



PARKVIEW NURSES MAKE A DIFFERENCE

**PARKVIEW NURSE
2022-2023**
ANNUAL REPORT

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Message *from the* Chief Nursing and Patient Services Executive



Juli Johnson, MSN, RN, CENP
Chief Nursing and Patient Services
Executive Parkview Health

It is with immense pride that we present the Parkview Health 2022-2023 Nursing Annual Report. This report serves as a comprehensive overview of the achievements, challenges and advancements made by our nursing team over the last year.

Parkview nurses are at the heart of all that we do as an organization. They are the foundation of patient care. The relationships and connections that nurses build matter and truly make a difference in patient outcomes. We are extremely proud of the dedication and hard work of our team, and we hope this report provides valuable insights into the impactful contributions of our nurses.

Throughout this report, you will read stories of nurses who are guided by Parkview's mission to improve health and inspire well-being in our communities. Over the past year, our nursing teams remained dedicated to upholding the highest standards of quality and safety in patient care, resulting in measurable improvements in several key areas. Through data collection and analysis, we identified areas for improvement and implemented targeted interventions to address hospital-acquired pressure injuries (HAPIs) and patient falls. We set aggressive goals and exceeded our targets for reduction of unstageable three and four HAPIs by 36% and reduction of falls with harm by 40%. While we celebrate these achievements, we recognize that our pursuit of excellence in patient care is an ongoing journey. Moving forward, we remain committed to exploring areas of opportunity, embracing innovation and striving for excellence in all aspects of patient care.

The well-being of our nursing staff is crucial to the success of our organization and the delivery of excellent care. In 2022 and 2023, we prioritized initiatives that promote the physical, emotional and psychological well-being of our nursing

team, recognizing that a healthy and supported workforce is essential to our success. We also listened to nursing requests and implemented more flexible work schedules and additional mental health days. Through continuous evaluation, feedback and collaboration, we will continue to refine and expand our well-being initiatives to meet our nurses' evolving needs.

Ongoing professional development remains paramount to ensuring our nurses stay abreast of emerging trends, technologies and best practices. We placed a renewed emphasis on developing the skills and expertise of our nurses through targeted training initiatives and professional development opportunities like our eXceed program. By investing in the continuous learning of our nursing staff, we not only enhance the quality of care we provide, but also empower our team members to thrive in their roles and contribute meaningfully to Parkview's mission.

At Parkview, we believe all nurses should have the opportunity to influence their practice. We promote a shared leadership structure in which nurses have a voice. We strongly believe that nursing has a seat at every table and that meaningful change happens when this occurs. In 2023, we restructured our Nurse Coordinating Council and combined the Quality of Life Council with the Nursing Engagement and Satisfaction Team to promote a shared governance structure, led by frontline clinical nurses. With nationally accredited Magnet facilities, we embrace the opportunity to showcase our exceptional practices, transformative leadership and commitment to continuous improvement.

We placed strong emphasis on recognizing and appreciating the contributions of our nursing team in 2022 and 2023. From regular expressions of gratitude to formal recognition programs like The DAISY Award, we sought to acknowledge the dedication, compassion and resilience demonstrated by our team. By fostering a culture of appreciation and support, we strive to increase morale, enhance job satisfaction and cultivate a positive work environment conducive to professional growth and fulfillment.

In closing, we extend our gratitude to our nursing team for their unwavering commitment to excellence in patient care. The successes outlined in this report are a testament to the dedication, expertise and compassion exhibited by our Parkview nurses. As we look ahead to the future, we remain steadfast in our commitment to continuous improvement and the delivery of exceptional healthcare to our patients and our communities.

Thank you for your continued commitment to excellence!

A handwritten signature in black ink that reads "Juli Johnson".

Message *from the* Chief Executive Officer



“
***Our nurses are
invaluable to our
mission.***
”

Rick Henvey
Chief Executive Officer
Parkview Health

Recently, Chief Nursing Executive Juli Johnson and I were discussing all the great outcomes we've witnessed over the last year as it relates to nursing. On behalf of Parkview's entire executive leadership team, thank you to our nearly 6,000 dedicated nurses for making that possible.

At Parkview, nurses are the backbone of our organization and play an essential role in care delivery, safety and overall patient outcomes. Our nurses are motivated and engaged, and are willing to take action, think critically and innovate. Our nurses are invaluable to our mission. With your engagement and valuable feedback, we will continue to improve health and inspire well-being in the communities we serve.

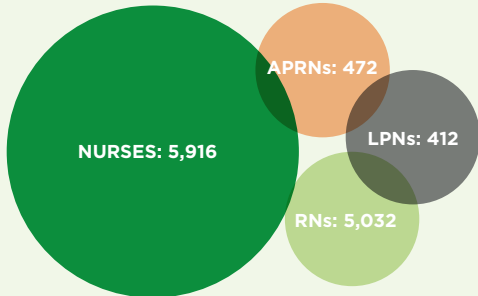
Your voices have the power to bring positive changes to the care we deliver to our patients. Parkview nurses make a huge impact in the lives of the people who entrust us with their care.

As I talk with my peers across the country, they are always asking me how we have such a strong outcomes. I tell them it's easy; it's because we have a culture of excellence, from leadership to the newest co-worker just beginning their healthcare career. And our nurses have a great deal to do with that culture.

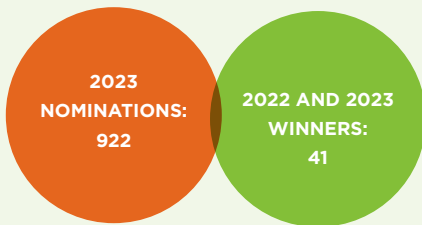
Thanks for all that you do!

Nursing *by the* Numbers

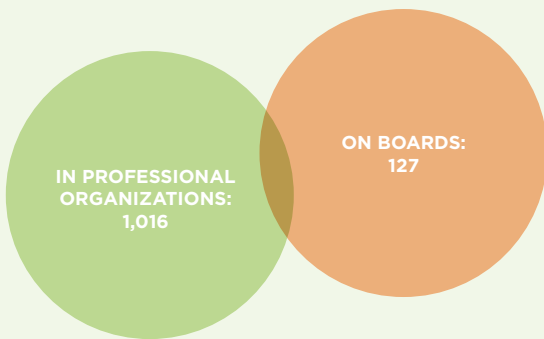
NUMBER OF NURSES



THE DAISY AWARDS

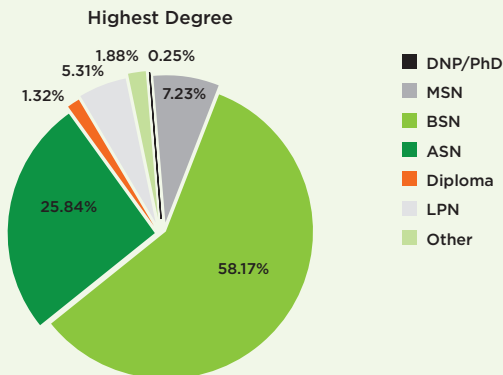


PROFESSIONAL MEMBERSHIP



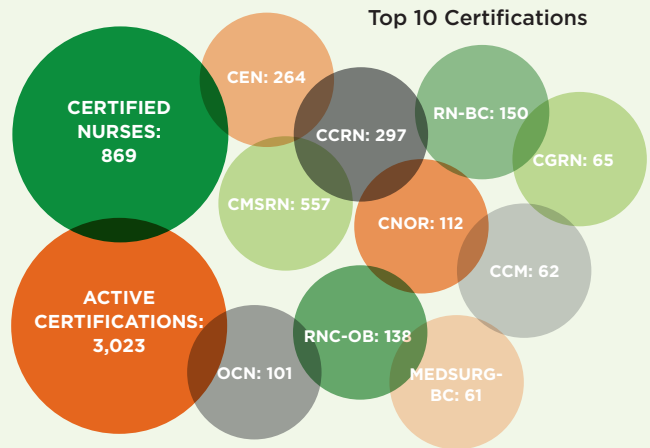
EDUCATION LEVEL

66.65% of Parkview nurses have a BSN or higher.

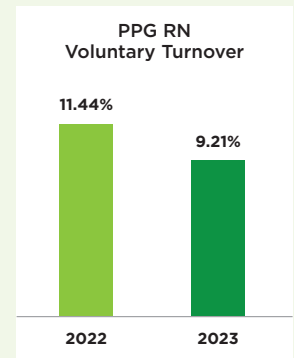
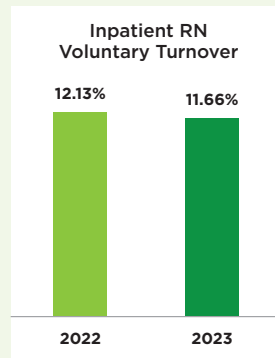


CERTIFICATIONS

There are 869 certified nurses with 3,023 active certifications.



