Planner **Janna Koikkalainen** and HR Manager **Monika Snellman**. The participants in the project included the top and middle management of Psychiatry, first-line supervisors, staff representatives, occupational safety representatives, occupational health representatives and the HR Manager. The supervisors took a survey (n= 61 responses, response rate around 50%) in November 2022. The results of the survey were used to draw up a development plan, which was presented at a workshop in March 2023.

The background material for the project was HUS Henkilöstökertomus, Työterveyshuollon toimintasuunnitelma and Psykiatrian tilastot as well as the publications "Anna ja saa tukea – Työkyvyntukiohjelma", "HUS Työhyvinvointi-

ohjelma vuosille 2022-2025 – Terveenä töihin, terveenä kotiin", "Sairauspoissaoloa korvaava työ" and "Työkyvyn tukiprosessikaavio".

Key observations and development proposals

The following observations and development proposals were made during the implementation of the project:

- A. It is difficult to find/organize work suitable for employees with partial work ability (i.e. to find another role or to adapt their own work).
- B. HUS has a good model for compensatory work, which is not actively used, although compensatory work can be found even in ward work. The problem is that it is not offered as an alternative to sick leave.
- C. Intensive support processes take too long and have poor results; from the point of view of first-line supervisors, occupational health consultation was perceived as ineffective and the work ability assessment process slow.

D. Supporting the staff's ability to cope:

- Ethical burden, threat of violence and lack of resources are emphasized in the work.
- There is a need for proactive measures, such as a work ability discussion without the employee going on sick leave.
- Attention needs to be paid to the personal well-being of first-line supervisors, who need support from their own superiors, HR and occupational health. Courage is needed to talk about work ability as well as to plan and decide on flexibilities in work, in order to support the staff's ability to work at an early stage.

E. The reporting data on, for example, the number and costs of sickness absences and the amount of compensatory work will be utilized.

Experiences and results

The engagement and commitment of first-line supervisors and management in a multidisciplinary way was excellent

IMAGE: KEVA





at the different stages of the project. The project was discussed not only at the project meetings but also in the management teams, and the indicators set for the project were monitored (sick leaves, overtime, costs of extra shifts, compensation for urgent work, Seure operating costs), which were also indicators for the HUS “Tuottavuushanke” (productivity project), which this work ability management project was a part of.

Awareness of the costs of sick leaves increased during the project. According to Keva’s calculation, the cost of one day of sick leave is about €420.

There was also an increase in awareness of alternatives following the HUS guidelines, such as compensatory work, and an interning MHSc student made a presentation to the Psychiatry Department about compensatory work in the department. Examples include phone calls, contacts with follow-up care providers and relatives, medication orders, conducting web-based training, updating guidelines and orientation for new staff.

It was also important to cooperate

with the occupational health services and identify challenges and areas for improvement in maintaining occupational health.

When an employee’s work ability deteriorates, their supervisor should hold the well-being at work discussions in accordance with the guideline, record them and offer the employee compensatory work. According to the HUS guideline, “compensatory work for sick leave can be used in situations where work ability is impaired only slightly and for a short period of time due to illness or accident. For each absence due to illness or accident, the first-line supervisor must assess the possibility of compensatory work.”

Based on the reporting data, it was found that the number of sick leave days decreased but the amount of compensatory work did not increase. This is probably due to the fact that agreed compensatory work is not always recorded in the electronic system in the “Työhyvinvointimoduuli” (workplace wellbeing module) and therefore unrecorded compensatory work is not reflected in the report.

Conclusion

In order for the project to be successful, project leadership and the appointment of responsible persons, the commitment of the management team to the project (top and middle management) and the provision of information about the project to first-line supervisors are important. The Teams application provided technical support for the success of the project, allowing for engagement and group work so that each participant could be heard. Many thanks to the Psychiatry supervisors for their multidisciplinary commitment in the events.

Päivi Soininen, PhD, Chief Nursing Officer, HUS Psychiatry, Susann Martin, MHSc, Labor Protection Manager, Group Administration, Päivi Nurmio, Chief Occupational Health Physician, Lic. Med., HUS Occupational Health, Janna Koikkalainen, Rehabilitation Planner, HUS Occupational Health.

StepIN model to support the orientation of new staff

Susanna Virrankoski, Helena Raappana and Johanna Jalkanen

Background to the project

In 2023, the Musculoskeletal and Plastic Surgery Department developed the StepIN model to support the orientation of new staff as the problems with patients' timely access to care were due to a lack of availability of nursing staff. Staff turnover was high, and the perceived stressfulness of the orientation process slowed down the active recruitment of new staff. The idea of a new type of orientation in a group setting was introduced. During the development phase, a survey aimed at the nursing staff showed that the lack of language skills of learners, time pressure, orientation alongside the preceptor's own duties, the constant rush, the large number of things to be taught and the uncertainty of the preceptor were perceived as challenging and stressing in the orientation process.

The aim of using the StepIN model is to attract new nursing professionals into

The aim of using the StepIN model is to attract new nursing professionals into the workforce, which will help to ensure patients' timely access to care by increasing the number of hospital beds available.

the workforce, which will help to ensure patients' timely access to care by increasing the number of hospital beds available. All new employees will be ensured a uniform initial orientation, an individualized orientation path will be created for nurses from different backgrounds coming to specialized health care, and a structured and replicable group orientation model will be developed. This will

increase workplace attraction and retention as well as long working relationships. By addressing the stressors identified in the survey, the aim is to increase job satisfaction and comfort.

Planning and implementation of the project

Participants in the planning and implementation of the project were Chief Nursing Officer **Terhi Mäkelä**, Nurse Director **Susanna Virrankoski**, Chief Physician **Jyrki Kankare**, Nurse Director **Liisi Romppanen**, Advanced Practice Nurse **Anne Salonen**, Nurse Manager **Johanna Jalkanen**, Nurse Manager **Arja Sihvo**, Clinical Nurse Educator **Netta Pohjamies**, Assistant Nurse Manager **Minna Tikkanen** and Nursing Instructor **Kirsi Pekkala** from Musculoskeletal and Plastic Surgery, Recruiter **Katja Kiviranta** from Operative Services and Senior Planning Officer **Helena Raappana** from the Abdominal Center.

Two nurses interested in orientation and its development were recruited to the StepIN unit for expert tasks. The unit also sought four learners whose Finnish language skills at baseline were A1.2–B2.1 according to the Common European Framework of Reference for Languages. The activity started on 14 August 2023 in the orthopedic-traumatological ward S5A of the Bridge Hospital, where back surgery patients and bone tumor patients are treated. To ensure uniform orientation, daily and weekly programs were created to monitor and support it. The StepIN model uses orientation levels to verify the progress of the orientation

Raija Kontio among the 100 European influencers in nursing science honored by Sigma

Sigma is a worldwide nursing organization founded in the United States in the 1920s, which now also has chapters in Europe. The European chapters have selected 100 European nursing influencers to celebrate 100 years of outstanding nursing work. Among them are eight Finnish influencers, one of whom is **Raija Kontio**, Docent, Chief of Profit Area at HUS. She is especially known as a developer of nursing management. Warmest congratulations on the selection!

Reference: Turun yliopisto 2023. Hoitotieteen laitos. Ajankohtaista 14.8.2023. <https://www.utu.fi/fi/yliopisto/laaketieteellinen-tiedekunta/hoitotieteen-laitos>

The new type of orientation has increased the attractiveness of the unit, and the number of nurses will be increased from four to eight and the number of hospital beds gradually from two to eight.

Tehy selects Kirsi Heino as Nursing Leader of the Year

Every year, Tehy selects a distinguished nursing leader within the organization. In 2023, the award was given to **Kirsi Heino**, Chief Nursing Officer at the HUS Department of Gynecology and Obstetrics. The selection was proposed by Tehy's labor union branch at the Women's Hospital. Among the things listed in the award criteria were that, as a supervisor, Kirsi Heino is respected by the staff, has contributed to healthcare as well as developed nursing care and good practices together with the staff. Warmest congratulations on the award!

Reference: Tehy 2023. Ajankohtaista 11.5.2023. <https://www.tehy.fi/fi/ajankohtaista/vuoden-tehylainen-johtaja-kirsi-heino>

and the readiness of the learner to move on to ward work. The maximum length of the orientation period was set at 12 weeks and the language proficiency requirement on entry to the unit was set at level A2. Learners are recruited on a continuous basis, taking into account individual orientation periods so that there is a sufficient number of learners at all times. The multidisciplinary staff of the unit were informed of the change and are actively consulted in the further development of the new activities.

The StepIN unit has developed a new group orientation model using HUS orientation materials and peer learning.

Investments have been made in Finnish language training, and learners at different stages support each other well. The S5A ward's staff has been closely involved in the development of the new activity and in the future, through the StepIN unit, a similar initial orientation will be given to all new employees before they move to the different wards for normal patient work.

The orientation following the StepIN model is expert work, where the length of the orientation period is determined by the learner's previous skills and competences and the development of language skills. The activities will help to alleviate

the burden of orientation on staff, make nursing more attractive by providing specialized activities for orientation and give nurses interested in orientation the opportunity to work as experts and develop their skills. The new type of orientation has increased the attractiveness of the unit, and the number of nurses will be increased from four to eight and the number of hospital beds gradually from two to eight. After completing the orientation period, employees will move to a ward for normal patient work, where they will continue their orientation through mentoring.

A new survey will be carried out in spring 2024 to find out the staff's experiences of the new model for providing orientation to future colleagues. The job satisfaction and commitment to the workplace of those who have undergone the StepIN orientation will be monitored. The group orientation model will be documented and, as experience is acquired, support will be provided for launching new StepIN units.

Susanna Virrankoski, RN (University of Applied Sciences), M.Div. is a Nurse Director in the Musculoskeletal and Plastic Surgery Department, Helena Raappana, RN (Master), is a Senior Planning Officer in the Abdominal Center and Johanna Jalkanen, RN (Master), is a Nurse Manager in the Musculoskeletal and Plastic Surgery Department.

The Psychiatric Emergency Care receives the Finnish Nurses' Association's Good Work Community special mention

On International Nurses Day on 12 May 2023, the Finnish Nurses' Association gave a special mention to the Good Working Community, among others. One of these awards went to the HUS Psychiatric Emergency Care at Haartman Hospital. The application described some of the strengths of the unit, including unpacking and dealing with emotions and experiences caused by incidents during shifts, supporting colleagues and paying attention to others' workloads. In addition, the application stressed the importance of substance-competent supervisory work for the well-being of the work community and the individual responsibilities of each member of the work community. Congratulations on the recognition!

Reference: Sairaanhoidajat 2023. HUS psykiatrian päivystys sai Hyvä työyhteisö -erityismaininnan. Uutinen 8.5.2023. <https://sairaanhoidajat.fi/hus-psykiatrian-paivystys-sai-hyva-tyoyhteiso-erityismaininnan>

Chief Nursing Officers of the profit areas and departments

In 2023, HUS was divided into six profit areas. The profit areas and their respective departments and chief nursing officers (31 December 2023) are listed below.

Brain Center	Services for Women, Children and Adolescents	Non-operative Services	Operative Services	Center for Emergency, Perioperative, and Intensive Care Medicine	Diagnostic Center
Profit area 1	Profit area 2	Profit area 3	Profit area 4	Profit area 5	Profit area 6
Chief Nursing Officer Maarit Virta-Helenius	Chief Nursing Officer Katja Koskinen	Chief Nursing Officer Taina Ala-Nikkola	Chief Nursing Officer Anna-Maija Kaira	Chief Nursing Officer Siru Haltsonen	Chief Nursing Officer (acting) Helena Kolehmainen
Departments:	Departments:	Departments:	Departments:	Departments:	Departments:
Neurocenter Chief Nursing Officer Jenni Mäntynen	Gynecology and Obstetrics Chief Nursing Officer Kirsi Heino	Internal Medicine and Rehabilitation Chief Nursing Officer Eija Rissanen	Head and Neck Center Chief Nursing Officer Nina Fagerholm	Emergency Medicine and Services Chief Nursing Officer Nina-Maarit Lehtikoinen	Radiology and Pathology
Psychiatry Chief Nursing Officer Päivi Soininen	Children and Adolescents Chief Nursing Officer Inger Mäenpää	Heart and Lung Center Chief Nursing Officer Virpi Sneck	Musculoskeletal and Plastic Surgery Chief Nursing Officer Terhi Mäkelä	Perioperative and Intensive Care Chief Nursing Officer Tarja-Leena Neffling	Physiology, Genetics and Preanalytics
		Inflammation Center Chief Nursing Officer (acting) Marja-Liisa Packalén	Comprehensive Cancer Center Chief Nursing Officer Vuokko Kolhonen		Chemistry and Microbiology
		Internal Medicine Services in Local Hospitals Chief Nursing Officer Taina Ala-Nikkola	Abdominal Center Chief Nursing Officer Tarja Palomaa		
			Operative Services in Local Hospitals Chief Nursing Officer Anna-Maija Kaira		

Nursing councils at the heart of shared governance structures

The shared governance structures in HUS nursing enable nursing staff working in direct patient care to define the standards, practices and quality of patient care together with nursing supervisors, leaders and specialists. At the heart of this work are nursing councils, both at unit level and at HUS level.

HUS-level nursing councils based on multi-professional expertise support the operations of unit-based councils. The HUS-level nursing councils have 18 members each, selected upon application for three-year terms. The council members in 2023 are presented in Appendix 1.

HUS to partner in a project to find solutions to the nursing shortage

HUS will be partnering in the Laurea University of Applied Sciences project "EMERIT – Emerita ja Emeritushoitajat voimavarana hoitajapulassa" (EMERIT – Emerita and Emeritus Nurses as a Resource in the Nursing Shortage). The aim of the project is to develop an EMERIT model to address the nursing shortage in order to extend the careers of end-of-career and retired nurses as well as to promote the well-being of the work community and a positive organizational culture. In addition to EMERIT, a complementary career planning model and a continuous learning model will be developed.

The goals of the project are:

1. to develop the EMERIT nurse model to extend the careers of experienced nurses and to facilitate the transition from retirement to work,
2. to develop an age management model to identify the special competence of experienced nurses and the optimization of work tasks to extend their careers, and
3. to strengthen the competences of end-of-career and retired nurses transferring back to work as part of their orientation by means of e-learning.

The project will result in a change of mindset that values the skills and experience of nurses approaching and returning from retirement and allows for the individual customization of work.

The project is funded by an EU structural fund, and its partners are HUS, Keusote, Keva, SuPer and Tehy. The implementation period of the project is 01/01/2023–30/04/2025.

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STRUCTURAL EMPOWERMENT

The most important asset of a successful organization is its staff. HUS encourages its employees to train continuously, allowing them to grow in their profession in accordance with the professional career model.

Improvement in the job satisfaction of HUS nursing staff

Kristiina Junttila

In the Magnet Hospital® model, the results of patient care, personnel and the entire organization are at the center of all activities. Since 2015, the job satisfaction of HUS nursing staff has been assessed with a separate survey in all HUS operating areas. Since 2018, data has also been collected from other university hospitals and some wellbeing services counties as part of the co-operation in the consortium for the national benchmarking of nursing-sensitive outcomes (HoiVerKe).

The goal set in the HUS Nursing Strategy is that, in 2023, the job satisfaction of all HUS nursing staff will be better than in 2022. Furthermore, the Magnet Hospital® accreditation efforts require that the results of the different factors of job satisfaction of an individual work unit are better than the average national results of the same type of work unit.

The survey measuring nurses' job satisfaction is carried out annually by the HUS Nursing Research Center (responsible person is Director **Kristiina Junttila**). The survey is addressed to all HUS nursing staff by sending it to their work

email address. In 2023, the survey was conducted between April and May and the results were reported on the HUS Power BI reporting portal in September.

Since 2018, the survey has been a modified version of the Nurse Engagement Survey (NESplus), which contains 49 statements, the responses to which are summarized as eight sum variables (factors of job satisfaction, Figure 3). In addition, the respondents' level of

engagement is measured through four statements:

- I would recommend this organization to my friends as a great place to work
- This organization inspires me to perform my best
- I am likely to be working for this organization three years from now
- I am willing to put in a great deal of effort in order to help this organization succeed.

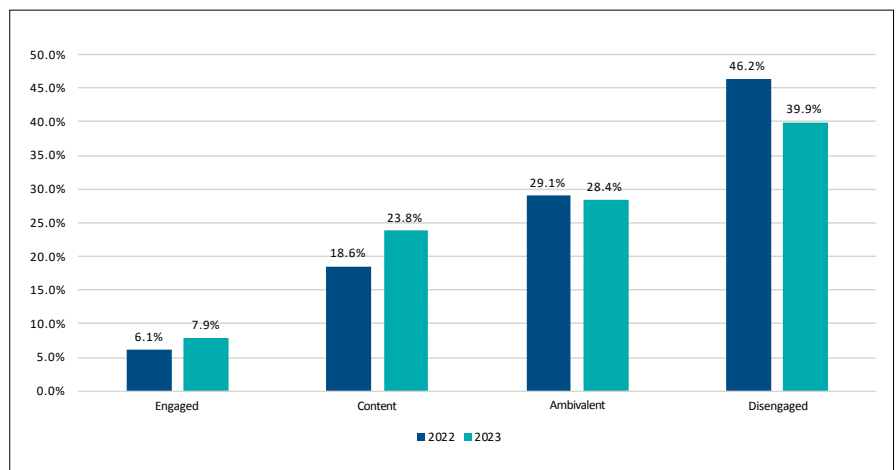


Figure 1. Level of engagement of HUS nursing staff in 2022 and 2023 (entire HUS, all respondents)

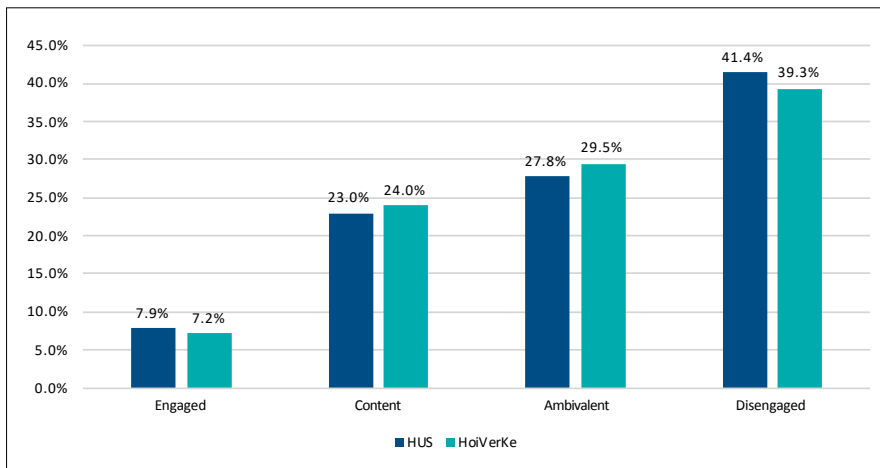


Figure 2. Level of engagement at HUS compared to national results in 2023 (comparison includes assistant nurse managers, nurses, midwives, paramedics, radiographers (not diagnostics), nurse managers, nurse directors, advanced practice nurses and clinical nurse educators as well as nursing staff who have completed secondary level qualifications).

The level of engagement is classified into four categories: “engaged”, “content”, “ambivalent”, and “disengaged”. In order for the respondent to be engaged, the respondent must respond at least “agree” (value 5 on a scale of 1 to 6) to all four statements mentioned above, and also “fully agree” to at least two statements (value 6).

In 2023, 13 organizations participated in the NESplus data collection for the national benchmarking of nursing-sensitive outcomes (HoiVerKe). The comparison included responses (N = 8,389) from assistant nurse managers, nurses, midwives, paramedics, radiographers (not diagnostics), nurse managers, nurse directors, advanced practice nurses and clinical nurse educators, as well as

nursing staff who have completed secondary level qualifications. At HUS, the response rate was 24%, which is slightly lower than in the previous year (27%).

HUS’s results for 2023 will next be examined in relation to HUS’s results for 2022 and in relation to the national average for 2023. Work unit-specific results in relation to national averages are monitored separately at each work unit. In the case of HUS’s internal results, the material included the responses of the entire nursing staff. Comparison with national averages is based either on the entire comparison material or the responses from nurses and equivalents.

Figure 1 shows the level of engagement of HUS nursing staff in 2022 and 2023. There are significant increases in

the percentages of engaged and, in particular, content respondents, while the percentage of ambivalent respondents is almost unchanged and the percentage of disengaged respondents has clearly decreased.

The level of engagement of the nursing staff included in the national benchmarking compared to national results in 2023 is shown in Figure 2. The share of engaged respondents at HUS is slightly above the national (HoiVerKe) average. In terms of the disengaged, HUS result is a few percent poorer than the national average.

Figure 3 shows the mean values of factors of job satisfaction at HUS and nationally in 2023. The HUS results are better than the national (HoiVerKe) average for all factors.

Conclusions:

- The share of engaged nursing staff at HUS in 2023 is almost two percentage points better than in 2022, so the goal of the HUS Nursing Strategy has been met. Also noteworthy are the clear decreases in the percentages of the ambivalent and disengaged (almost 6% on average).
- HUS results were better than the national average for all factors of job satisfaction.
- In order to ensure the reliability of the results, effort should be made to increase the response rate in HUS and nationally.

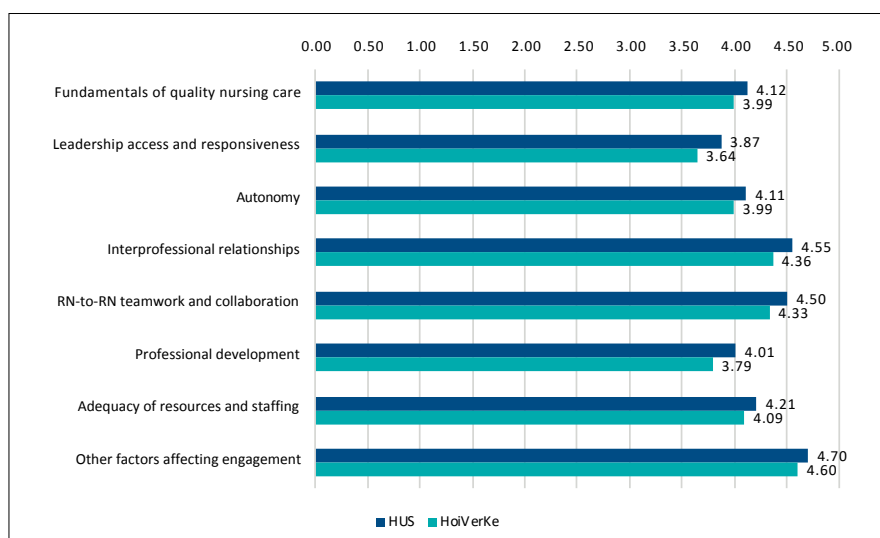


Figure 3. The mean values of factors of job satisfaction at HUS and nationally in 2023 (comparison includes nurses and equivalents).

Kristiina Junttila, RN, PhD, Docent, Professor h.c., is the Director of the HUS Nursing Research Center NRC.

Learning together at the New Children's Hospital

Satu Kiesvaara and Annika Mutanen

In February 2023, the Vuori ward of the New Children's Hospital started the "We Learn Together" (Yhdessä opimme, YO) rounds. They were created as one of the answers to today's big question about staff attraction and retention: how to increase the competence and job satisfaction of the whole team caring for a patient. In the Vuori ward, the situation was familiar to many departments where a large amount of know-how is lost when a long-time expert or a nurse who has worked for there for a few years leaves.

The rounds break the habitual pattern, where each professional group learns and practices among themselves. They bring people from different professional groups together to learn from each other and to learn together. The "We Learn Together" rounds increase the skills of the whole team by increasing knowledge of treatment methods and the roles and responsibilities of each actor.

Pediatric Surgeon **Annika Mutanen** suggested this approach to the first-line supervisors in the Vuori ward, who immediately responded enthusiastically as it seemed to meet the needs of many new and even more experienced nurses. The idea of the study sessions is to go through a patient's treatment at the bedside in a multidisciplinary way. A doctor in the specialty concerned introduces the topic, and a discussion is held together on the different professional groups' perspectives and observations on the patient's treatment. Any member of the department staff who wishes to take part can do so. All questions are welcome and appreciated. The name of the approach refers to learning together through shared discussion. The idea is that all participants learn from each other and together. Initiating the activ-

ity does not involve any additional costs, and no changes to the daily operations of the department are required.

The "We Learn Together" rounds have covered a wide range of diagnoses typical for the ward and their treatment. Participants have included nurses, nursing students, specializing physicians and special staff. The patients in the Vuori ward are mainly babies and toddlers, so the parents of the patients have often been involved. The leader of the round has introduced and led the discussion. The different professional groups have contributed their views and experiences, and the experiences of the patients' parents have

Learning together brings the team together and increases everyone's skills, which in turn increases patient safety and ensures consistency of care.

been carefully listened to. The duration has varied from half an hour to an hour, depending on the topic and the amount of discussion. To enable as many people as possible to participate, the timings of the rounds are announced in advance by e-mail in the ward's weekly newsletter, at the morning meeting of the day and in the patient list, and the start of the round is announced throughout the ward.

The "We Learn Together" rounds have become very popular among nurses, students and specializing physicians alike. New nurses and students in particular gain a lot of new practical

knowledge from them, but those who have been working for a long time at the department have also said that they always learn something new. Learning together brings the team together and increases everyone's skills, which in turn increases patient safety and ensures consistency of care. In the Vuori ward, the activity initially focused on pediatric surgery and then expanded to cardiology and pediatrics.

The Vuori ward collected feedback on the "We Learn Together" rounds during September 2023, when the activity had been running for about six months. Feedback was collected anonymously using a paper form. A total of 16 responses were received, all of which were from nursing staff. The summary of the feedback was as follows: 1. the feedback was quite positive and encouraging; 2. the majority of the respondents had already participated in the study sessions 2–5 times; 3. the atmosphere was perceived as conducive to learning; and 4. the topics of the study sessions were perceived as useful in personal work. The spontaneous verbal feedback from all professional groups has also been along the same lines.

In the Vuori ward, the YO tours fit well with the rest of the ward's activities and the rounds organized once or twice a week have already become part of the normal weekly program. The positive feedback has also inspired other departments to take up the activity at the New Children's Hospital.

Satu Kiesvaara, RN, MHSc, is a Nurse Manager at the ward Vuori of the New Children's Hospital. Annika Mutanen, Specialist in Pediatric Surgery, Docent, is a pediatric surgeon at the New Children's Hospital.

The learning path of a clinically specialized nurse

Maria Ameel and Annukka Laurila-Salakka

Nursing education underwent a major transformation in the 1990s, when the old post-secondary education was transformed into a university of applied sciences degree, and at the same time the specialized nurse's degree was abandoned. Universities of applied sciences can define the contents of basic degrees relatively freely, which is reflected, for example, in the great variation in the number of credits in psychiatry and mental health work. The responsibility for ensuring competence and further training lies largely with the service provider organizations.

The problem has also been recognized by the ministries, with the Ministry of Social Affairs and Health and the Ministry of Education and Culture having published studies in recent years on fields of specialization and the implementation and planning of studies. In HUS Psychiatry, the nurses' post-graduate learning takes place on the job, in training, in national and international networks, and through various work support measures and work rotations. During 2023, we have continued to offer joint post-orientation training modules in nursing in Psychiatry, and collaboration with educational institutions has also been integrated into them. We have followed the example of specialization training in psychiatry and mental health work in different countries as well as nursing competence descriptions identified in literature. The aim is for us to have evidence-based, mutually defined learning contents and structures that support clinical specialization.

An example of a study module by the Psychiatry Department is the "Hoitajavastaanotto psykiatrisen poliklinikalla"

(HOVA, nursing reception in a psychiatry outpatient clinic) training, which aims to equip nurses for an independent reception in a psychiatry outpatient clinic. The purpose of the training is to increase and strengthen nurses' understanding of nursing care as part of multidisciplinary care in the outpatient clinic and to support their ability to provide nursing care independently. The training aims to help nurses to understand the role of nursing and the responsibilities and duties involved in an independent nursing reception in a psychiatry outpatient clinic. The training is carried out in cooperation with the Metropolia University of Applied Sciences and amounts to two credits. Those who complete the training receive a certificate of completion from the University of Applied Sciences and can make use of the training not only in their clinical work but also in any further studies they may undertake at various institutions.

The content and structure of the HOVA training was piloted in January–February 2023 as classroom-based training, after which the training was built in a Moodle environment. The planning was carried out by a working group with strong representation from the target group of the training. The online implementation of the HOVA training will be evaluated in October–December 2023, after which it will be opened on the Harppi learning system for all nurses working in psychiatry outpatient clinics. The training is intended to be completed at the beginning of the employment relationship, approximately 1–3 months after starting work, and nurses may flexibly start the online training to suit their orientation plan. Demonstration of the training will be provided electroni-

cally as part of the nurse's own work, by writing a nursing summary. At the same time, it will be possible to standardize the recording of nursing care and ensure the quality of nursing care also in this respect. In 2024, similar training will be provided in an inpatient ward environment.