TURNOVER DATA



ACTIVITIES AND ACCOMPLISHMENTS

Blood donation: **576**

Missions trips: **62**

Community service events: **197**

Volunteering outside Parkview: **1,201**

Conference/symposium presentations: **78**

My WellBeing activities completed: **1,626**

Authoring a book or article: **35**

Nursing Shared Governance

Professional Practice Model

Our Professional Practice Model (PPM) supports us with a shared vision of excellence through interprofessional collaboration and strong teamwork. The model illustrates how our nurses live our mission and vision every day using evidence-based practice, holistic care, transformational

leadership and shared governance to guide our care and promote optimal outcomes for our patients. While focusing on building caring relationships and supporting holistic nursing care, a Parkview nurse understands the complexities of the nursing practice environment.



Our practice model is graphically depicted as an ever-dynamic, evolving double helix with the representative DNA strands supporting foundational structures and actions.

Parkview nurses strive to come together with one voice to enhance patient care. Nurses are satisfied at Parkview Health because they are part of the planning, reviewing and delivery of the mission, vision and values of nursing and the organization. Our nurses promote excellence and the use of knowledge to improve care for our patients.

Our PPM is the framework that binds nurses together in teams to deliver on the promise of optimal outcomes.

Nurse Coordinating Council Restructure

In 2022, a gap was identified by Juli Johnson, Chief Nursing and Patient Services Executive, for the Nurse Coordinating Council (NCC) to have more clinical nurse engagement. A group was convened to identify changes and restructure the existing NCC. The work group included nursing clinical action team (NCAT) chairs, operational leads, a manager, a director, a nursing professional development specialist, a clinical nurse specialist, a chief nursing officer, and the chief nursing executive.

An initial survey of nurses at NCC determined that some changes were needed. The most glaring need was to have more clinical nurses involved, and to give the nurses at the bedside a clear voice. The nurses also wanted to hear more from NCAT teams, have a forum for sharing ideas and understand new research, technology and innovations.

The restructuring work group developed a charter, NCC meeting structure and standardization and guidance for NCAT meetings. Two major changes included decreasing the content from outside presentations (limiting each presentation to 10 minutes) and adding breakout rooms to the structure of NCC to allow more time for the NCAT chairs to communicate among their peers in similar areas.

A new “bootcamp” was established to standardize training for NCAT chairs. There will also be ongoing professional development content incorporated into NCC.

Naomi Adamski and Amber Childers were the first chair and co-chair, respectively, to lead the newly restructured NCC in 2023.

Nursing Shared Governance

Nursing Clinical Action Teams Bootcamp

Nursing clinical action teams (NCAT) are unit-based teams through which clinical nurses and nursing leadership collaborate to determine nursing practices, share innovative practices and review quality of care.

Clinical nurses have a voice in their practice through NCAT team participation. The NCAT teams are led by clinical nurses and work collaboratively with nursing managers and leaders to improve nursing practice at the unit level.



In 2023, two bootcamp sessions were held that provided training and development for new and existing NCAT chairs and co-chairs. The goal of these sessions was to help nurses understand the purpose of NCATs and how to apply a shared governance model to care and professional nursing practice. These sessions covered topics like:

- Leadership and communication
- The structure, purpose and process of NCAT meetings
- Identifying problems or gaps in care, based on data
- Improving nursing practices and evaluating outcomes

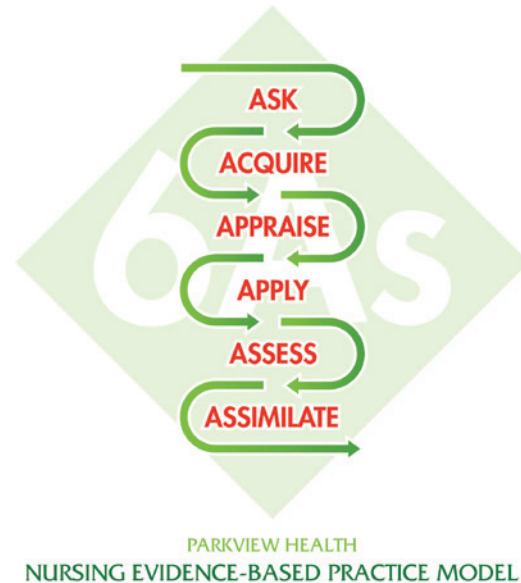
A checklist was established to create and refine NCAT teams to align with the Parkview Shared Governance Model.

Nursing Research

Evidence-Based Practice

Nurses continue to look at evidence to make changes in their practice that improve patient outcomes. To provide effective care for patients, evidence-based practice (EBP) uses the best available scientific evidence and considers patient preferences and values. EBP impacts and improves the methods used to assess patients, devices, products and tools used by clinicians as well as the policies and procedures that guide clinicians.

At Parkview, nurses have integrated and implemented EBP into patient care in numerous ways. Parkview has offered an evidence-based fellowship course for nurses to participate in since 2016. The course is six to nine months in length and offers in-depth information on EBP and how to make effective changes in practice. The course shifted from a formal, in-person class setting to an NCAT-focused program with online content and EBP mentors. There are currently 10 NCAT teams from



across the Parkview system participating in the program. Some of the questions from the NCAT teams are related to improving sleep, decreasing frequency of vital signs, improving hand hygiene to decrease CLABSI and the use of weighted blankets to decrease anxiety.

Nursing Research Symposium

Nurses at Parkview Health strive to deliver excellent care to every patient, every day. Nursing has developed and changed in the 200 years since Florence Nightingale first discovered the importance of the connection between patient care and patient outcomes. And from the very beginning, research has been critical to how nursing evolves and improves. Florence Nightingale herself used nursing research during the Crimean War to change how nurses practiced and delivered care to soldiers to decrease infections.

Nursing research has continued to influence and further develop patient care practices used by nurses on the frontlines. For example, nursing research is used to answer questions unique to nursing care and promote the development of evidence-based care practices, which are the root of the current best practices available.

Nursing research is crucial for the development of evidence-based practices and improved patient care. That's why each year Parkview holds the Nursing Research Symposium at the Parkview Mirro Center for Research and Innovation. The symposium provides a platform for nurses to share their findings with one another, making it possible to continually promote and implement evidence-based practices and improve patient care.

Since it began in 2019, attendance at the Nursing Research Symposium has been increasing each year, signifying the interest and importance of nursing research and EBP for nurses and other professions. In 2023, a record 120 participants attended the symposium.

Research Studies in 2022 and 2023

Nurses across Parkview Health have contributed to over 20 research studies as a principal or co-investigator in 2022 and 2023.

2022 ACTIVE STUDIES

Validation of an Evidence-Based, Nurse-Designed Fall Risk Assessment Tool

PI: Lindy Bilimek, MSN, RN, AGCNS-BC

Nursing and Support Staff Perceptions of Inpatient MyChart Utilization

PI: Danielle Payne, BSBio, MSN, RN, FNP-BC

Influence of Music Therapy on Length of Stay in Surgical Patients

PI: Danielle Payne, BSBio, MSN, RN, FNP-BC

Effect of Warming IV Fluids During MICU Transport on Patient Comfort and Temperature

PI: Jennifer Esslinger, BSN, RN, CFRN, CTRN

Evaluation of a COVID Mobility Team

PI: Kellie Girardot, MSN, RN, AGCNS-BC

Data-Based Program Management of System-Wide IV Smart Pump Integration

PI: Rebecca Mahuren, BSN, RN

Exploration of Intrinsic and Extrinsic Factors of Skin Injury in Intensive Care Units

PI: Andrea Conley, MSN, RN, AGCNS-BC, CMSRN; Brooke Randol, MSN, RN, AGCNS-BC, CMSRN, CWS

2023 ACTIVE STUDIES

Nursing Clinical Action Team Chair and Co-Chair Education: Back to Basics in Leading the Unit-Based Team

PI: : Vicki Babb MSN, RN, CRRN; Kelly Ray BSN, RN, CPN; BreAnn Taylor BSN, RN, CEN, Debbi Bowman

Project ROSC-O: The Impact of Leadership on Innovation

PI: Kaylyn Kistler, BSN, RN-BC

Assessment of Nurse Perceptions Related to Shared Governance Culture

PI: Erin LaCross DNP, RN, NEA-BC, CENP, Naomi Adamski MSN, RNC-OB, Brooke Randol MSN, RN, AGCNS-BC, CMSRN, CWS, Stacy Greene BSN, RN, CMSRN, Preston Jennings BSN, RN, Jennifer Sorg BSN, RN, CRNI
Olivia Figura BSN, RN, Rebecca Howard BSN, RN, ONC, Kelly Ray BSN, RN, CPN, Amber Childers BSN, RN, CMSRN, Kristy Jackson BSN, RN, Christine Fawcett BSN, RN, CTN-B