The clinical specialization module also includes competence in psychotherapeutic interventions, competence in family and network work, and psychiatric competence (including diagnostics and the characteristics of outpatient care). With regard to psychotherapeutic intervention modules, several pilot training courses were carried out in the Psychiatry Department between 2021 and 2023 in connection with the implementation of the model "Terapiat etulinjaan" (front-line therapies), which have been used as a basis for a multidisciplinary learning model using digital learning platforms and intensive methodological guidance. A learning module on the basics of psychiatric diagnostics has also been piloted in a multidisciplinary way.

Feedback is collected on all training modules from participants and first-line supervisors during and after the training. The aim is for HUS Psychiatry to support staff learning in a variety of ways. With regard to nursing, we are involved in promoting a uniform definition of the competence of a clinically specialized nurse at national level.

*Maria Ameel, RN, M.P.S., PhD,
Development Manager, HUS Psychiatry,
Administration and Annukka Laurila-
Salakka, RN, MHSc, Advanced Practice
Nurse, Nursing, HUS Psychiatry,
Administration*

Strengthening competences with the support of a nursing instructor

Satu Rauta and Tii Kouvalainen

The general job description of a nursing instructor was approved in HUS in February 2022. It was developed under the leadership of chief nursing officer **Taina Ala-Nikko-la** by a working group, which was represented by chief nursing officers from different departments, advanced practice nurses and nursing instructors from different operating environments. The eligibility criteria for nursing instructors were also defined. In connection with the job description and its publication, the title of nursing instructor was officially introduced. The job description can be found on the page of “Opetushoitajien verkosto” (nursing instructors’ network) (Potilaan hoito > Hoitotyö > Asiantuntijaverkostot) in Eetteri.

The aim of the multifaceted role of the nursing instructor is to contribute to ensuring the quality of patient care at

the unit by strengthening the high level of competence of the staff and thus supporting staff retention. The purpose of the post is to support the provision of high-quality and safe, evidence-based patient care in the nursing instructor’s own unit, in line with the HUS strategy. In addition, the aim of the post is to ensure and develop the unit’s orientation and competence and to ensure evidence-based development of work, methods and processes. The main tasks of nursing instructors are presented in Figure 1.

While the job description was being developed, a support program for professional transitions of nursing instructors (Ammattiuralla siirtymisen tuki, ASTU) was designed, based on the tasks in the job description. The support program was piloted from 05/2022 to 02/2023, and all HUS nursing instructors at the time were offered the opportunity to

participate as their valuable experience was to be utilized in producing the content of the program. A total of 69 nurses enrolled in the pilot, 31 of whom completed the program in full and 23 in part. Providing feedback at the end of the program was part of the completion criteria. Ninety-one percent of the respondents found the program useful as a whole. Ninety-four percent felt that they had acquired the skills to work as nursing instructors, and 89% felt that their skills had increased.

At present, new nursing instructors can join the ASTU support program, which helps them to familiarize themselves with the very diverse duties of nursing instructors. More information on this topic can be found on the ASTU page (Potilaan hoito > Hoitotyö > Voimaannuttavat rakenteet).

While developing the job description, the need for the networking of nursing instructors was also identified, and the HUS-wide nursing instructors’ network started its activities on 1 February 2022. The Chair of the network is Hanna-Leeana Melender, Director of Nursing Excellence. In November 2023, the network had 140 members.

The aim of the nursing instructors’ network is not only to support the professional activities and competence of nursing instructors, but also to provide peer support for them and enable them to share their knowledge and expertise. To support this, a platform called “Opetushoitajien konsultaatioalusta” (nursing instructors’ consultation platform) was designed and built into Teams. Each member of the network enters their own competence profile on the platform and defines their competence under the

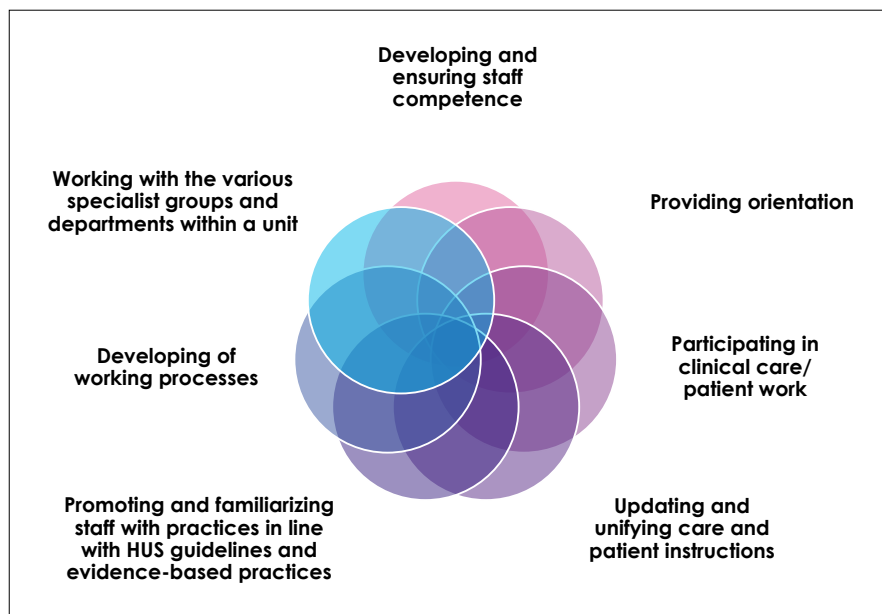


Figure 1. The main tasks of nursing instructors (Image: Tii Kouvalainen)

headings of ten jointly agreed competence areas. These include clinical nursing, health promotion and information technology. The consultation platform utilizing SharePoint lists, databank data and Power BI reports has been built in collaboration with a representative from IT Management. The platform allows the user to perform various searches and find the required professional based on a person, facility or competence search.

As the nursing instructors' diverse competences are widely utilized and the consultation possibility is taken advantage of, the number of completed consultations and the time spent on them are monitored. For this reason, the platform "Opetushoitajien toteutuneet konsultaatiot" (nursing instructors' completed

consultations) was developed for Teams and launched in autumn 2023. It shares the same features and competence areas as the platform "Opetushoitajien konsultaatioalusta". In the future, it will be interesting to monitor the number of completed consultations and their distribution across the different competence areas.

In addition, the representatives of the network have participated in the update of the model Näyttöön perustuva toiminta (NPT, evidence-based practice), where tasks related to evidence-based practice were defined for the nursing instructors. The latest model can be found in Eetteri (Potilaan hoito > Hoitotyö > Erinomainen johtaminen > HUS hoitotyön asiantuntijaryhmät > TuNTo Hoitotyön tutkimuksen ja näyttöön pe-

rustuvan toiminnan asiantuntijaryhmä > Linkit).

There is a constant need for nursing instructors at the units. In November 2023, there were 61 participants in the ASTU support program for nursing instructors. The program provides nursing instructors with support for their tasks in the areas of job development, evidence-based practice, the strengthening and certification of staff competences as well as orientation.

Satu Rauta, RN, PhD, is an Advanced Practice Nurse in Internal Medicine Services in Local Hospitals, at Lohja Hospital. Tii Kouvalainen, RN (Master), is an Advanced Practice Nurse in Perioperative and Intensive Care.

Recognition of excellent nursing

Our warmest congratulations to the members of our staff for their meritorious performance in 2023!

2023 Nursing Professionals

The Nursing Professionals of the Year 2023 (nursing, rehabilitation and diagnostic professionals) were announced and honored on 15 December 2023.

- **Jenni Ilkka**, Nurse, Emergency Medicine and Services
- **Kristian Kemppi**, Paramedic, Emergency Medicine and Services
- **Jaana Kuusinen**, Nurse, Emergency Medicine and Services
- **Pasi Lehtoranta**, Nurse, Emergency Medicine and Services
- **Pia Eskola**, Laboratory Technician, Diagnostic Center
- **Marianne Niemelä**, Laboratory Technician, Diagnostic Center
- **Inkeri Peltonen**, Radiographer, Diagnostic Center
- **Ella Haapalehto**, Nurse, Children and Adolescents
- **Hanna Hongell**, Practical Nurse, Children and Adolescents
- **Tiina Matikainen**, Nurse, Children and Adolescents
- **Marja Orakoski**, Assistant Nurse Manager, Children and Adolescents
- **Riikka Hagner**, Nurse, Perioperative and Intensive Care
- **Milla Hollming**, Nurse, Perioperative and Intensive Care
- **Eve Junntila**, Nurse, Perioperative and Intensive Care
- **Laura Kivi**, Nursing Instructor, Perioperative and Intensive Care
- **Turkka Miettinen**, Orthopedic Cast Technician, Perioperative and Intensive Care
- **Sile Iveson**, Nurse, Internal Medicine Services in Local Hospitals
- **Tuula Jalo**, Nurse, Internal Medicine Services in Local Hospitals
- **Pirkko Thürkauf**, Nurse, Operative Services in Local Hospitals
- **Laura Haapasalo**, Nurse, Gynecology and Obstetrics
- **Mikko Tarvonen**, Midwife, Gynecology and Obstetrics
- **Tanja Savimaa**, Assistant Nurse Manager, Neurocenter
- **Johanna Aholainen**, Nurse, Psychiatry
- **Regiina Kabanen**, Nurse, Psychiatry
- **Jessica Kandelin**, Nurse, Psychiatry



The 2023 Nursing Professionals of the Year at the awards ceremony.

- **Annikka Laine**, Rehabilitation Instructor, Psychiatry
- **Jari Paavola**, Assistant Nurse Manager, Psychiatry
- **Merja Rousku**, Nurse, Psychiatry
- **Anu Kaijansinkko**, Nurse, Head and Neck Center
- **Krista Mattila**, Dental Nurse, Head and Neck Center
- **Kaarina Heikkinen**, Physiotherapist, Internal Medicine and Rehabilitation
- **Jenni Satta**, Practical Nurse, Internal Medicine and Rehabilitation
- **Elina Perttilä**, Nursing Instructor, Heart and Lung Center
- **Pirjo Belghiti**, Radiographer, Comprehensive Cancer Center
- **Katja Lindqvist**, Practical Nurse, Musculoskeletal and Plastic Surgery
- **Saija Uuskoski**, Nursing Instructor, Inflammation Center
- **Marja Elina Nieminen**, Nurse, Abdominal Center
- **Anne Sainio**, Assistant Nurse Manager, Abdominal Center

Academic merits and degrees in 2023*

The **HUS golden honorary badge of nursing science** is presented at the Science Day to those who have defended their Doctoral Thesis in nursing science or health science by that date. The **silver badge** is awarded to those who have completed a Master's degree in health sciences or a similar field at a university, and the **bronze badge** is awarded to those who have completed a Master's degree at a university of applied sciences. The HUS honorary badge of Nursing Science was designed by the artist **Gua Vainio**.

Doctoral degree (golden honorary badge of nursing science):



- **Kirsi Lindfors**, Quality Manager, Children and Adolescents (Tampere University)
- **Kiki Metsäranta**, Nurse Manager, Psychiatry (University of Turku) (the Golden Badge will be presented in 2024)
- **Satu Poikajärvi**, Nurse Director, Perioperative and Intensive Care (University of Turku)
- **Tiia Saastamoinen**, Nurse, Perioperative and Intensive Care (University of Eastern Finland)
- **Tiina Talja**, Advanced Practice Nurse, Psychiatry (Tampere University)
- **Leena Tuominen**, Advanced Practice Nurse, Comprehensive Cancer Center (University of Turku)

Master's degree from a university (silver honorary badge of nursing science):



- **Eveliina Ahokas**, Nursing Instructor, Head and Neck Center (Åbo Akademi University)
- **Kati Appelberg**, Nurse Manager, Perioperative and Intensive Care (University of Eastern Finland)
- **Petra Blom**, Nurse Manager, Psychiatry (University of Eastern Finland)
- **Satu Hannula**, Laboratory Technician, Diagnostic Center (University of Helsinki)
- **Riikka Hiltunen**, Assistant Nurse Manager, Emergency Medicine and Services (University of Eastern Finland)
- **Hanna Immonen**, Acting Nurse Director, Heart and Lung Center (Tampere University)
- **Marko Kaira**, Nurse Manager, Comprehensive Cancer Center (University of Eastern Finland)
- **Miia Korpela**, Advanced Practice Nurse, Diagnostic Center (University of Turku)
- **Karita Koski**, Midwife, Gynecology and Obstetrics (University of Jyväskylä)
- **Mona Kukkoaho**, Advanced Practice Nurse, Abdominal Center (University of Turku)
- **Laura Kulikoff**, Nurse Manager, Gynecology and Obstetrics (University of Helsinki)
- **Emma Kulju**, Radiographer, Comprehensive Cancer Center (University of Oulu)
- **Henna Laiho**, Assistant Nurse Manager, Operative Services in Local Hospitals (University of Vaasa)
- **Janne Markkanen**, Nurse, Perioperative and Intensive Care (University of Helsinki)
- **Maarit Männistö**, Nurse Director, Inflammation Center (University of Eastern Finland)
- **Tanja Pesonen**, Assistant Nurse Manager, Operative Services in Local Hospitals (University of Eastern Finland)
- **Päivi Puranen**, Advanced Practice Nurse, Heart and Lung Center (University of Helsinki)
- **Kerryn Saarinen**, Nurse, Abdominal Center (Åbo Akademi University)
- **Arja Sihvo**, Nurse Manager, Musculoskeletal and Plastic Surgery (University of Eastern Finland)
- **Katju Schavoronkoff**, Nurse Manager, Neurocenter (University of Eastern Finland)
- **Sanna Tarvainen**, Assistant Nurse Manager, Emergency Medicine and Services (University of Oulu)
- **Tuomo Töyhönen**, Quality Manager, Psychiatry (University of Helsinki)
- **Jenna Vihavainen**, Assistant Nurse Manager, Internal Medicine and Rehabilitation (Tampere University)
- **Marjut Åström**, Assistant Nurse Manager, Emergency Medicine and Services (University of Eastern Finland)

Master's degree from a university of applied sciences (bronze honorary badge of nursing science):



- **Susanna Aaltonen**, Nursing Instructor, Children and Adolescents (Laurea)
- **Tuula Ahvenniemi**, Nurse Manager, Head and Neck Center (HAMK)
- **Hanna Alamäki**, Assistant Nurse Manager, Diagnostic Center (Metropolia)
- **Ulla Allonen**, Nurse Manager, Operative Services in Local Hospitals (LAB)
- **Mia Apajalahti**, Nurse, Perioperative and Intensive Care (Laurea)
- **Jaana Autio**, Nursing Instructor, Heart and Lung Center (Metropolia)
- **Taru Bastman**, Assistant Nurse Manager, Psychiatry (Turku University of Applied Sciences)
- **Anu Eronen**, Assistant Nurse Manager, Internal Medicine and Rehabilitation (Metropolia)
- **Kia Eskola**, Nurse, Comprehensive Cancer Center (Tampere University of Applied Sciences)
- **Nea Espo**, Nurse, Emergency Medicine and Services (XAMK)
- **Elena Gröhn**, Paramedic, Emergency Medicine and Services (Metropolia)
- **Ciia Haaranen**, Nurse Manager, Diagnostic Center (Tampere University of Applied Sciences)
- **Kaisa Haverinen**, Nurse Manager, Internal Medicine and Rehabilitation (HAMK)
- **Jenni Heiskanen**, Nurse, Heart and Lung Center (HAMK)
- **Minna Huovinen**, Project Manager, Abdominal Center (Laurea)
- **Heli Höijer**, Nurse, Internal Medicine and Rehabilitation (LAB)
- **Karin Jensen**, Nurse Manager, Operative Services in Local Hospitals (XAMK)
- **Johanna Juvonen**, Nurse Manager, Diagnostic Center (Metropolia)
- **Jenni Kanervo**, Occupational Therapist, Psychiatry (Laurea)
- **Hannu Kivisaari**, Nurse, Perioperative and Intensive Care (Turku University of Applied Sciences)
- **Kirsi Kokko**, Nurse, Perioperative and Intensive Care (Tampere University of Applied Sciences)
- **Henri Konttinen**, Physiotherapist, Internal Medicine and Rehabilitation (Turku University of Applied Sciences)
- **Päivi Kuusimurto**, Assistant Nurse Manager, Gynecology and Obstetrics (Metropolia)
- **Lena Lappalainen**, Assistant Nurse Manager, Diagnostic Center (Savonia)
- **Annamari Lauharo**, Nursing Instructor, Emergency Medicine and Services (XAMK)



Chief Nursing Executive **Marja Renholm** presented the golden honorary badge of nursing science at Science Day on 23 November 2023 to doctors who defended their doctorates in 2023. From left: Doctors Kirsi Lindfors, Anne Lunden**, Satu Poikajärvi, Tiina Talja, Tiia Saastamoinen and Leena Tuominen.

- **Anu Lehtiranta**, Nurse, Emergency Medicine and Services (Metropolia)
- **Ulvi Lignell**, Nursing Instructor, Operative Services in Local Hospitals (XAMK)
- **Veera Linnavirta**, Assistant Nurse Manager, Gynecology and Obstetrics (DIAK)
- **Anni Lähteenmäki**, Nurse, Emergency Medicine and Services (Metropolia)
- **Hanna Makkonen**, Nurse Manager, Perioperative and Intensive Care (HAMK)
- **Eija Miettinen**, Nurse, Internal Medicine Services in Local Hospitals (Turku University of Applied Sciences)
- **Sanna Mäkinen**, Laboratory Technician, Diagnostic Center (Karelia)
- **Henna Nieminen**, Midwife, Gynecology and Obstetrics (HAMK)
- **Clarissa Nyman**, Nurse, Emergency Medicine and Services (Metropolia)
- **Marika Nyqvist**, Nurse Manager, Abdominal Center (Laurea)
- **Johanna Nyssölä**, Assistant Nurse Manager, Gynecology and Obstetrics (Metropolia)
- **Sanna Palmu**, Assistant Nurse Manager, Gynecology and Obstetrics (XAMK)
- **Katariina Peltonen**, Assistant Nurse Manager, Internal Medicine and Rehabilitation (Metropolia)
- **Eija Pesonen**, Assistant Nurse Manager, Perioperative and Intensive Care (HAMK)
- **Paula Pitkäranta**, Assistant Nurse Manager, Abdominal Center (Metropolia)
- **Marianne Pylväläinen**, Nurse, Gynecology and Obstetrics (Laurea)
- **Pia Ralli**, Nurse Manager, Inflammation Center (Metropolia)
- **Riina Rikkilä**, Assistant Nurse Manager, Abdominal Center (Metropolia)
- **Maija Ruutu**, Nurse Manager, Abdominal Center (Laurea)
- **Anni Rytönen-Tetri**, Assistant Nurse Manager, Operative Services in Local Hospitals (HAMK)
- **Susanna Räihä**, Nurse, Operative Services in Local Hospitals (Laurea)
- **Laura Siregar**, Assistant Nurse Manager, Operative Services in Local Hospitals (Laurea)
- **Eija Suomalainen**, Nurse, Perioperative and Intensive Care (Laurea)
- **Merja Suorto**, Assistant Nurse Manager, Internal Medicine and Rehabilitation (LAB)

- **Vilma Takala**, Assistant Nurse Manager, Internal Medicine and Rehabilitation (LAB)
- **Soile Tammi**, Assistant Nurse Manager, Psychiatry (Laurea)
- **Elina Tamminen**, Nurse, Children and Adolescents (Laurea)
- **Annika Toivonen**, Nurse, Perioperative and Intensive Care (DIAK)
- **Mariette Toure-Haanaho**, Nurse, Emergency Medicine and Services (LAB)

- **Sirpa Valtanen**, Nurse Manager, Abdominal Center (Metropolia)
- **Emma Viippola**, Assistant Nurse Manager, Heart and Lung Center (Lapland University of Applied Sciences)

*) Degrees notified to HUS nursing management

**) Anne Lunden already defended her doctorate at the end of 2022 but received the golden honorary badge only in 2023, as the 2022 badges were presented before her doctorate.

The Rising Star award granted by the Finnish Nurses' Association

- **Nea Brandt**, Nurse, Dialysis Unit, Porvoo Hospital, Abdominal Center
- **Tuomas Hildén**, Nurse, Meilahti Emergency Department, Emergency Medicine and Services
- **Reija Kaskiaho**, Nurse, Surgery and Anesthesia Unit, Meilahti, Perioperative and Intensive Care
- **Leena Koski**, Nurse, Cardiac Surgical Intensive Care Unit M2A, Perioperative and Intensive Care
- **Jenna Kylä-Liuhala**, Nurse, Cardiac Surgical Intensive Care Unit M2A, Perioperative and Intensive Care
- **Tiia Kääriäinen**, Nurse, Anesthesia and Surgery Ward K, Peijas Hospital, Perioperative and Intensive Care

The Fixed Star award granted by the Finnish Nurses' Association

- **Anne Jylhä**, Nurse, Neurology Ward MEMN7A, Meilahti, Neurocenter
- **Isa Rosenström**, Nurse, Internal Medicine Inpatient Ward 3, Porvoo Hospital, Non-operative Services, HUS Group
- **Outi Sarvi**, Nurse, Oncology Wards S4 A and B, Comprehensive Cancer Center

Kyllikki Pohjala Memorial Fund recognition

- **Eliisa Valovirta**, Quality Manager, Perioperative and Intensive Care
- **Anne Rajatammi**, Nurse, Children and Adolescents
- **Tiia Saastamoinen**, Nurse, Perioperative and Intensive Care

Decorations awarded to members of HUS nursing staff by the President of the Republic of Finland

Knight of the Order of the Lion of Finland

- **Inger Mäenpää**, Chief Nursing Officer, Children and Adolescents
- **Marita Ritmala**, Development Manager, Nursing Management

First Class Medal of the White Rose of Finland with golden cross

- **Eila Haaranieniemi**, Nurse Manager, Musculoskeletal and Plastic Surgery
- **Hilde Kerminen**, Assistant Nurse Manager, Heart and Lung Center
- **Anne Pitkälä**, Nurse Manager, Heart and Lung Center
- **Reija Sjöholm**, Nurse Manager, Heart and Lung Center

Publication activities and presentations

HUS nursing staff members have produced both scientific (Appendix 2) and professional (Appendix 3) publications. In addition, nursing staff members have given oral presentations and poster presentations at international and national scientific and professional events (Appendix 3).

EXEMPLARY PROFESSIONAL PRACTICE

Exemplary professional practice means, among other things, high-quality and safe patient care. It means consistent nursing practices, patient and customer involvement and patient satisfaction.

Patient satisfaction is at an all-time high and rising

Marita Ritmala

Patient satisfaction in nursing has been monitored regularly on a quarterly basis since 2018 with a patient feedback survey concerning nursing (HoPP) directed to adult patients, pediatric patients and

their parents. National comparison of results has also been possible almost from the beginning in the HoiVerKe network. Each unit’s own scores compared to the national average for similar types of units can be found in the Power BI report

“Patient Feedback on Nursing” (Image 1). The HoPP survey provides information on areas of excellent nursing care that are essential for patients: patient engagement/patient-centered nursing, care coordination, safety, service recovery,

	202104	202201	202202	202203	202204	202301	202302	202303
01 Nurses took into account my opinion in planning my care	4,80	4,76	4,74	4,90	4,90	4,98	4,97	4,89
02 My care was well coordinated by doctors and nurses	4,84	4,89	4,72	4,89	4,91	4,93	4,98	4,89
03 Nurses and doctors worked well together to provide the care I needed	4,92	4,84	4,81	4,93	4,93	4,95	4,92	4,90
04 Nurses apologized to me if an error or oversight had happened in my car	5,00	4,83	4,89	5,00	4,95	4,85	4,75	4,51
05 Nurses corrected the matter I complained about	4,87	4,93	4,79	4,82	4,82	4,95	4,84	4,88
06 Nurses told me what the medicine was for when they gave me new med	5,00	4,88	4,56	4,97	4,80	4,82	4,90	4,80
07 Nurses told me about possible side effects of my medication	4,75	4,74	4,73	4,93	4,87	4,76	4,72	4,72
08 Nurses talked about sensitive matters so that no outsider could hear the	4,88	4,80	4,94	4,92	4,98	4,95	4,89	4,92
09 Nurses saw to/took care of the safety of my moving around during hosp	5,00	4,97	4,82	4,98	4,98	4,92	4,95	4,97
10 Nurses treated me with courtesy	5,00	4,98	4,98	5,00	5,00	5,00	5,00	4,99
11 Nurses saw to that the care or treatments did not cause me embarrass in	5,00	4,94	4,95	5,00	5,00	4,94	5,00	4,96
12 Nurses protected my privacy	5,00	4,96	4,96	4,93	4,96	4,98	4,97	4,94
13 Nurses responded fast enough when I needed help	4,95	4,97	4,88	4,92	5,00	4,95	4,96	4,95
14 Nurses responded fast enough when I needed to go to bathroom	5,00	5,00	4,93	4,85	4,92	4,80	4,95	5,00
15 Nurses explained the matters related to my care and diagnostic studies	4,88	4,96	4,90	4,96	4,90	4,95	4,93	4,93
16 Nurses taught me the matters related to my discharge understandably	5,00	4,85	4,85	4,81	4,79	4,82	4,89	4,78
17 Nurses told me the matters related to the observation of my condition u	4,81	4,70	4,80	4,85	4,80	4,92	4,86	4,85
18 Nurses made sure I understood what they told me	4,89	4,73	4,77	4,93	4,81	4,89	4,87	4,79
19 Nurses saw to/took care of relieving my pain when necessary	4,90	4,83	4,83	4,85	4,89	4,87	4,77	4,87
20 Nurses evaluated my pain often enough	5,00	4,81	4,73	4,83	4,73	4,85	4,78	4,81
21 Nurses listened to me carefully	4,80	4,85	4,88	4,92	4,85	4,93	4,90	4,90
22 Nurses were genuinely present	5,00	4,98	4,92	4,98	4,95	4,90	4,96	4,91

Image 1. An example of a “Patient Feedback on Nursing” Power BI report. The green background of a unit’s average indicates that the unit’s performance is better than the average performance of similar units nationally.

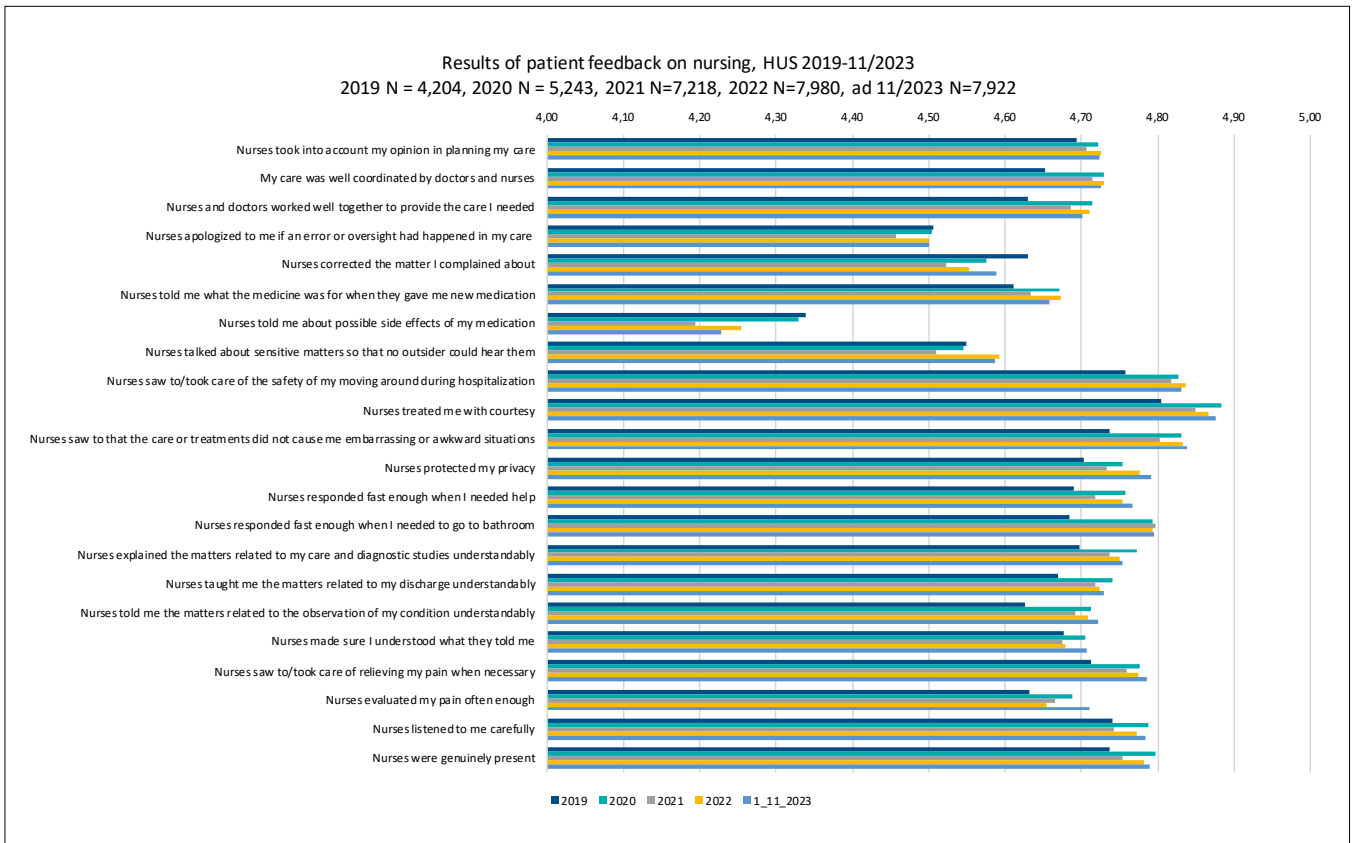


Figure 1. Average of the results of patient feedback on nursing at HUS in 2019–2022 and January–November 2023.

courtesy and respect, responsiveness, patient education, pain and careful listening. Overall, the results are top-notch across HUS with mean scores ranging from 4.23 to 4.88 on a scale of 1 to 5 (Figure 1). Again this year, patients rated the statement “Nurses told me about possible side effects of my medication” in the Safety category as the overall weakest and the “Nurses treated me with courte-

sy” in the Courtesy and Respect category as the overall best. Top scores were also achieved in the other statements in the Courtesy and Respect category and in the Careful Listening category.