Nursing Evidence-Based Practice Survey Assessing Nursing Knowledge

PI: Lisa Morgan, MSN, RN, AGCNS-BC

Custom Machine Learning Model for Hospital-Acquired Pressure Injuries (HAPI)

PI: Andrea Conley, MSN, RN, AGCNS-BC, CMSRN; Brooke Randol, MSN, RN, AGCNS-BC, CMSRN, CWS

Exploration of Intrinsic and Extrinsic Factors of Skin Injury in Intensive Care Units

PI: Andrea Conley, MSN, RN, AGCNS-BC, CMSRN; Brooke Randol, MSN, RN, AGCNS-BC, CMSRN, CWS

Twice Daily Nurse-Driven Spontaneous Awakening Trials Improves Delirium

PI: Kellie Girardot, MSN, RN, AGCNS-BC

DoubleCHEK for Feeding Tube Placement in Premature Infants

PI: Jennifer Thieman, MSN, RN, ACCNS-BC, RNC-NIC, C-ELBW, CLS

Outcomes Related to the Use of a Standardized Tiered Skill Acquisition Model

PI: Stephani Schultz, MSN, RN, NPD-BC, CMSRN; Holly Platt, MSN, RN, NPD-BC, RN-BC; Abby Gaff, MSN, RN, NPD-BC, CMSRN; Chelsea Tetzlaff, MSN, RN, NPD-BC, CEN; Donna Hitzeman, BSN, RN, NPD-BC; LaToshia Gilbert, MSN, RN, NPD-BC; Meghan Winebrenner, BSN, RN, NPD-BC

Nursing Evidence-Based Practice Survey Assessing Nursing Knowledge

PI: Lisa Morgan, MSN, RN, CNRN, AGCNS-BC; Jan Powers, PhD, RN, CCNS, CCRN, NE-BC, FCCM, FAAN

A Quantitative Pilot Study to Assess the Effect of a Weighted Blanket Intervention for Agitation Reduction on Patients in Medical Units

PI: Andrea D. Conley, MSN, RN, AGCNS-BC, MSCRN; Kristen Emenhiser, BSN, RN, CMSRN; Rebecca Havens, BSN, RN, CMSRN

Nursing Research

Research Study Highlights

STUDY 1

Project ROSC-O: The Impact of Leadership on Innovation

Investigators: Kaylyn Kistler, BSN, RN-BC, (principal investigator), Michelle Wood, MSN, AGCNS-BC, CV-BC and Tom Ibholm, MBA, BSN, RN

Since March 2023, therapy dog ROSC-O has become a Parkview celebrity and everyone's favorite co-worker. Did you know he got his start because a clinical nurse asked a curious question?

The purpose of this research study was to evaluate the implementation of a therapy dog program on the comprehensive heart treatment (CHT) unit using the Copenhagen Burnout Inventory to measure staff burnout in three categories: personal, work-related and client-related. Comparison of the pre- and post-survey data will help identify if therapy dogs have improved overall staff satisfaction and decreased burnout on the unit



Kaylyn Kistler, RN BSN, Parkview Heart Institute with therapy dog ROSC-O.

STUDY 2

A Randomized Control Trial to Compare NPO status against a Specialized Pre-Cardiac Cath Diet

Investigators: Carri Woods MBA, MSN, RN, Michelle Wood, MSN, AGCNS-BC, CV-BC, Angela Boylan BSN, RN, CV-BC

The purpose of this research study was to identify best practice for NPO ("nil per os," or "nothing by mouth") status prior to a cardiac catheterization through a comparative evaluation. This prospective, randomized control study evaluated current standard of care NPO guidelines and a specialized pre-cardiac catheterization diet in low-medium risk patients undergoing elective cardiac catheterization. Outcome measures include patient reported satisfaction and rates of aspiration, emergent endotracheal intubation, hospital acquired pneumonia (HAP) and nausea/vomiting.

This study found no difference between patients who were kept NPO versus those allowed to eat a cardiac diet. Based on these results, change in practice has been made to allow patients to eat a cardiac diet prior to their cardiac catheterization procedure.

Nurses Disseminate Their Work Through Publications

2022:

- Improved Patient Safety and Quality Outcomes with Amiodarone Infusions
 - Carri Woods, Michelle Wood, Penny Hughes, Jan Powers
- The Roles and Contributions of Certified Transport Registered Nurses in Critical Care Ground Transport Today
 - Jennifer Esslinger and external authors
- Impact of a COVID Mobility Team
 - Kellie Girardot, LeaAnn Pancake
- Interactive Sepsis Education Program Improves Nurses' Knowledge and Impact on Sepsis Patient Outcomes
 - Jennifer Rechter, Emily Plant, Rachel Buckholz, Jan Powers
- Your Role in Infection Prevention
 - Jan Powers and Candace Rogers
- COVID-19 Vaccination Clinic Success: An Interdisciplinary Application of Simulation and Modeling
 - Tammy Toscos, Victor Cornet, Michelle Charles, Erica Cumbee, Charlotte Gabet, Ethel Massing, Scott Stienecker
- Golden Hour Education, Standardization and Team Dynamics: A Literature Review
 - Alyssa Doak
- Challenges of Deimplementing Feeding Tube Auscultation: A Qualitative Study
 - Jan Powers and external authors
- ASPEN EN Task Force: When is Enteral Nutrition Indicated?
 - Jan Powers and external authors

2023

- Innovative Strategy to Improve EN in Prone Position with COVID-19
 - Jan Powers, Janette Richardson, Jennifer Rechter
- Clinical Nurse Specialist Tracheostomy Management Improves Patient Outcomes
 - Janette Richardson, Jan Powers, Kellie Girardot, Michele Kadenko-Monirian
- Multi-site Evaluation of Toothbrushes and Microbial Growth in the Hospital Setting
 - Jan Powers and external authors
- AACN Practice Alert Manual Prone Positioning
 - Jennifer Rechter and external authors
- CLRT, Kinetic Therapy and Ambulation in Critical Care Procedure Manual
 - Jan Powers and Kellie Girardot
- Collaborative Model for APRN Practice
 - Jan Powers, Michelle Wood, Janette Richardson, Maria Ambush, Stephanie Kefer



Nursing Research

Research Repository

From January 1, 2022 to December 31, 2023, there were 5,294 nursing research downloads from the Parkview Research Repository. Parkview's new institutional research repository is a place where research and scholarly output will be preserved and shared with the general public. Made possible by the Parkview Resource Library, the Parkview Health Research Repository is on a Parkview-branded site on the Digital Commons Network™, which makes the work created at Parkview accessible worldwide through permanent URLs while establishing intellectual property rights. This map shows all downloads for nursing research protocols, posters and publications worldwide during that timeframe.



Research Award Winners

2022 Winners

Researcher of the Year: Jan Powers

First Published Research Study: Michelle Wood, Comparative Evaluation of Chest Tube Insertion Site Dressings: A Randomized Controlled Trial

Most Innovative Research Study: Linda Otis, Postoperative Vital Signs: Traditional Versus Evidence Based

Most Improved Clinical Outcomes in a Research Study: Michele Kadenko-Monirian, Self-Prone in Non-Intubated Patients with COVID-19: A Strategy to Avoid Intubation

Most Viewed on Nursing Research Repository: Michele Kadenko-Monirian, Self-Prone in Non-Intubated Patients with COVID-19: A Strategy to Avoid Intubation

2023 Winners

Researcher of the Year: Michelle Wood

Most Innovative Research Study: Kaylyn Kistler, Project ROSC-O

Most Improved Clinical Outcomes in a Research Study: Kellie Girardot, Twice Daily Nurse-Driven Spontaneous Awakening Trials Improves Delirium

Most Viewed on Nursing Research Repository: Jennifer Rechter, Interactive Sepsis Education Program Improves Nurses' Knowledge and Impact on Patient Outcomes

Nursing Informatics *and* Virtual Care

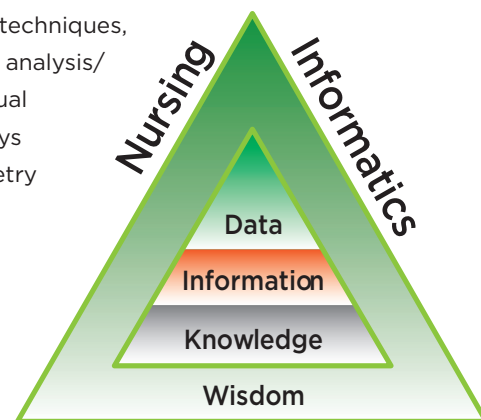


Michelle Charles, DNP, MSN, RN-BC
SVP and Chief Nursing Informatics and Virtual Care Officer, Patient Care Systems, Parkview Health

The integration of technology has become crucial in nursing care, with virtual care, Epic and MyChart Bedside, as well as iPhones, playing a significant role in mobile documentation and communication. The use of technology to support patient care is essential, but not without challenges. Nurses find themselves stretched to manage the day-to-day shift activities that need to be completed, plus ensure the safety of their patients. Technology is a conduit to help manage these complexities, which is why Parkview now has two newer teams who provide support in *and through* the use of technology.