Patient feedback on nursing is one way of identifying where we have succeeded. It also tells us what we need to improve from the patient’s point of view. Perhaps next year, patients will also be

satisfied with the medication guidance they receive.

Marita Ritmala, RN, PhD, is the Director of HUS’ Magnet Hospital® program. She has developed Patient Feedback on Nursing as part of the quality requirements of the Magnet Hospital®

Consortium for the national benchmarking of nursing-sensitive outcomes, HoiVerKe

Kristiina Junttila

The quality of nursing care is the responsibility of all the parties involved in it. Nursing staff responsible for patient care implement evidence-based practices when caring for patients (e.g. the HUS Prevent Pressure Injury Protocol), produce quality data, for example through nursing documentation, and monitor information on the outcomes of their activities and the quality of care. Nurse directors use quality data to support decision-making and management, for example to allocate resources to improve issues that are key to the quality and effectiveness of care. However, Finland is lacking a national system for monitoring and benchmarking nursing quality, an international example of which is the US National Database of Nursing Quality Indicators, which is used by the HUS departments pursuing the Magnet Hospital® status to report, compare and monitor their quality data.

In autumn 2016, a collaboration was launched among university hospitals to compile nursing-sensitive outcomes on a national basis. Nursing sensitivity means that nursing structures (e.g. skill-mix, competences, leadership) and processes (e.g. pressure injury risk assessment, medication administration) affect not only patient care outcomes (e.g. incidence of pressure injuries during treatment) but also staff-related outcomes (e.g. job satisfaction). Nursing structures and processes also have an impact on organizational outcomes (e.g. costs of patient care, treatment times).

The national nursing benchmarking network (HoiVerKe) currently includes 14 wellbeing services counties or groups

(Table 1). The network is coordinated by HUS (Director **Kristiina Junttila**, HUS Nursing Research Center). In practice, coordination means, among other things, contract management and responsibility for organizing and documenting network meetings.

Table 1. Member organizations of the HoiVerKe network in autumn 2023

Wellbeing Services County of South Ostrobothnia
Wellbeing Services County of South Savo
Helsinki University Hospital
Wellbeing Services County of Kainuu
Wellbeing Services County of Central Finland
Wellbeing Services County of Kymenlaakso
Wellbeing Services County of Lapland
Wellbeing Services County of Pirkanmaa
Wellbeing Services County of Ostrobothnia
Wellbeing Services County of North Karelia
Wellbeing Services County of North Ostrobothnia
Wellbeing Services County of North Savo
Wellbeing Services County of Satakunta
Wellbeing Services County of Southwest Finland

HoiVerKe has set itself the goal of monitoring internationally recognized nursing-sensitive indicators and to take international definitions into account in data production in order to enable comparisons beyond the national level. Currently, the joint data production covers the following topics:

- Patient feedback on nursing
- Nurses' job satisfaction (NESplus)
- Inpatient falls
- Prevalence of hospital acquired pressure injuries (Figure 1)
- Assessment of malnutrition risk

In addition, a pilot is underway to provide data related to central line-associated bloodstream infections (CLABSIs) in intensive care units. The indicators for psychiatric nursing and obstetrics and gynecology nursing are defined in designated sub working groups.

HoiVerKe activities also involve a national research consortium between 12 HoiVerKe organizations and all departments of nursing science in the Finnish universities. The purpose of the research project 'Nursing sensitive indicators in assessing and developing nursing care quality, NurSeInQual' is to describe and explain the nursing-sensitive indicators and the factors associated with them. In addition, the purpose is to identify changes in the indicators and the factors that may influence them. The research data used is quality data collected by HoiVerKe between 2018 and 2022.

The HoiVerKe collaboration aims to continuously improve the quality of patient care and to describe the contribution of nursing in the outcomes of care and patient safety.

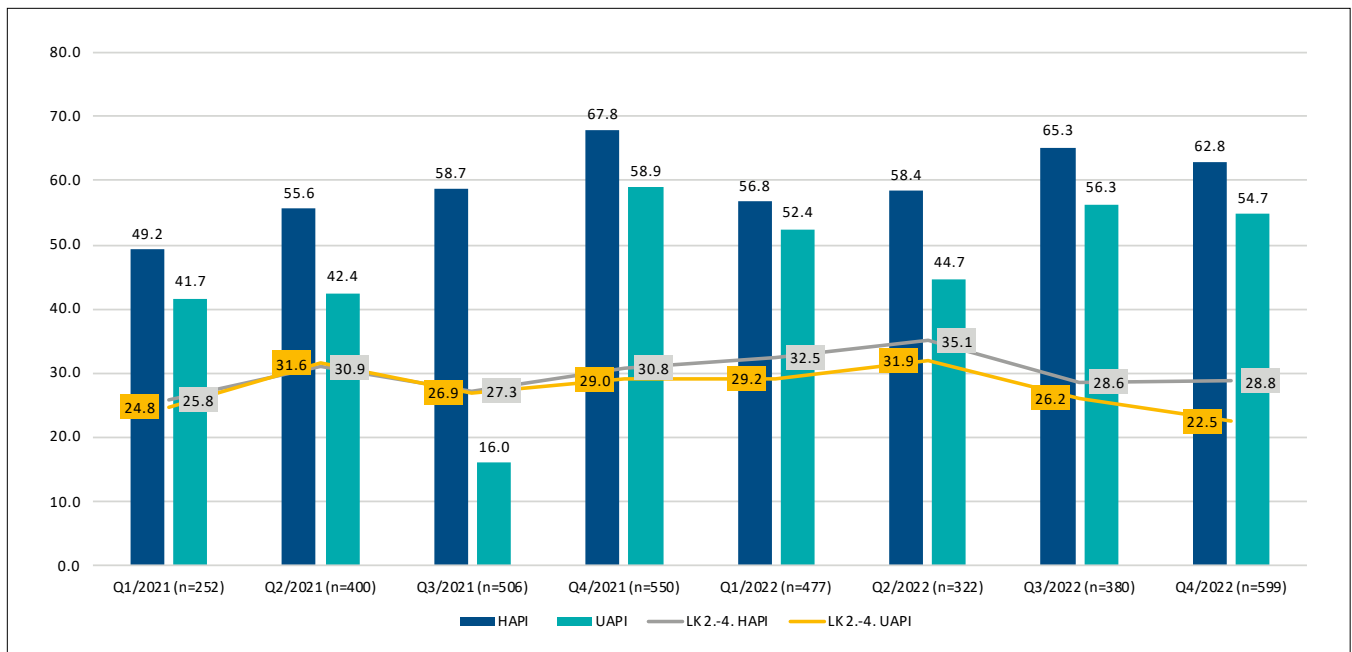


Figure 1. Percentage of patients with hospital-acquired pressure injury (HAPI) and unit-acquired pressure injury (UAPI) among all patients with pressure injury, and percentage of HAPI and UAPI patients whose pressure injury was in category 2 to 4 by quartile in 2021–2022 HoiVerKe data.

The HoiVerKe collaboration aims to continuously improve the quality of patient care and to describe the contribution of nursing in the outcomes of care and patient safety. The collaboration enables benchmarking and the sharing of good practices in nursing. It also aims to identify deviations in nursing quality to support research, education and orientation. With the help of a planned website, the aim is to raise awareness of

nursing-sensitive quality, HoiVerKe and its results among different social welfare and healthcare actors, decision-makers and students, trade unions, professional organizations and the third sector, as well as patients, customers and the general public.

Kristiina Junttila, RN, PhD, Docent, Professor h.c., Director of the HUS Nursing Research Center NRC

Literature:

Junttila K, Meriläinen M, Peltokoski J, Tervo-Heikkinen T, Mattila E, Lehtikunnas T, Heikkilä A, Koivunen M, Salmela S, Laitila M & Ritmala-Castrén M. Hoitotyön kansallinen vertaiskehittäminen (HoiVerKe). Puheenvuoro. Tutkiva Hoitotyö 2020;18(3):34–36.

Olli S, Tervo-Heikkinen T. Hoitotyönsensitiivinen laatu – katsaus kirjallisuuteen. THL, Tutkimuksesta tiiviisti 31/2020.

Poster about the IT Management's Digital Patient Services' development project wins first prize

Kaisa Pulkkinen, Johanna Lampinen, Anni Pikkarainen and Jaana Kotila, nursing professionals from the IT Management's Digital Patient Services, redesigned an online course to help social welfare and healthcare professionals strengthen the skills they need to succeed in using and developing digital pathways and self-care programs. The online course was developed together with users, and it makes use of, among other things, the Lean method and service design methods. The online course project was presented as a poster at the international #eHealth2023 conference in Vantaa in October 2023. In addition to Finnish participants, the conference was attended by participants from other European countries and the United States. The poster won the first prize in the poster competition. Warmest congratulations on the award!

The operators involved in the development of the Health Village have the possibility to obtain the methodological templates of the online course from the Health Village extranet, and the course is also available in HealthVillagePRO.

Working at interfaces – the transition of medical care of people with intellectual disabilities from social welfare to specialized health care

Jutta Tuominen

The social welfare and healthcare reform brought with it a change in services for people with intellectual disabilities. The basic activities (housing and daytime activities) of Eteva Joint Municipal Authority, which was responsible for meeting the needs of people with intellectual disabilities in the southern municipalities of Finland from 2009 by providing housing, daytime activities, research and crisis services, as well as specialist services, were divided between six wellbeing services counties. The continuation of particularly demanding services (psychiatric care of people with intellectual disability) was considered, and the best option was deemed to be to integrate these activities into the HUS Group, which, as a major operator, was in a position to maintain and develop them.

As a result, as of the beginning of 2023, the medical care of people with intellectual disabilities became part of the activities of HUS Psychiatry. The Brain

Center’s profit area within Psychiatry also includes close partners Neuropsychiatry Ward and Outpatient Clinic, with which cooperation had already been carried out prior to the merger. Cooperation is also closely carried out with the wellbeing services counties, with the aim of building an appropriate division of labor between the different actors in the changed social welfare and healthcare field, creating clinical pathways that work for patients and sharing the special expertise needed for services for people with intellectual disabilities.

The transfer of business to the HUS Group involved the transfer of three psychiatric inpatient wards for adults with intellectual disabilities (in Hämeenlinna, Lahti and Kerava), a psychiatric inpatient ward for children and adolescents with intellectual disabilities in Lahti, more than 20 employees in mobile specialist services and a disability outpatient clinic in Vantaa. In total, the num-

ber of HUS employees increased by just under 200 as a result of the transfer.

Psychiatric care of people with intellectual disabilities has its roots in the Pääjärvi Joint Municipal Authority, dating back to the 1970s, and the activities were part of social welfare services. The transition to a health care activity has required coordination. This has been necessary especially because the psychiatric inpatient wards for people with intellectual disabilities provide specialized health care services as special care, use restrictions as restrictive measures under the Act on Special Care for People with Intellectual Disabilities where necessary and provide involuntary special care (Act on Special Care for People with Intellectual Disabilities 1977/519). This requires close multidisciplinary work, constant assessment of the need to support the patient’s right to self-determination and strong ethical skills on the part of officials, including psychologists,

IMAGE: THE ALBUM OF THE PSYCHIATRIC INPATIENT CARE FOR PEOPLE WITH INTELLECTUAL DISABILITY IN LAHTI.

Meaning of images
Changes
Social stories



The material shown in the pictures was created by AAC Instructor Henna Taskinen in cooperation with the staff of the children’s group of Psychiatric Inpatient Care for People with Intellectual Disability in Lahti.

social workers and nurse managers.

In addition to psychologists and social workers, the specialist services in medical care of people with intellectual disabilities employ occupational therapists, a physiotherapist, a sex counselor, an AIMO rehabilitation instructor (people with multi-sensory impairment), AAC instructors (augmentative and alternative communication methods), autism rehabilitation instructors, mobile practical nurses and service planning specialists. The specialist services staff work not only in the psychiatric inpatient wards and outpatient clinics, but also in the patients' own environments such as schools, homes or housing units. They provide counseling, advice, examinations and assessments on issues such as functional ability, emotional or cognitive developmental level and challenging behavior. They also train staff within the services of medical care of people with intellectual disabilities, at other HUS units and in wellbeing services counties.

The staff of the Psychiatric Inpatient Care for People with Intellectual Disability consist of doctors, nurses, practical nurses, social workers and staff from the specialist services in the medical care of people with intellectual disabilities. To work with patients with challenging behavior, staff are required to have a wide range of skills. Everyday life is structured, and a wide range of communication aids are used. The wards use the AVEKKI model for preventing occupational violence, and the activities of the work communities are based on a community approach. The causes of challenging behavior are identified, for example through behavioral analysis, and DKT (dialectical behavioral therapy) and ART (aggression replacement therapy) are used to pursue behavioral change. Reasons for admission to a psychiatric inpatient ward for people with intellectual disabilities often include an increase in challenging behavior and the identification of its causes, behavioral change, assessment of functional capac-

IMAGE: THE ALBUM OF THE PSYCHIATRIC INPATIENT CARE FOR PEOPLE WITH INTELLECTUAL DISABILITY IN LAHTI.