The nursing informatics (NI) team was established in 2021 to address the gaps between the use of technology and nursing care. Then in 2022, the virtual care (VC) team was established with the goal of consolidating and executing multiple virtual care initiatives, including virtual sitting, virtual nursing and telemetry monitoring.

The teams, which are led by Michelle Charles, SVP and Chief Nursing Informatics and Virtual Care Officer, are composed of nursing and health informatics specialists who have extensive backgrounds in healthcare. They hold Epic certifications in various modules which enable them to troubleshoot, research and effectively build proof-of-concept changes in the electronic medical records. The informatics specialists are trained to use various software applications and project management techniques, and to complete data analysis/ visualization. The virtual care team also employs technicians for telemetry monitoring, virtual sitting and nurses for the virtual nursing programs.



Achieving Sustainable Results

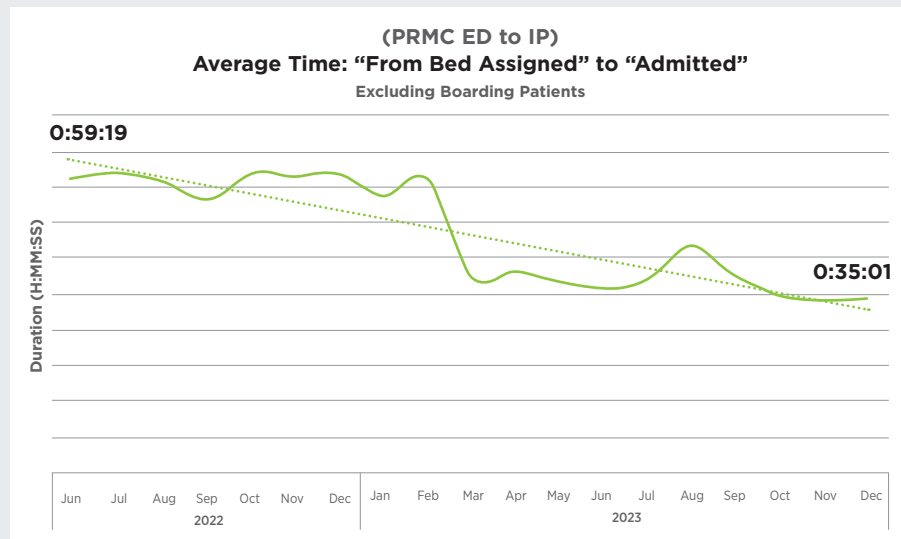
Nursing informatics (NI) is engaged in various projects aimed at enhancing clinical quality, safety and efficiency issues. The team is often asked to lead projects, act as consultants, complete workflow analysis, assist with data analytics or provide education and support. With their involvement, project teams drive toward improved health outcomes, clinician efficiency and satisfaction, patient satisfaction and cost containment.

The NI team has played a dual role over the past few years, acting as advisors to both HAPI and falls charters, and leading ad hoc teams as needed for each. Due to the collaborative efforts of all departments involved in the charters, Parkview has achieved a 36% rate reduction in HAPIs, a 40% decrease in falls with injury and a 33% decrease in all falls in 2023.

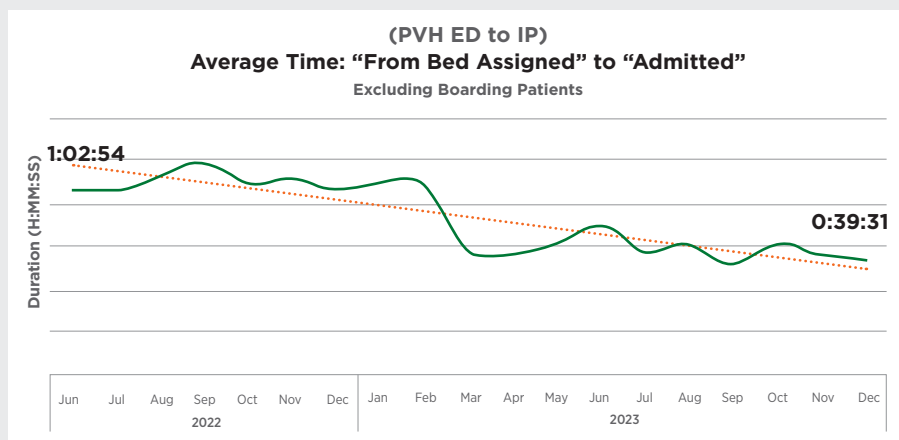
Nursing Informatics *and* Virtual Care

Recently, the NI team has been supporting an initiative to complete an overhaul of the workflows and ordering process for the outpatient infusion departments through the implementation of therapy plans. The pilot successfully decreased nurses' time transcribing orders and, as a result, improved patient safety. Because of the use of therapy plans, the health information management (HIM) teams have seen a large decrease in the number of items in their queue for reconciliation. Additionally, the average number of days to first billed decreased by 67%.

Thanks to an NI team initiative that aimed to standardize the virtual hand-off of patients between the emergency department and inpatient units, there has been a 39% reduction in time at Parkview Regional Medical Center and Parkview Hospital Randallia from when a bed is assigned to when a patient arrives on the unit.



PRMC decrease in average time: bed assigned to admitted



Parkview Health decrease in average time: bed assigned to admitted

Nursing Informatics *and* Virtual Care

Virtual care (VC) encompasses various healthcare services provided remotely through digital communication tools. When the Virtual Care Department was formed, they leveraged the same processes utilized by the NI team to obtain results for their projects. They participated in some of the same initiatives, such as the falls charter, to reduce the number of patient falls. This reduction in falls was due in part to the virtual sitter program.

Recent examples of projects completed for VC include expansion of the virtual sitting program throughout the community hospitals, supporting and developing surveillance programs utilizing virtual nurses and developing a blended care model that incorporates virtual nurses as part of the care team.

The NI and VC teams worked collaboratively with nursing leaders at Parkview Noble Hospital to implement a blended team nursing care model. The model utilizes RNs, LPNs, PCTs and virtual RNs to leverage each caregiver to the highest level of their scope of practice. Additionally, other components of the virtual care

portfolio of services were layered in to ensure quality measures were maintained, such as sepsis bundle compliance.

The six-month pilot was highly successful:

- 72% of admissions (average percentage for 2023) completed by virtual RNs
- Reduced overtime and premium pay
- Eliminated contract labor
- Reduced turnover rates
- Decreased nursing vacancy rates
- Improved patient satisfaction and nursing communication scores

The informatics model employed by NI and VC teams consists of several stages throughout a project's life cycle. The model is constructed by incorporating theories from Agency for Healthcare Research and Quality, Lean 6 Sigma, and Agile principles, as well as other project and implementation science approaches. In simplistic terms, the teams utilize four steps to develop a comprehensive plan to address a problem.



Nursing Informatics *and* Virtual Care



Usability testing for outpatient infusion pilot.

The efforts involved in this implementation of science processes can require multi-year commitments to achieve results. Implementing this approach ensures sustainable benefits for both clinicians and patients. Adopting this approach has made the value realization clear.

Leads to:

- ✓ Health outcomes
- ✓ Clinician satisfaction
- ✓ Patient satisfaction
- ✓ Cost containment

Before any solutions are implemented, extensive work is needed to complete simulation and usability testing. This step is crucial to understand if the proposed people, processes and technology solutions will achieve the desired outcomes.

Project management

Integrate the use of technology with nursing care and clinical care

Improve clinical quality, safety & efficiency

Measure impact

Improve clinician experience

Analyze workflow design

Data integrity, exchange & analytics



NI and VC teams serving at Ronald McDonald House.

The NI and VC teams, at their core, are committed to giving back to the community by volunteering their time. In November 2023, the team prepared and served a meal for families in the Ronald McDonald House, feeding upwards of 40 to 50 family members.

Developing a Custom Predictive Model

For more than 20 years, the case management team used the early screen score to prioritize patients. The score is based on subjective answers and is not reliable in determining patients who would need early case management intervention to address complex needs at discharge. It was also identified that patients with a discharge destination to a post-acute or continuing care location had a significantly longer length of stay compared to the geometric mean length of stay.

Stacey Bussel, DNP, RN, CCM, director of enterprise care management, Home & Transitional Services, Parkview Health, partnered with the Parkview Business Intelligence team to develop a predictive model that uses reliable data to identify patients who may have a discharge destination to a post-acute or continuing care location. This prediction would enable case managers to begin early discussions with patients, patients' families and treatment teams on appropriate post-acute placement and decrease length of stay.

Many variables were taken into consideration with the model, including:

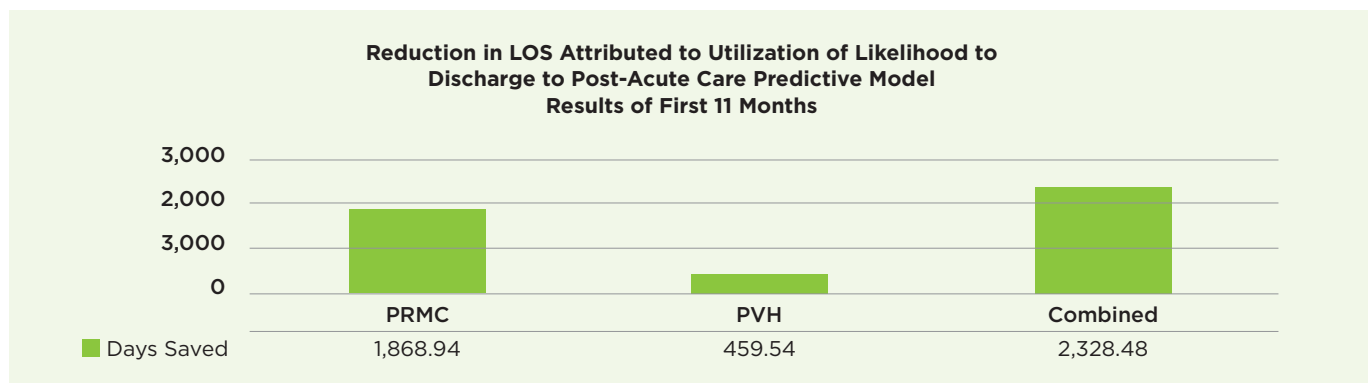
- Point of origin
- Patient age
- Deterioration index score
- Admission history: count
- Whether their last encounter included post acute care
- Chronic conditions (acute myocardial infarction, COPD, diabetes, heart failure, kidney disease, stroke)
- Lab values (comprehensive metabolic panel and complete blood count with differential)
- Payor class
- Procedure orders
- Medication orders

The model included patients of any age (excluding newborns) with a current inpatient admission to a Parkview Health facility (excluding hospice, rehab or psychiatry).

In March of 2023, the new model was introduced to the case management team, replacing the early screen score in their workflow. Each day when the case managers review their units, they can identify new admissions and the likelihood to discharge to post-acute care score. The score can also be viewed in the case management sidebar summary in Epic. Patients with a medium-risk score and a low-risk score are evaluated for discharge needs and prioritized by the team.

To determine effectiveness of the new predictive model, current patients were matched to patients from 2022 when the model was not active, based on location and post-acute setting. Included in the analysis were 94.7% of discharges to post-acute resources from Parkview Regional Medical Center and Parkview Health. Patients were grouped by risk score and then matched to the pre-model patient population for location along with gender, age, diagnostic-related group, average length of stay and payor. Each patient's diagnostic-related group and average length of stay was subtracted from their actual inpatient length of stay to get excess days. The excess days for the model patients and their matches were then compared.

Thanks to this predictive model, there was an annualized savings of just over 2,500 patient days or approximately \$7.5 million.



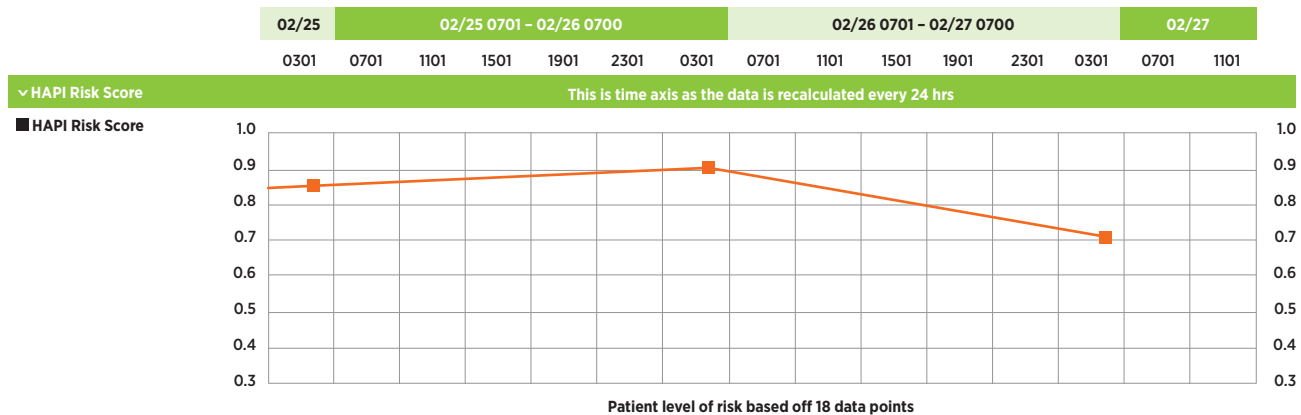
HAPI Prediction and Decrease

In early 2023, the Hospital Acquired Pressure Injury (HAPI) Charter Committee partnered with the business intelligence team to create a custom machine learning predictive model to identify patients' risk for developing pressure injuries (PI) during hospitalization. Currently, nurses utilize the Braden Scale assessment tool to identify risk for developing PI. This assessment is paired with the nurse's clinical judgement to determine what interventions are needed to prevent HAPIs.

Upon review of 240 HAPIs occurring in Parkview's ICUs from 2020–2022, it was found that the Braden Scale did not account for many factors that may contribute to PI risk. Extrinsic factors such as vasopressors, mechanical ventilation and various medical devices can increase risks. Likewise, intrinsic factors including hemoglobin, BMI, age and comorbidities also contribute to an

increased risk of PI development. Uncertainty with patients' risk for pressure injury impacts implementation of preventive interventions, focused assessment and nursing care.

A tool to identify patients at higher risk such as an EMR predictive model was needed. The model was built by David Franks, MHA, data scientist, IS Business Intelligence, Parkview Health. A pilot was carried out on the 6th and 7th floors at PRMC, and was facilitated by Andrea Conley, MSN, RN, AGCNS-BC, CMSRN, as well as nursing operations leaders. The initial model looked at 18 data points to determine a patient's level of risk. A second more refined version included over 30 data points. A score of 0–0.6 is low risk, 0.6–0.8 is moderate risk, and greater than 0.8 is high risk. The score is recalculated every 24 hours around 3 a.m.



Patients with a high predictive score were listed on a report and rounded on every Monday, Wednesday and Friday. During rounds, an assessment of risk factors, preventive interventions and current skin issues were noted.

Results showed a drop in HAPI occurrence and severity during the pilot period. The possible cause was early implementation of nursing interventions to prevent injuries and minimize the extent of tissue damage in injuries still occurring.

Ideally, this model will augment the Braden Scale and help bridge the critical thinking gap for the novice nurse workforce, providing a reliable and evidence-based resource to enhance decision-making and delivery of high-quality care. Plans to implement the model on all Parkview units are underway. The HAPI Charter Committee will partner with the nursing informatics team to identify the best approach to integrating the HAPI predictive model into everyday practice at Parkview Health.

Nursing Professional Development

Nurse Residency Program

The Parkview Nurse Residency Program was launched in 2015 with the mission of enhancing the well-being of the nurse through increased engagement, education and empowerment. The program's vision is to achieve committed nursing professionals that provide superior care.

Through interprofessional collaboration, the program was designed based on the standards and best-practice elements required by the Practice Transition Accreditation Program® (PTAP). The residency is a multi-site program present in 17 practice settings across 10 hospital sites. The program has welcomed approximately 300 new graduate nurses each year. Both BSN and ASN/ADN graduates have been accepted.

The program achieved success in the intended outcome measures, supporting our nurses and helping improve patient outcomes. It received accreditation through the PTAP in 2020 and supported Parkview Health's journey to system Magnet Recognition Program® designation in 2017 as well as re-designation in 2022 for Parkview Regional Medical Center and Affiliates. Now in its eighth year, the nurse residency has supported a total of approximately 2,300 residents.