The tree in the picture can be found in the living room of the adult group of the Psychiatric Inpatient Care for People with Intellectual Disability in Lahti.

ity and support needs, and evaluation of medication and diagnostics.

The outpatient clinic is staffed by a doctor, a nurse, a physiotherapist, a psychologist, an office secretary, an occupational therapist and a speech therapist. The outpatient clinic examines the mental health and challenging behavior, growth and development and interaction with the environment of patients with intellectual disabilities or autism spectrum disorders, develops demanding rehabilitation plans and assesses the need for communication support, assistive devices and other support.

Having medical and psychiatric care of people with intellectual disability as part of specialized health care makes it possible to develop the specific expertise needed to provide services for people with intellectual disabilities, to spread knowledge and understanding of treatment methods, and thus to provide the best possible care in the future.

Jutta Tuominen, Public Health Nurse/Nurse, MHSc, works as a Nurse Director in Medical Care of People with Intellectual Disability

A poster on joint development awarded a certificate for the best e-poster presentation by a radiographer

The Meilahti Isotope and Cyclotron Unit tested different detergents for cleaning contamination of radiopharmaceuticals in a collaborative project. Different detergents were tested on surplus pieces of plastic mat, for example, to clean lutetium-PSMA. The collaborative project resulted in a poster presentation to the European Association of Nuclear Medicine (EANM) congress in Vienna. The poster presentation was given by Sanna Rajala, a radiographer at the Molecular Radiotherapy Unit, who was awarded a certificate for the best e-poster presentation by a radiographer at the congress. Congratulations on the certificate!

Reference: HUS 2023. Sanna Rajalalle myönnettiin sertifikaatti parhaasta röntgenhoitajien E-posteriesityksestä. SharePoint 22.9.2023.

<https://hussote.sharepoint.com/sites/00001/tiedotteet/Sivut/Sanna-Rajalalle-myönnettiin-sertifikaatti-parhaasta-röntgenhoitajien-E-posteriesityksestä.aspx>

NEW KNOWLEDGE, INNOVATION AND IMPROVEMENTS

The best and safest care for patients is ensured by standardizing care practices based on research evidence. It is therefore necessary to strengthen the research competence of our nursing staff as well as their skills in implementing research evidence into clinical patient care.

2023 at the HUS Nursing Research Center (NRC)

Toni Haapa and Kristiina Junttila

The HUS Nursing Research Center (NRC) aims to promote the production of nursing and health science research, evidence-based development, the utilization of research evidence in patient care, and networking related to research activities.

Support for nursing and health science research

Research grants for doctoral students and post doc researchers

HUS NRC annually grants researcher months for nursing staff employed by HUS. In 2023, 19 researchers applied for researcher months for their doctoral dissertations and post-doctoral research. Thirteen of them were granted a total of 35 months (and one applicant was in reserve). The utilization rate of researcher months was approximately 93%.

New research openings

In 2023, NRC staff were involved in launching several new nursing and

health science studies, such as the national pressure injury study and the study on technology in the prevention of hospital falls. In addition, the HUS NRC is involved in a joint research project of HUS advanced practice nurses and clinical nurse educators focusing on the implementation and effectiveness of evidence-based clinical patient care.

Cooperation with the University of Helsinki's Master's program in Development of Healthcare Services

The NRC staff was involved in the teaching of clinical nursing science in the Master's Programme in the Development of Healthcare Services, which started at the University of Helsinki's Faculty of Medicine in autumn 2023. In addition, the preparation of a joint research, education and development strategy (2024–2028) between the Master's Programme and HUS Nursing was initiated.

In 2023, the NRC staff produced a total of 12 scientific publications for

which they were awarded 18 Jufo points. In addition, the NRC staff produced professional publications based on research activities (n=1), as well as national (n=3) and international (n=1) congress presentations.

Support for research-based development

In 2023, NRC project coordinator vacancies were utilized both for strategy-based research and development and for research-based development of nursing at the unit level (Table 1). HUS' development activities were supported, for example by participating in the updating of the Nursing Strategy and coordinating the activities of the networks "Hoityön kansallinen vertaiskehittäminen" (HoiVerKe, consortium for the national benchmarking of nursing-sensitive outcomes) and "Opiskelijaohjauksen vertaileva laatu" (OVeLa, comparative quality of student guidance).

Table 1. Research and development projects supported by HUS NRC in 2023

	Project name	Place of implementation	Project Planner
Strategy-based research and development projects	Reporting on a machine vision study on fall prevention	Group Administration	Annina Heikkilä
	NeverEvent project: pressure injury prevalence 2023	Group Administration	Elli Heikkilä
Research-based development projects at the unit level	Family C-section – promoting skin contact in C-section	Labor ward, Espoo Hospital	Anni Iho
	Preparing a child patient for a procedure – development of a story-based guide	Surgical Ward and Day Surgery, Surgical Hospital	Heidi Salonen Eeva Löppönen
	Involving adolescents in psychiatric outpatient care – a literary review	Adolescent Psychiatry Outpatient Clinic, Matinkylä	Jonna Mononen
	Adverse events in psychiatric nursing – a literary review	Strategic Development Unit for Adolescent Psychiatry, Psychiatry Center	Katja Ikonen
	Development of evidence-based online training in eye diseases	Outpatient Clinic for Eye Diseases, Porvoo Hospital	Jessica Ekholm
	Introduction of a care recommendation and uniform practices for the screening of swallowing	MEM7B Stroke Unit, Meilahti Tower Hospital	Elina Mäkelä

Support for utilizing research evidence

The use of research evidence was supported by the organization of Nursing Science meetings (3), a Science Day (23/11/2023) and a two-part training on the use of the Joanna Briggs Institute (JBI) databases in cooperation with Wolters Kluwer. Preparations for an international conference on patient care research, the 2nd International Conference of Clinical Nursing Research 2024, were initiated in 2023. The conference will be held at the Marina Congress Center in Helsinki on 22 and 23 August 2024. The theme of the conference, which is aimed at nurse researchers, leaders and managers, experts and educators, clinical nurses and all others interested in clinical nursing research and research-based development, is demonstrating excellence in patient care. The

aim of the conference is to provide an international perspective on how excellence in clinical nursing is demonstrated through clinical research or research-based development. In addition to the above-mentioned HUS events, HUS NRC participated in planning the sixth national evidence-based practice conference together with the Nursing Research Foundation (Hotus) and the JBI Centre of Excellence. The utilization of research evidence was also supported by nine HUS NRC newsletters that were used to communicate about, among other things, new HUS publications and evidence-based guidelines by Hotus.

Support for networking

In 2023, HUS NRC supported networking aimed at producing and implementing research evidence by organizing activities such as two HUS PhD Network

meetings and two network meetings for nursing and health science doctoral students. National and international networking was also promoted by presenting the NRC's activities to a student group of Akava Nurses and Taja ry and to Chinese and Kazakh nursing leaders during their study visit to HUS. In addition, the NRC's activities were communicated through cooperation networks, such as events organized by the nursing departments of the Universities of Eastern Finland, Tampere and Turku, and through the Hotus newsletter.

Toni Haapa, RN (University of Applied Sciences), PhD, is the Research Nursing Officer at the HUS Nursing Research Center NRC.

Kristiina Junttila, RN, PhD, Docent, Professor h.c., is the Director of HUS Nursing Research Center NRC.

Hypothetical orientation model as a support for orientation

Kirsi Lindfors

Orientation is a legal obligation. Each new employee must be given adequate training and guidance, and the given training and guidance must be supplemented as necessary. Orientation should be of uniform quality and take into account, among other things, the learner’s individual characteristics, previous work experience and specific skills. Orientation is often seen as a learning event that takes place over a period of time, after which the new employee is expected to be able to perform independently, often even in demanding situations. However, orientation should be

seen as part of a longer transition period, during which the new employee is given time to learn and practice their knowledge and skills in a safe environment, together with a designated preceptor and the rest of the work community.

The hypothetical orientation model was developed as part of a nursing science doctoral thesis on the orientation of nurses, which aimed to investigate preceptors’ views on the factors that promote and hinder successful orientation (article I of the article-based thesis), the orientation experiences of newly qualified nurses (article II) and the development of professional competence after an

educational intervention for preceptors during a nine-month follow-up period (article III). The aim of the study was to develop a model of successful orientation that would support the development of professional competence of newly qualified nurses during the transition period. It also aimed to provide information that organizations could use in planning and implementing orientation for new staff.

The hypothetical orientation model was developed using deductive-inductive content analysis. The content analysis used the results of two cross-sectional studies (articles I and II of the article-based thesis). The theoretical framework

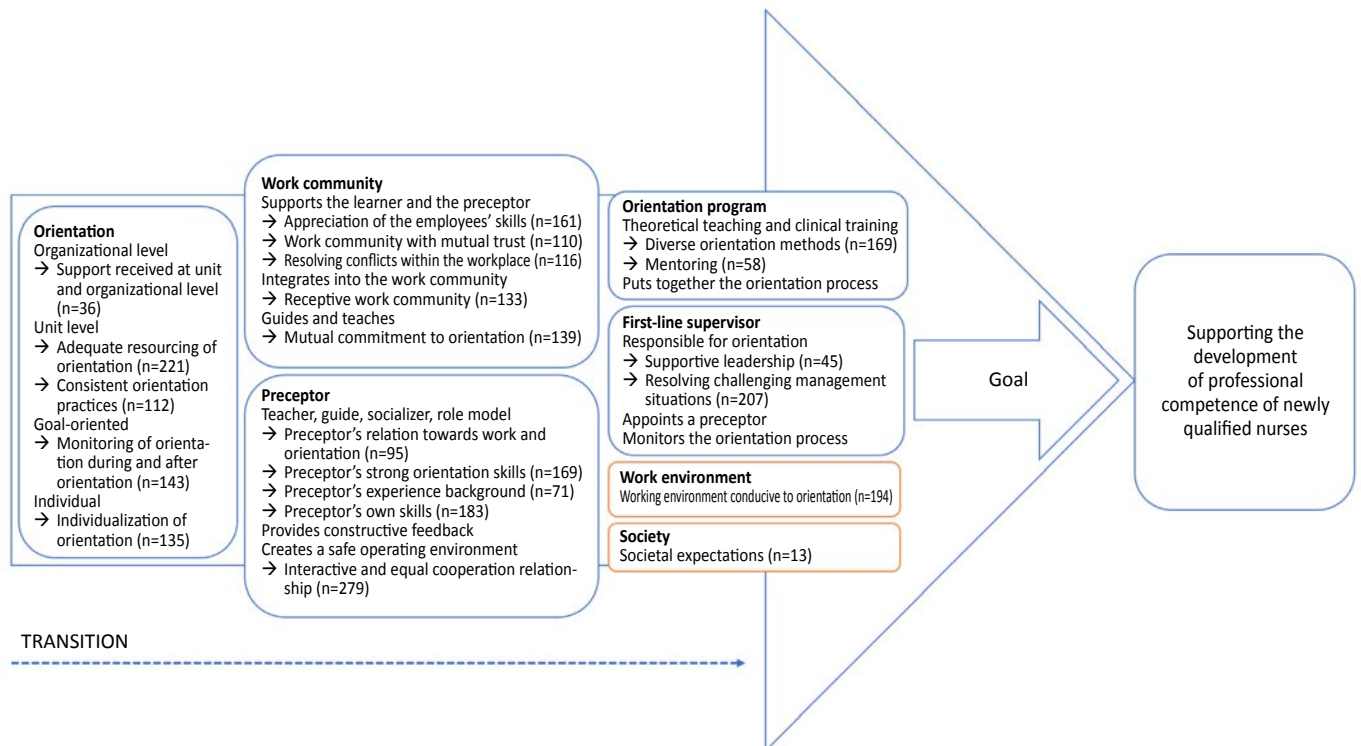


Figure 1. Hypothetical orientation model (Lindfors 2023)

included five identified components of orientation: orientation, orientation program, first-line supervisor, work community and preceptors. Based on the deductive-inductive content analysis, two more components were added to the framework: work environment and society. These seven components formed the final hypothetical orientation model (Figure 1).

In the hypothetical orientation model, the role of the preceptor, the work community and the orientation itself played a more significant role than the other components in supporting the development of the professional competence of newly qualified nurses. Orientation should be adequately resourced, and there should be uniform orientation practices at unit level, taking into account the individual needs of the learner. The preceptor must have orientation skills and the ability to give constructive feedback during the orientation process. They should have a positive attitude towards their orientation duty, and the orientation relationship should be built on mutual trust and respect between the preceptor and the learner. Orientation is an equal partnership in which the work community plays an important role. The work community should support both the learner and the preceptor during the orientation process. The work community should have mutual trust and respect for each other's work as well as the ability to resolve conflicts. A receptive work community that is committed to the orientation process supports the

After all, orientation is all about the encounter, or how the new employee is received.

new employee and gives newly qualified nurses in particular an excellent start to their careers.

After all, orientation is all about the encounter, or how the new employee is received. The preceptor and especially the work community play an important role in this encounter. A successful encounter is the first step towards successful orientation, which builds a positive employer reputation. A good employer reputation is a key factor in the attractiveness of an organization. Orientation should also be seen from a broader perspective. This would mean moving away from the traditional mode of thinking, in which orientation is seen as an entity lasting a clearly defined period of time, during which the learner is expected to assimilate a huge amount of knowledge in order to be able to function independently. When orientation is given time and the components affecting it are taken into account, it helps to strengthen the professional competence of the new employee and enables the development

of a strong professional identity. In this way, orientation becomes part of staff retention.

Although the thesis focused on newly qualified nurses and supporting the development of their professional competence during the transition period, the hypothetical orientation model is also a suitable tool for the development of orientation of other professional groups. The components identified in the hypothetical orientation model are easily transferable to different operating environments. The model is already being used in HUS as part of the ASTU support program for preceptors. The role and importance of the work community for orientation will be introduced as a new component of the support program, which will start in spring 2024. At the same time, the ASTU support program will get a third face-to-face day. It is also worth looking at the orientation program of the units through the hypothetical orientation model, as this could lead to a stronger approach to orientation.

Kirsi Lindfors, RN, PhD, is an Advanced Practice Nurse at the Hospital for Children and Adolescents.