The nurse residency includes the following: new hire orientation, JumpStart nursing orientation, skills, competencies, site/setting-specific learning with preceptors and mentors, Transition to Practice seminars, evaluations and assessments including the Casey-Fink Graduate Nurse Experience Survey^{®1} and a completion pin. The residents continue in their sites and settings with preceptors and mentors for practice-based learning using the Tiered Skills Acquisition Model (TSAM[®]).

A key part of the 12-month program is practice-based learning on clinical units with the guidance of preceptors, mentors and other key healthcare professionals. This learning focuses on mentoring, peer support, well-being, professionalism, time-management, communication, critical thinking, ethics, interprofessional teaming and social determinants of health.

In 2022 and 2023, the nurse residency program achieved success in several strategic goals.

Nursing professional development goal: Nurse residents (90% or greater) in 2022 and 2023 will set professional development goals by the end of their residency.

Outcome: Goal was met, with 95% of 641 nurse residents completing the activity for setting professional development goals by the end of their residency. The activity was offered during Transition to Practice seminars 1 and 2.

Learner competency goal: There will be an increase (2% improvement) in nurse resident competence in the areas of clinical judgement and delegation by the time nurse residents reach the end of residency.

Outcome: Goal was met. From December 2021 to December 2023, 410 nurse residents (22 cohorts) completed the Casey-Fink Graduate Nurse Experience Survey at least twice, and nine of these cohorts completed it a third time. The results indicate mean score improvements in both the delegation question cluster (5.36%) and the clinical judgment question cluster (6.17%). These results suggest an increase in self-reported competence for delegation and clinical judgement, which exceeded the 2% mean score percent improvement.

Nursing Professional Development

Self-reported measure goal (learner-focused):

Nurse residents will complete residency on time in 2022 (60% or greater) and in 2023 (80% or greater).

Outcome: Goal was partially met with incremental success in 2022, but not in 2023. The average on-time completion rate in 2022 of cohorts 22–33 was 60% when rounded (59.6%). The average on-time completion rate in 2023 of cohorts 34–45 was 51.5%, which dropped below the 2021 benchmark of 55%. Through environmental scanning and stakeholder feedback, several contributing factors were identified. In 2023, a subcommittee of several nursing leaders who were also members of the Nurse Residency Steering Committee began evaluating the number of learning requirements for nurse residents in their first year with a goal of exploring the possibility of reducing some of these requirements or delaying them until after the nurse residency.

Stakeholder evaluation goal: Stakeholders will report satisfaction (a score of 3 or greater on a 4-point scale) with the nurse residency program and clinical performance of nurse residents for the period of January 2022 to January 2024.

Outcome: Goal was met. There were 52 stakeholders who took the Nurse Residency Program Stakeholder Evaluation Survey (NRP-SES)². The mean total score equaled 3.23, which was higher than the 3.0 benchmark. All subscale mean scores were greater than 3 as well. Stakeholders included chief nursing officers, directors, managers, clinical nurse leads, nursing professional development practitioners, clinical nurses specialists and preceptors.

Financial goal: Nurse resident first-year retention will increase by 1% by the end of 2022 and further increase by 1% by end of 2023.

Outcome: Goal was met. Compared to the benchmark rate in 2021 of 80.11%, the first-year retention rate for nurse residents increased to 87.57% (7.46% increase). An incremental increase continued in 2023, with the first-year retention rate rising to 92.48% (4.91% increase). These increased retention rates may have helped the organization save over **\$1M** across the two years³.

Overall, the nurse residency’s composite design provides robust nursing professional development to address the experience-complexity gap and “reality shock” so many new nurses face. The program continues to support the well-being of new nurses and improved quality outcomes. The program is a key investment for nurses at Parkview Health and seeks PTAP® re-accreditation in 2024.

References:

1 Casey, K., & Fink, R. (2006). Casey-Fink Graduate Nurse Experience Survey. University of Colorado Hospital. Medium. <https://www.uchealth.org/wp-content/uploads/2016/10/PROF-CF-survey2006.pdf>

2 Failla, K., Ecoff, L., Stichler, J., & Kendal, C. (2021). Psychometric testing of a nurse residency program stakeholder evaluation survey. *Journal for Nurses in Professional Development*, 37(6), 353-357. <https://doi.org.10.1097/NND.0000000000000707>

3 Plescia, M. (2021, October 14). The cost of nurse turnover by the numbers. *Becker’s Hospital CFO Report*. <https://www.beckershospitalreview.com/finance/the-cost-of-nurse-turnover-by-the-numbers.html>

Nursing Professional Development

eXceed Nursing Recognition Program

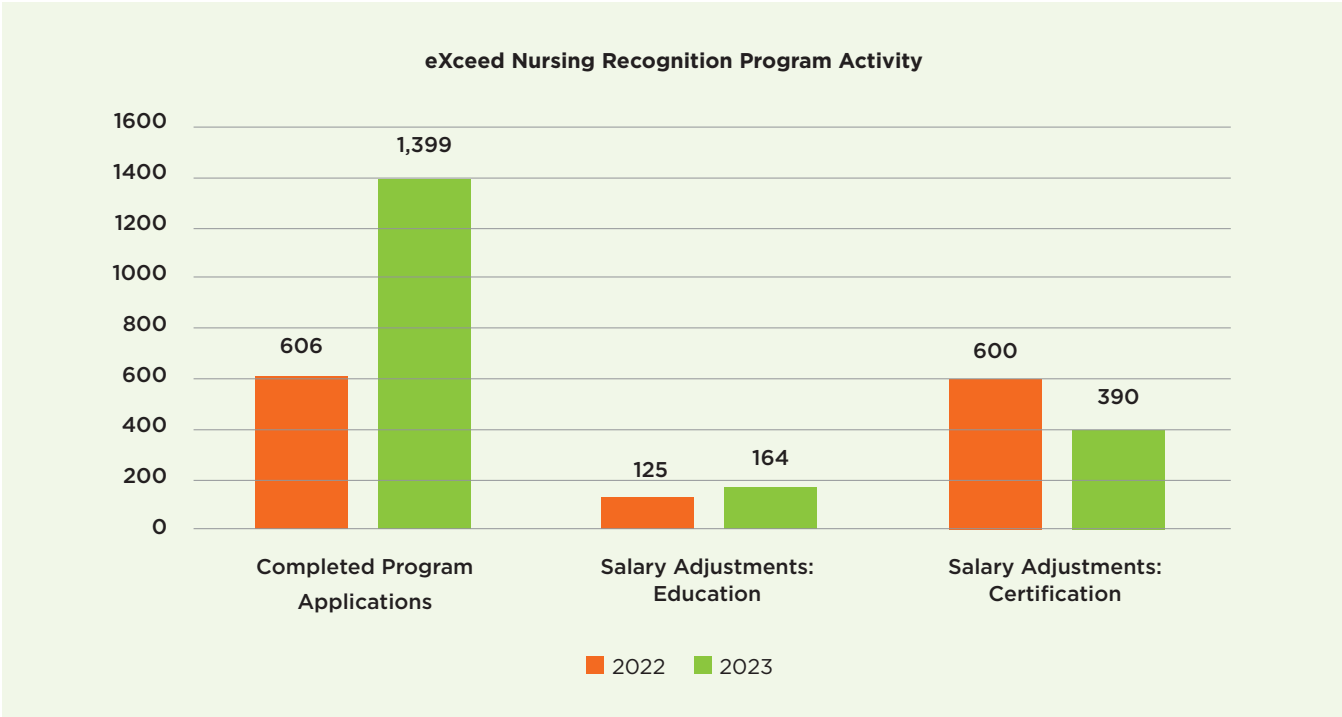


The eXceed Nursing Recognition Program launched in May 2022 and quickly gained popularity among nurses across the health system. Established to reward and recognize nurse engagement, the program offers participants the opportunity to highlight their professional development and practice while driving organizational outcomes for nurses and patients in the desired direction.

eXceed is an application-based, voluntary program that opens twice per year. Registered nurses, licensed

practical nurses and student nurse apprentices in any practice setting can participate by submitting evidence of their engagement in council work, research and evidence-based practice, well-being events, mentoring, precepting, quality improvement and more. Additionally, through eXceed, nurses may be eligible for salary enhancements for achieving graduate degrees in nursing and professional nursing certification.

An advisory committee of clinical nurses from across the system determines the available activities for eXceed each year and helps to champion program participation. In both 2022 and 2023, participation surpassed the annual eXceed program goals set in the nursing strategic plan by 64% and 81%, respectively.



Nursing Professional Development

Student Nurse Program

The Parkview Student Nurse Program launched in April 2022 to increase the practice readiness and pipeline of new graduate nurses choosing Parkview to start their careers. Comprised of three levels, the program provides employment opportunities for individuals ranging from high school students curious about nursing as a career to university students nearing completion of a degree in nursing.

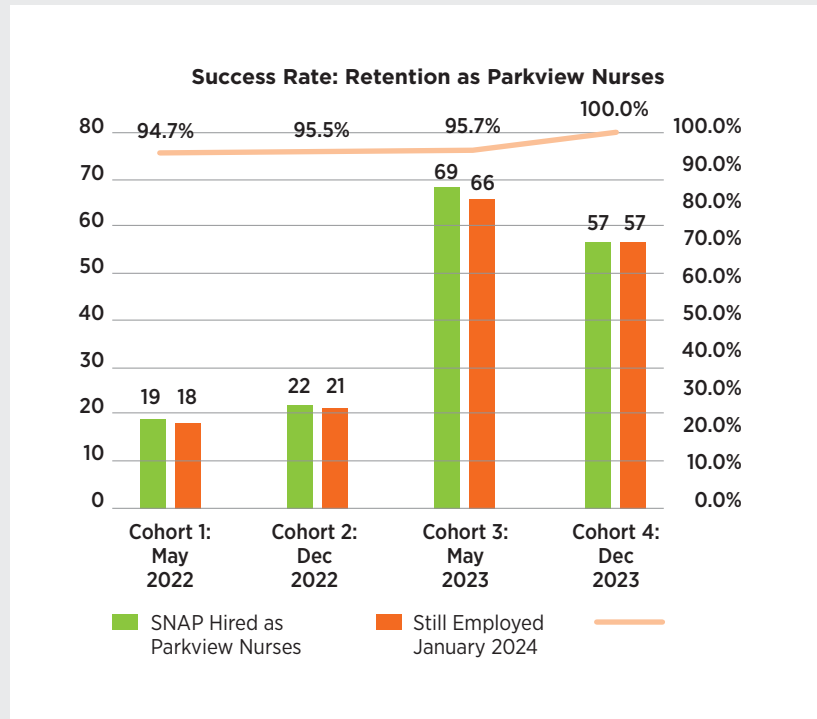
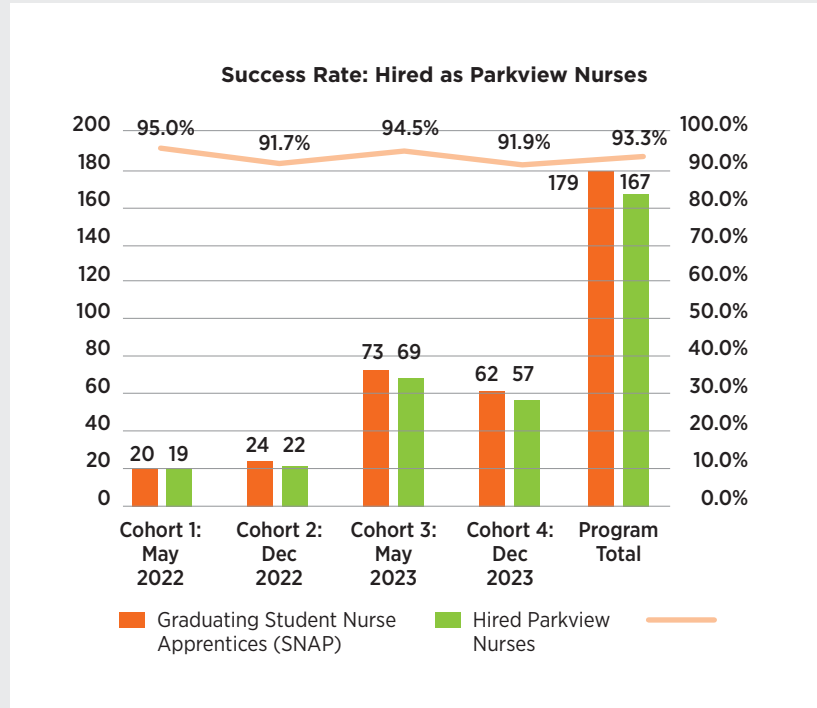
The program has three levels:

1. Student nurse assistant
2. Student nurse technician
3. Student nurse apprentice

Each level in the program contains a specific goal.

At the student nurse assistant level, the goal is to inspire students to pursue a career in nursing through witnessing the profession firsthand alongside their assigned nurse mentor. At the student nurse technician level, the goal is to allow students to explore different specialties and practice settings to get a sense for where they see themselves as nurses. At the student nurse apprentice level, the goal is for teams to embrace each student with early job offers and a jumpstart in nursing orientation.

Since the program launch, 167 of 179 (93.3%) graduating student nurse apprentices accepted positions as Parkview nurses, and among them, more than 94% remained Parkview nurses at the 18-month mark post-graduation. At the end of 2023, 290 students were employed in Student Nurse Program roles across the system.



Nursing Professional Development

New Graduate Signing Days

Starting with the May 2022 graduating class, Parkview nursing and talent acquisition partnered up to host signing days for nursing graduates at several universities across the region for those who have accepted early job offers for RN or LPN positions. Parkview's signing days are celebrations of graduates' commitments to their careers and Parkview, and are a way to honor their hard work over the course of their academic programs.

Modeled after similar events for athletes, the signing days for nurses provide opportunities for students to commemorate their decision to become Parkview nurses by snapping photos with their hiring managers, university faculty, family and friends. It's not uncommon to see these photos circulating social media, gathering praise and congratulations as graduation ceremonies

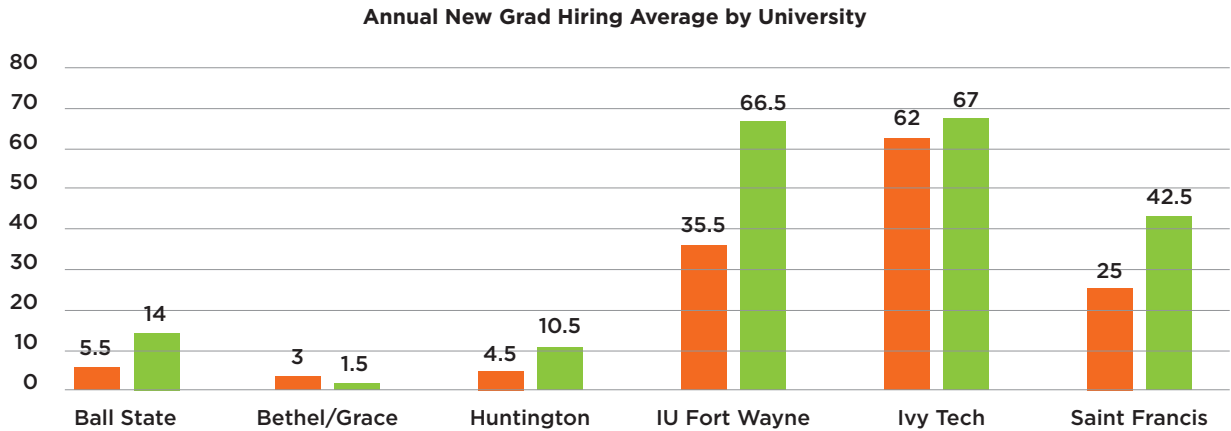
near. Including lunch, gifts and a warm welcome to the Parkview nursing family, these signing days have become events that students do not want to miss.

To date, hundreds of nurses have experienced a signing day at one of Parkview's partner universities.



Nursing Professional Development

Academic Partnerships



In the fall of 2022, the Parkview nursing clinical instructor role launched to support new graduate practice readiness and faculty position stability among area universities. Four masters-prepared Parkview nurses with teaching or clinical instruction experience were hired into these full-time roles that are assigned to partner universities as gifted faculty.

Parkview nursing clinical instructors teach clinicals across a variety of specialties, including med-surg, critical care, and women's and children's. Their experience with

Parkview's nursing culture, policies, procedures and equipment makes them effective and trusted among clinical students.

By the fall of 2023, Parkview had eight nursing clinical instructors placed with six regional universities teaching clinicals across several health system hospitals. A review of student and university feedback has remained high as the roles have expanded. As an added benefit, when examining new grad hiring, Parkview has seen an average of 66.5 more hires per year post role from these partner schools.

New Nursing Programs



Since 2022, Parkview nursing professional development, student services and talent acquisition have partnered with three regional universities on new nursing degree programs. Recognizing the need to support working professionals

who desire a change in career, Indiana Tech, Huntington University and Parkview Health have launched an accelerated BSN program, which provides the opportunity for individuals with a bachelor's degree in another field to bridge to a Bachelor of Science in Nursing (BSN) in an intensive 13-month program. Graduates receive a BSN from Huntington University while completing courses on the state-of-the-art Indiana Tech campus.