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Appendix 1 Members of HUS nursing councils 2023

HUS Nursing council of care quality and safety

- **Koivu Johanna**, Chair, Nurse Director, Neurocenter
- **Kalliomäki Soile**, Vice Chair, Nurse, Porvoo Hospital
- **Liehu Marja**, Secretary, Clinical Nurse Educator, Diagnostic Center
- **Hakanen Minna**, Infection Control Nurse, Inflammation Center
- **Hako Laura**, Advanced Practice Nurse (Quality Manager), Nursing, Musculoskeletal and Plastic Surgery
- **Kivivuori Sanna-Maria**, Chief Quality Officer (consultancy assistance if necessary), HUS Group
- **Kohvakka Ulla**, Quality Manager (Nurse Manager), Emergency Medicine and Services
- **Kujanpää Meri**, staff representative, SuPer
- **Mäntynen Jenni**, Chief Nursing Officer, Neurocenter
- **Oinonen Timo**, Nurse, Porvoo Hospital
- **Ollikainen Tiia**, Nurse, Comprehensive Cancer Center
- **Shabani Golnaz**, Quality Manager, Abdominal Center
- **Silvola Tuula**, Quality Manager (Development Manager), Raseborg
- **Tihlman Ella**, Nurse, Psychiatry

HUS nursing council of clinical competence and career development

- **Arala Katariina**, Chair, Nurse Director, Abdominal Center
- **Gustavsson-Niemelä Eva**, Vice Chair, Deputy Secretary, Nurse Manager, Inflammation Center
- **Toivonen Marja-Terttu**, Secretary, Advanced Practice Nurse, Lohja Hospital Area
- **Ahokas Eveliina**, Nurse, Head and Neck Center
- **Allen-Ollas Charlotta**, Nurse Manager, Porvoo Hospital
- **Björn Annika**, Advanced Practice Nurse, Nursing, Perioperative and Intensive Care
- **Eronen Katriina**, Clinical Nurse Educator, representative of the HUS Student Guidance Expert Group (OOAR)
- **Eskola Kia**, Nurse, Comprehensive Cancer Center
- **Kaira Anna-Maija**, Chief Nursing Officer, Operative Services, HUS Group
- **Karjalainen Tanja**, Physiotherapist, Hyvinkää Hospital
- **Lindström Minna**, staff representative, SuPer
- **Manninen Elina**, staff representative, Tehy
- **Määttä Ulla**, Nurse, Heart and Lung Center
- **Nieminen Mikko**, Nurse, Perioperative and Intensive Care
- **Palmu Sanna**, Midwife, Gynecology and Obstetrics
- **Yli-Arvo Soile**, Education Coordinator, Training Services, HUS Group

HUS Nursing council of economic and effective practice

- **Ranta Anniina**, Chair, Nurse Director, Heart and Lung Center
- **Suomalainen Tuula**, Chair, Nurse Manager, Diagnostic Center
- **Ilmakunnas Ilona**, Secretary, Nurse Manager, Heart and Lung Center (on family leave until 2023, continuing in 2024)
- **Salmivaara Tuula**, Secretary, staff representative, Tehy
- **Siniranta Toni**, Secretary, Chair of the Nursing Intensity Coordinators
- **Gröhn Annu**, Nurse, Abdominal Center
- **Karjalainen Minna**, Nurse Director, Diagnostic Center
- **Kervinen Satu**, staff representative, SuPer
- **Kivi Minna**, Nurse, Heart and Lung Center
- **Kontinen Henna**, Nurse, Psychiatry
- **Kouhia Satu**, Municipal Customer Relations Manager (position of Financial Manager)
- **Kostamo Päivi**, Nurse Manager, Psychiatry
- **Lintula Kirsi**, Assistant Nurse Manager, Inflammation Center
- **Nihti Vilma**, Midwife, Gynecology and Obstetrics
- **Poikkeus Tarja**, Nurse Director, Emergency Medicine and Services
- **Sneck Virpi**, Chief Nursing Officer, Heart and Lung Center
- **Virta-Helenius Maarit**, Chief Nursing Officer, Brain Center, HUS Group
- **Vuoksenranta Suvi**, Nurse Manager, Internal Medicine and Rehabilitation

HUS Nursing council of knowledge management

- **Repo Marita**, Chair, Nurse Director, Comprehensive Cancer Center
- **Westman Tanja**, Chair, Quality Manager, Inflammation Center
- **Haverinen Kaisa**, Secretary (until 05/2023), Nurse Manager, Internal Medicine and Rehabilitation
- **Talja Tiina**, Secretary (from 05/2023), Advanced Practice Nurse, Psychiatry
- **Ala-Nikkola Taina**, Chief Nursing Officer, Non-operative Services, HUS Group
- **Ekroth Carola**, staff representative, Tehy
- **Juntunen Tommi**, Project Planner, Operative Services, HUS Group
- **Järvinen Kristiina**, Nurse, Perioperative and Intensive Care
- **Kiviniemi Riitta**, Nurse Manager, Internal Medicine and Rehabilitation
- **Knuutila Marita**, Advanced Practice Nurse, Emergency Medicine and Services
- **Kostiainen Elina**, Software Specialist, IT Management
- **Kungas Wilhelmiina**, Nurse, Porvoo Hospital
- **Kuitunen Jenni**, Assistant Nurse Manager, Psychiatry
- **Laine Tiina**, Senior Medical Officer in Charge of Development, Development Management, HUS Group
- **Lehikoinen Nina**, Chief Nursing Officer, Emergency Medicine and Services
- **Melender Hanna-Leena**, Director of Nursing Excellence, Nursing Management, HUS Group
- **Oksanen Laura**, Application Trainer, IT Management
- **Rouhunkoski Anna-Maarit**, Nurse, Apotti Specialist, Heart and Lung Center
- **Stjernberg Tia**, Nurse, Apotti Specialist, Porvoo Hospital
- **Vitikainen Maija**, Nurse, Perioperative and Intensive Care

HUS Nursing council of research and evidence-based practice

- **Haapa Toni**, Chair, Research Nursing Officer, Nursing Research Center
- **Karikoski Essi**, Chair, Oral hygienist, Children and Adolescents (part of the term)
- **Pulkkinen Maria**, Chair, Nurse Manager, Perioperative and Intensive Care
- **Viholainen Karina**, Secretary, Nurse Manager, Head and Neck Center
- **Ahjoniemi Minna**, Assistant Nurse Manager, Gynecology and Obstetrics
- **Huuskonen Minna**, Nurse Director, Psychiatry
- **Kanto Jenni**, staff representative, Tehy
- **Komi Tarja**, staff representative, SuPer
- **Koponen Tuulia**, Coordinating Nurse Director, Operative Services, Porvoo Hospital (part of the term)
- **Kukkonen Pia**, Clinical Nurse Educator, Internal Medicine and Rehabilitation
- **Levy Anna**, Development Manager, Research Management
- **Lunden Anne**, Nurse Director, Emergency Medicine and Services
- **Maukonen Marika**, Clinical Nurse Educator, Perioperative and Intensive Care
- **Melender Hanna-Leena**, Director of Nursing Excellence, Nursing Management, HUS Group
- **Pakarinen Sami**, Chief Medical Officer of Clinical Auditing, Management of Medical Care and Service Production, HUS Group
- **Sund Tiina**, Assistant Nurse Manager, Head and Neck Center

HUS Nursing council of patient-centered nursing

- **von Harpe Camilla**, Chair, Nurse, Children and Adolescents
- **Metsäranta Kiki**, Chair, Nurse Manager, Psychiatry
- **Kiviranta Katja**, Secretary and Social Media Manager, Nurse, Perioperative and Intensive Care
- **Hakasalo Katja**, Nurse, Heart and Lung Center (on study leave 22 Aug 2022–14 May 2023)
- **Joutsen Nina**, Physiotherapist, Coordinator of Client Inclusion Activities, Hyvinkää Hospital
- **Jäppinen Anna-Maija**, Advanced Practice Nurse, Internal Medicine and Rehabilitation
- **Kortekangas Tuula**, Customer Services Manager, Children and Adolescents
- **Kotiluoto Ulla**, staff representative, Tehy
- **Kättö Teija**, Nurse Director, Gynecology and Obstetrics
- **Marno Heikki**, Expert by Experience
- **Mäenpää Inger**, Chief Nursing Officer, Children and Adolescents
- **Männikkö Pia**, Customer Services Manager, Head and Neck Center
- **Nummela Johanna**, Assistant Nurse Manager, Heart and Lung Center
- **Pukkila Lotta**, Expert by Experience
- **Ryynänen Sanna**, Patient Ombudsman
- **Öhman Beatrice**, Midwife, Gynecology and Obstetrics
- **Öhman Hanna**, Head Physician, Internal Medicine and Rehabilitation

Appendix 2 Peer-reviewed scientific publications in 2022* (n=33) and Jufo score (39)

*) Scientific publications are always reported in the annual report with a delay of one year.

Publication	Departments of HUS authors	Publication Forum
Aittovaara A, Kylmä J, Rauta S, Meriö A, Juntila K, Paavilainen E, Haapa T. Uusien työntekijöiden kokemukset perehdytyksestä ja sen aikaisesta oppimisesta leikkaus- ja teho-osastoilla: laadullinen tutkimus. <i>Tutkiva Hoitotyö</i> 2022;20(1):20-29.	Abdominal Center Perioperative and Intensive Care Group Administration	1
Ameel M, Myllynen M, Kallakorpi S. Exploring Hybrid Leadership: Experiences of Remote Leadership in Healthcare. <i>J Nurs Adm</i> 2022;52(12):653–658. https://doi.org/10.1097/NNA.0000000000001227	Psychiatry	1
Cavonius-Rintahaka D, Roos M, Gillberg C, Billstedt E, Aho AL. Randomized Clinical Trial Comparing Dialogical Family Guidance with Ordinary Clinical Treatment for Families with a Child with Neurodevelopmental Disorders. <i>Adv Neurodev Disord</i> 2022;6:36-52. https://doi.org/10.1007/s41252-021-00230-w	Children and Adolescents	0
Heikkilä A, Kotila J, Juntila K. Validation of the Helsinki University Hospital prevent pressure Injury Risk Assessment Tool: a prospective observational study. <i>BMC Nurs</i> 2022;21:18. https://doi.org/10.1186/s12912-021-00799-6	Group Administration Neurocenter	1
Hellstén T, Arokoski J, Sjögren T, Jäppinen A-M, Kettunen J. The Current State of Remote Physiotherapy in Finland: Cross-sectional Web-Based Questionnaire Study. <i>JMIR Rehabil Assist Technol</i> 2022;9(2):e35569. https://doi.org/10.2196/35569	Internal Medicine and Rehabilitation	2
Holstein R, Mäkinen M, Castrén M, Kaartinen J. Utilization of Prognostic Biomarker Soluble Urokinase Plasminogen Activator Receptor in the Emergency Department: a Tool for Safe and More Efficient Decision-making. <i>BMI</i> 2022;17:1-7. https://doi.org/10.1177/11772719221081789	Emergency Medicine and Services	1
Hutri I, Kotila J, Turunen H. Registered nurses' competence for subarachnoid haemorrhage patients in intensive care units. <i>Br J Neurosci Nurs</i> 2022;18:S12-S16. https://doi.org/10.12968/bjnn.2022.18.Sup5.S12	Neurocenter	1
Hämäläinen J, Kvist T, Koota E, Kankkunen P. Nurses' Perceptions of the Management of Acute Pain in Emergency Departments: Cross-sectional Study. <i>Clinical nurse specialist</i> 2022;36(5):254–263. https://doi.org/10.1097/NUR.0000000000000694	External Evaluation Unit Emergency Medicine and Services	1
Jokiniemi K, Heikkilä A, Meriläinen M, Juntila K, Peltokoski J, Tervo-Heikkinen T, Mattila E, Mikkonen S. Advanced Practice Role Delineation Within Finland: A Comparative Descriptive Study. <i>J. Adv. Nurs.</i> 2022;78(6):1665-1675. https://doi.org/10.1111/jan.15074	Group Administration	3
Kaarlela V, Mikkonen K, Pohjemies N, Ruuskanen S, Kääriäinen M, Kuivila H-M, Haapa T. Competence of clinical nurse educators in university hospitals: a cross-sectional study. <i>Nord J Nurs Res</i> 2022;42(4):195–202. https://doi.org/10.1177/20571585211066018	Musculoskeletal and Plastic Surgery Group Administration	1

Publication	Departments of HUS authors	Publication Forum
Karikoski E, Junttila K, Järvinen M, Sarkola T, Blomqvist M. Parental perceptions and experiences of an oral health care promotion intervention for children with congenital heart defects. <i>Int J Qual Stud Health Well-being</i> 2022;17:1. https://doi.org/10.1080/17482631.2022.2070968	Children and Adolescents Group Administration	1
Kupila S, Venäläinen M, Suojanen L, Rosengård-Bärlund M, Ahola, A, Elo L, Pietiläinen H. Weight Loss Trajectories in Healthy Weight Coaching: Cohort Study. <i>JMIR Form Res</i> 2022;6(3):e26374. https://doi.org/10.2196/26374	Abdominal Center	0
Lindfors K, Flinkman M, Kaunonen M, Huhtala H, Paavilainen E. New graduate registered nurses' professional competence and the impact of preceptors' education intervention: a quasi-experimental longitudinal intervention study. <i>BMC Nurs</i> 2022;21:360. https://doi.org/10.1186/s12912-022-01133-4	Children and Adolescents	1
Lindfors K, Kaunonen M, Huhtala H, Paavilainen E. Newly graduated nurses' evaluation of the received orientation and their perceptions of the clinical environment: An intervention study. <i>Scand J Caring Sci</i> 2022;36(1):59–70. https://doi.org/10.1111/scs.12963	Children and Adolescents	1
Lojander J, Axelin A, Bergman P, Niela-Vilén H. Maternal perceptions of breastfeeding support in a birth hospital before and after designation to the Baby-Friendly Hospital Initiative: A quasi-experimental study. <i>Midwifery</i> 2022;110:103350. https://doi.org/10.1016/j.midw.2022.103350	Gynecology and Obstetrics	2
Melender H-L, Hökkä M, Kaakinen P, Lehto J, Hirvonen O. Palliative-care nurses' and physicians' descriptions of the competencies needed in their working units. <i>Int J Palliat Nurs</i> 2022;28:38-50. https://doi.org/10.12968/ijpn.2022.28.1.38	Group Administration	1
Melender H-L. Partnership in nursing for implementing a clinical guideline into nursing practice. <i>Nurse Educ</i> 2022;47:pE93. https://doi.org/10.1097/NNE.0000000000001231	Group Administration	1
Metsäranta K, Anttila M, Pajamäki T, Holappa H, Välimäki M. Web messaging among young people in online services: A descriptive mixed-methods study. <i>Digit Health</i> 2022;8:1-15. https://doi.org/10.1177/20552076221092534	Psychiatry	1
Mustonen S, Salanterä S, Junttila K. 2022. Nurse engagement in a Finnish tertiary-level university hospital: a descriptive cross-sectional survey. <i>Hoitotiede</i> 2022;34(3):169-182.	Comprehensive Cancer Center Group Administration	1
Niinihuhta M, Häggman-Laitila A. A systematic review of the relationships between nurse leaders' leadership styles and nurses' work-related well-being. <i>Int J Nurs Pract</i> 2022;28:e13040. https://doi.org/10.1111/ijn.13040	Emergency Medicine and Services	1
Niinihuhta M, Terkamo-Moisio A, Kvist T, Häggman-Laitila A. A comprehensive evaluation of factors affecting nurse leaders' work-related well-being. <i>Leadersh Health Serv</i> 2022;35:460-474. https://doi.org/10.1108/LHS-12-2021-0098	Emergency Medicine and Services	1
Pohjemies N, Mikkonen K, Kääriäinen M, Haapa T. Development and psychometric testing of the preceptors' orientation competence instrument (POCI). <i>Nurse Educ Pract</i> 2022;64:103445. https://doi.org/10.1016/j.nepr.2022.103445	Musculoskeletal and Plastic Surgery Group Administration	1
Pohjemies N, Haapa T, Kääriäinen M, Mikkonen K. Nurse preceptors' orientation competence and associated factors: a cross-sectional study. <i>J. Adv. Nurs.</i> 2022;78:4123–4134. https://doi.org/10.1111/jan.15388	Musculoskeletal and Plastic Surgery Group Administration	3
Poikajärvi S, Rauta S, Salanterä S, Junttila K. Delirium in a surgical context from a nursing perspective: A hybrid concept analysis. <i>Int J Nurs Stud Adv</i> 2022;4:100103. https://doi.org/10.1016/j.ijnsa.2022.100103	Perioperative and Intensive Care Group Administration	1

Publication	Departments of HUS authors	Publication Forum
Primeau C, Marttinen F , Ejlskov Pedersen CC. The status of forensic radiography in the Nordic Countries: Results from the 2020 IAFR questionnaire. <i>Forensic Imaging</i> 2022;29:200502. https://doi.org/10.1016/j.fri.2022.200502	Radiology and Pathology	1
Riimala-Castrén M , Axelin A, Richards KC, Mitchell ML, Vahlberg T, Leino-Kilpi H. Investigating the construct and concurrent validity of the Richards-Campbell Sleep Questionnaire with intensive care unit patients and home sleepers. <i>Aust Crit Care</i> 2022;35(2):130-135. https://doi.org/10.1016/j.aucc.2021.04.001	Group Administration	1
Riimala-Castrén M , Salanterä S, Holm A, Heino M, Lundgrén-Laine H, Koivunen M. Sleep improvement intervention and its effect on patients' sleep on the ward. <i>J Clin Nurs</i> 2022;31:275-282. http://doi.org/10.1111/jocn.15906	Group Administration	2
Rosenström T, Tuisku K , Suvisaari J, Pukkala E, Junttila K , Haravuori H, Elovainio M, Haapa T , Jylhä P , Laukkala T . Healthcare workers' heterogeneous mental-health responses to prolonging Covid-19 pandemic: A full year of monthly follow up in Finland. <i>BMC Psychiatry</i> 2022;22:724. https://doi.org/10.1186/s12888-022-04389-x	Psychiatry Group Administration	1
Talja T , Rantanen A, Koivisto A-M, Fröjd S, Ikonen R, Joronen K. Early identification of depressive symptoms in school-aged children: Psychometric properties and validation of a new short version of Short Mood & Feelings Questionnaire. <i>Scand J Caring Sci</i> 2022 Jun;36(2):393-403. https://doi.org/10.1111/scs.13042	Psychiatry	1
Tarvonen M , Lear C, Andersson S , Gunn A, Teramo K . Increased variability of fetal heart rate during labour: a review of preclinical and clinical studies. <i>BJOG</i> 2022;129(12):2070-2081. https://doi.org/10.1111/1471-0528.17234	Gynecology and Obstetrics	2
Tervo-Heikkinen T, Heikkilä A , Koivunen M, Kortteisto T, Peltokoski J, Salmela S, Sankelo M, Ylitörmänen T, Junttila K . Pressure injury prevalence and incidence in acute inpatient care and related risk factors - a cross-sectional national study. <i>Int Wound J</i> 2022;19:919-931. https://doi.org/10.1111/iwj.13692	Group Administration	1
Tran Minh M, Haapa T , Liljeström E, Lipponen A, Mäkinen M, Repo M, Sandberg M, Bäckmand H . Tutkimusraadit parantavat tutkimuksen laatua - kokemuksia HUSista. <i>Sosiaalilääketieteellinen Aikakauslehti</i> 2022;59:473-477. https://doi.org/10.23990/sa.117122	Group Administration	1
Varpula J, Välimäki M, Lantta T, Berg J, Soininen P , Lahti M. Safety hazards in patient seclusion events in psychiatric care: A video observation study. <i>J Psychiatr Ment Health Nurs</i> 2022;29(2):359-373. https://doi.org/10.1111/jpm.12799	Psychiatry	1

Appendix 3 Other nursing publications (professional articles and presentations)

In 2023, HUS nursing staff members visibly participated in continuing education events and scientific conferences where they presented their research and/or development projects in the form of oral presentations and/or posters. Table 1 shows the number of presentations reported to the Nursing Research Center (NRC).

Table 1. Presentations given by HUS nursing staff in 2023.

2023	Presentation forum	Oral presentation	Poster presentation
	International	1	5
	National	5	2
	Total	6	7

Table 2 shows the reference numbers of professional articles (n=8) reported to the Nursing Research Center (NRC) and the departments of HUS authors.

Publication	Departments of HUS authors
Jacobsson J. Sydänhoitajana lasten sydänleikkauksissa. Kardioskooppi 2023;(3):8–9.	Head and Neck Center
Kontio M, Kotila J, Rauhala M. e-osaaminen Terveyskylässä – miten se syntyy? Laurea-julkaisut: Tulevaisuuden sotedigiosaaja kouluttamassa – tarkastelussa joustava & monialainen erikoistumiskoulutus 2023;(214):12–13.	IT Management
Kortteisto T, Sankelo M, Koivunen M, Peltokoski J, Salmela S, Tervo-Heikkinen T, Ylitörmänen T, Juntila K. Painehaavariskin tunnistaminen on avain sairaalasyntyisten painehaavojen ehkäisyyn. Pro terveys 2023;(3):6–8.	Group Administration
Maijala V, Salmela H, Melender H-L. Nuorten mielenterveyden edistämistyö opiskelijaterveydenhuollossa. HAMK Unlimited Professional 2023;(1.12.2023): https://urn.fi/URN:NBN:fi-fe20231123148678 .	Group Administration
Mason A, Kaukonen J, Stolt N, Suomela S, Vainio H. Karsastusta vai ei? Sairaanhoitaja 2023;(5):32–37.	Head and Neck Center
Mäntykenttä E, Arminen S. Vahingosta viisastuu. Sairaanhoitaja 2023;(3):32–37.	Head and Neck Center
Nummelin M, Kukkonen P, Näätänen H, Palander S, Survonon A-M, Rautiainen J. Itsenäisesti ja yhdessä. Sairaanhoitaja 2023;(5):19–20.	Internal Medicine and Rehabilitation Gynecology and Obstetrics
Törhönen T, Kaukonen J. Hammaslääketieteen kandidaattien asiakkaat tyytyväisiä kliinisen hoitoharjoittelun toteutukseen. Suuhygienisti-lehti 2023;(2):30–33.	Head and Neck Center

HUS NURSING STRATEGY 2023–2027


The HUS Nursing Strategy and a more detailed description of the indicators with their target values is available (in Finnish) in Eetteri (Potilaan hoito > Hoitotyö).

HUS Strategian painopistealue	Hoitotyön strategian tavoitteet	Alatavoitteet	Toimenpiteet	Mittari	Vastuuhenkilö(t)	Relaatio
Henkilöstökokemus	Hoitotyön johtaminen on erinomaista	Työntekijät kokevat tulevaisuutensa kuulluksi HUSissa paremmin kuin kansallisesti keskimäärin.	Jaetun johtamisen määrittely ja periaatteiden noudattaminen	NESplus-kysely, kategoriat Johtaminen ja Autonomia HUS Henkilöstökysely HUS johtamiskysely	Hallintoylihoitaja ja johtavat ylihoitajat tulosalueilla ja tulosyksiköissä	Asiakaskokemus Henkilöstökokemus Kestävä talous
		Hoitotyön esihenkilötyön ja johtamisen edellytykset paranevat (ml. Osaaminen ja tehtävänkuvat).	Hoitotyön johtamisen sisällön ja kelpoisuusehtojen määrittely	Hoitotyön esihenkilöiden ja johtajien tutkintorakenne Hoitotyön johtajien ja esihenkilöiden ajantasaiset tehtävänkuvat		
		Johtaminen on näyttöön perustuvaa.	Johtamiskoulutukseen osallistumisen tukeminen Tiedolla johtamisen tukeminen	Eri esihenkilötasojen johtamiskoulutukset Hoitotyön johtamista palvelevat Power BI-raportit		
Henkilöstökokemus	HUSin rakenteet voimaantuttavat hoitajia heidän työssään	HUS tukee hoitajien ja hoitotyön opiskelijoiden ammattuuralla kehittymistä.	Kouluttautumisen tukeminen Systemaattinen täydennyskoulutus	Täydennyskoulutusmäärät NESplus-kysely, kategoria Ammatillinen kasvu Opiskelijaohjauksen laadun tunnusluvut: CLES-mittari, FSPR-mittari, LCP-mittari Opiskelijamäärät	Arviointiylihoitaja, Magneettiohjelman johtaja, hallintoylihoitaja ja johtavat ylihoitajat tulosalueilla ja tulosyksiköissä	Asiakaskokemus Kestävä talous
			Tavoiteltavan henkilöstörakenteen määrittely	Henkilöstörakenteen määrittely Opetushoitajien toimien kattavuus		
			Määritellään HUSin uramallit ja implementoidaan ne HUSin rakenteisiin	Uramallien päivitys Urasuunnittelun käytön kattavuus		
			ASTU-ohjelmat Vertaisarviointi Mentorointi	ASTU-ohjelmien toteutuminen Vertaisarviointien toteutuminen Mentoroinnin toteutuminen		
Jatkuva parantaminen ja uudistaminen	Hoitotyötä toteutetaan laadukkaasti ja ammatillisen toimintamallin mukaisesti	Hoitotyötä seurataan ja kehitetään perustuen systemaattiseen laatu tietoon.	PowerBI-raporttien kehittäminen Laadunseurannan osaamisen kasvattaminen Hoitotyön laatuindikaattorien hyödyntäminen Yhtenäisten näyttöön perustuvien toimintamallien käyttö	Hoitotyönsensitiiviset mittarit Laadunseurannan koulutus Näyttöön perustuvan toiminnan auditoinnit	Kehittämispäälliköt (Hoitotyön johto), asiakaskokemuspäälliköt, Magneettiohjelman johtaja, hallintoylihoitaja ja johtavat ylihoitajat tulosalueilla ja tulosyksiköissä	Asiakaskokemus Jatkuva parantaminen ja uudistaminen Kestävä talous
		Potilaat ovat tyytyväisiä hoitotyöhön.	Jokaisen potilaan arvostava kohtaaminen Erinomainen potilasohjaus Vapaaehtoistoiminta potilaiden tukena	HoPP-kysely Asiakaspalautteet ja yhteydenotot Vapaaehtoistoiminnan tilastot		Asiakaskokemus
		Kaikki (soveltuvat) HUSin yksiköt ovat mukana kansallisessa HoiVerKe-tietotuotannossa vuoteen 2027 mennessä.	HoiVerKe-tietotuotantoon kannustaminen	HoiVerKe:ssä mukana olevat yksiköt Toimintaympäristökohtainen (vuodeosasto, poliklinikka) kattavuus		
Jatkuva parantaminen ja uudistaminen	Hoitotyössä tuotetaan ja käytetään uutta tietoa ja innovoidaan toiminnan parantamiseksi	Hoitotyön tutkimus on aktiivista ja tuloksellista.	Hoitohenkilökunnan jatko-opintojen tukeminen Tutkimusosaamisen hyödyntäminen luomalla tutkimuksen ja kehittämisen urapolku	Valmistuneet YAMK-, TtM- (ja vastaavat) ja TtT (ja vastaavat) -tutkinnot Hoitohenkilökunnan tieteelliset julkaisut Tutkimuksen ja kehittämisen urapolku	NRC:n johtaja Hallintoylihoitaja ja johtavat ylihoitajat tulosalueilla ja tulosyksiköissä Kehittämispäällikkö (Hoitotyön johto)	Jatkuva parantaminen ja uudistaminen Kestävä talous
		Hoitotyötä kehitetään systemaattisesti ja näyttöön perustuvasti.	Tutkimus- ja kehittämis-kohteiden tunnistaminen Tutkimus- ja kehittämissuhteiden ja niiden tulosten systemaattinen dokumentointi Kehittämisyhteistyö asiakasraaiteiden ja kokemusasiantuntijoiden kanssa	Tutkimusavaukset Käynnissä olevat tutkimushankkeet Hoitotyön tutkivan kehittämisen projektiit Asiakasraaiteille ja kokemusasiantuntijoille annetut kehittämistehtävät		Asiakaskokemus
Jatkuva parantaminen ja uudistaminen	Magneettisairaala-malli on HUSin hoitotyön viitekehys	Magneettisairaala-viitekehys on käytössä kaikkialla HUSissa.	Magneettisairaala-viitekehysten käyttö	NESplus-kysely, kategoria Sitoutuminen	Magneettisairaala-ohjelman johtaja Hallintoylihoitaja ja johtavat ylihoitajat tulosalueilla ja tulosyksiköissä	Asiakaskokemus Henkilöstökokemus
		Tulosyksiköt pyrkivät magneettisairaala-tunnustukseen.	Magneettisairaala-tunnustuksen hakeminen	Magneettisairaala-tunnustuksen kattavuus		

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