Parkview nursing professional development, student services and talent acquisition have also worked with Taylor University on the planning and development of the university's first-ever nursing program. With its first graduating class set for 2028, Parkview has contributed to many critical aspects of the program including selection of the program dean and clinical faculty, curriculum development and clinical placements, which will exclusively take place in Parkview Health locations.



Mental Health *for* Co-workers

Co-worker Experience Team and CARE Program

Healthcare organizations have faced historical turnover since 2020. Nursing engagement and retention has a direct impact on a healthcare system's patient satisfaction and quality of care. Parkview Health established the Co-worker Assistance, Retention, and Engagement Program (CARE) to support co-workers personally and professionally as they work to achieve their goals. CARE, managed by Parkview's co-worker experience team, is Parkview's innovative response to increase co-worker engagement and decrease turnover. Individually assisting over 11,000 co-workers (with the majority being nurses) since its creation, this innovative program has resulted in a return on investment that transcends the traditional financial measurements and has shown that compassion is key to an engaged workforce.

Co-worker Assistance

The Co-worker Assistance Program is a unique retention tool that recognizes and prioritizes the whole person and not just the co-worker by providing one-of-a-kind assistance to those in need. Life happens outside the walls of the facilities our nurses work in each day. This program lends a helping hand to Parkview nurses who have unmet social or basic needs, either for themselves or their families. Equipped with a network of internal and community connections, the team meets nurses where they are and provides the resources, support and encouragement they need to succeed.

"This program helped me through a very difficult time and made work my safe place. My family is forever thankful for the help we have received. I am very thankful for all that Parkview does to help their employees in their time of need. It's one of the best programs Parkview has to offer."

– Parkview Nursing Co-worker

Retention & Engagement

Not all jobs are meant to be forever, and the need for change does not have to be a negative situation. Flexibility with internal mobility allows for Parkview to retain nurses. Right work, right time, right role: when any of these three are not correct, it could have a negative impact on retention and engagement. Creating a culture where nurses have flexible options for their careers ensures a loyal and engaged workforce. Furthermore, co-workers take ownership over what they want from their careers, where and when they want to work and how they want their personal goals and professional purpose to align.

This program ensures correct placement based on skills, experience and individual needs via two pathways: internal mobility sourcing and Parkview's match program. Since its formal development in 2022, 95 nursing co-workers have been matched to new roles, and this individualized approach has resulted in a 90% success rate* for retention following a match.

*Success rate is measured by co-worker's active employment status one year after match date.

"I felt truly blessed to be able to be a part of the match program. My journey has been a humbling one, and all of those that helped me along the way were kind and patient with me. I felt valued and supported. Thank you from the bottom of my grateful heart for the opportunity to work for this great health system. I am Parkview proud."

– Parkview Nursing Co-worker

Nursing Excellence and Outcomes *Across Parkview*

*Parkview Archbold, Parkview Bryan Hospital,
Parkview Montpelier Hospital*



Nursing Education and Improved Patient Outcomes

On October 1, 2023, Community Hospitals and Wellness Centers became Parkview Bryan Hospital, Parkview Montpelier Hospital and Parkview Archbold. Providing comprehensive and patient-centered care, our healthcare teams are proud to serve our local communities.

As our three Ohio facilities now join Parkview Health, we look forward to utilizing Parkview's knowledge, expertise, and resources to enhance healthcare excellence. In recent years Parkview Bryan Hospital, Parkview Montpelier Hospital, and Parkview Archbold have focused their efforts on nursing education and patient excellence. Nursing education plays a vital role in not only improving one's own knowledge base and skill set, but also in increasing the quality of care patients receive.

From professional conferences, nursing ladder participation, certifications, competencies, professional memberships and nursing advisory committees to

obtaining advanced nursing degrees and passing accreditation, our nursing teams strive to apply the latest advancements in healthcare to their everyday practices.

Over two hundred nurses strong, our efforts in the last few years have not gone unnoticed. Recognized as one of the Top Performer Hospitals in 2022 and 2023 and receiving multiple 5-Star National Excellence in Healthcare awards from Professional Research Consultants (PRC), nurses throughout our organization drive quality excellence by way of core value, teamwork and determination.

Our Parkview Ohio hospitals are proud to carry on our quality care model in every aspect of our patients' care. May we show appreciation and support to all nurses, recognizing them for their hard work and dedication to their patients, patient's families and the communities they serve.

Nursing Excellence and Outcomes *Across Parkview*

Parkview DeKalb Hospital

Using Evidence for Care Improvements

Clarity, competence, confidence, collaboration and compassion. These five Cs describe the Parkview DeKalb nurses' commitment to their calling of nursing over the last two years. I am incredibly grateful and impressed by watching our nurses flourish while advancing nursing at Parkview Health. Parkview DeKalb nurses' participation in making positive changes to nursing practice and outcomes was achieved over the past couple of years.

During the 2022-2023 Parkview evidence-based nursing fellowship, Kristen Schultis, BSN, critical care nurse leader, ICU, Parkview DeKalb Hospital, wondered why intake and output (I & O) documentation was completed every eight hours at set times when the nurses work 12-hour shifts. Kristen conducted a literature search that revealed there was no evidence to support every eight-hour I & O documentation other than "we have always done it this way." Next, she received support from clinical nurse specialists and audited charts for compliance with every eight-hour I & O charting. The audits showed nurses were completing I & O at varying intervals without adverse effect to the patient's treatment plan.

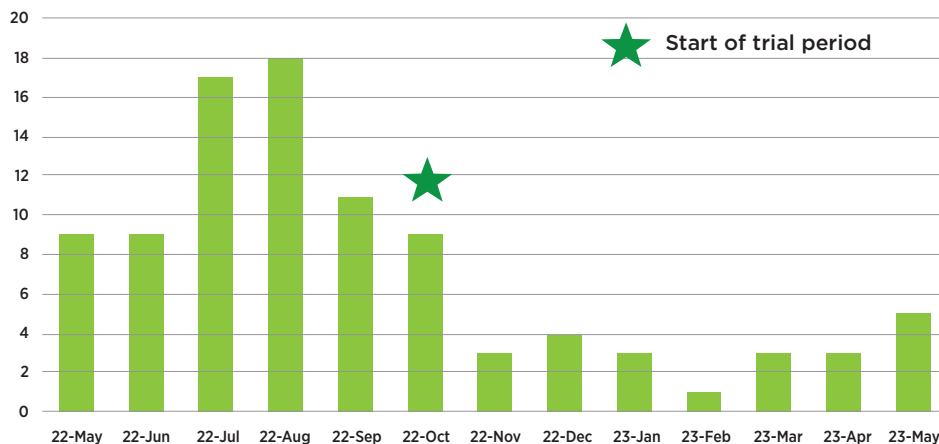
Kristen worked with the system's Professional Practice Committee to change the I & O documentation from eight-hour intervals to documenting I & O as needed during the shift, totaling I & O at the end of the shift and/or at any other handoff. Kristen's curiosity and initiative resulted in system-wide change in I & O documentation standards. This is a great example of

using evidence to improve nursing practice and decrease unneeded documentation.

Another example of a care improvement was related to blood culture contamination (BCC), which can compromise quality of care and lead to unnecessary antibiotic use and increased length of stay of patients in a hospital. Chotsie Johnson, MSN, RN, CEN, emergency services manager, Emergency Care, Parkview DeKalb Hospital, and Adam Hartman, BSN, RN, CIC, infection preventionist, Infection Control, Parkview DeKalb Hospital, led a pilot project with the Parkview DeKalb Hospital emergency department nurses to decrease BCC at our hospital.

Parkview DeKalb Hospital had an average BCC rate of 5.45%, and the goal was to decrease the contamination rate to under 2%. Focused education with returned competency failed to see improvement in BCC. From October 2022 to December 2023, emergency department nurses trialed two different blood culture initial specimen diversion devices (ISDDs). The first device decreased the BCC rate to 1.52% with the second device having a contamination rate of 2.48%. The introduction of an ISDD significantly reduced contaminations. The device chosen by the nurses reduced the BCC by 72.11% and had an 88.7% compliance with usage of the device. The pilot was wildly successful due to the nurses' determination to decrease harm to our patients. The ISDD is to be rolled out to the rest of Parkview's emergency departments in 2024.

Total Number of Contaminations Pre- and Post-Implementation



Nursing Excellence and Outcomes *Across Parkview*

Parkview Huntington Hospital

Improving Patient Care in the ED

Parkview Huntington Hospital (PHH) nurses identified an opportunity to improve workflow and care to patients in the emergency department (ED). Quickly collecting specimens in the ED is important for the timely treatment of patients, and the lab results are required to form an accurate clinical picture and create a comprehensive treatment plan. Delays in specimen collection leads to delays in patient care, increased length of stay and decreased patient satisfaction.

Matthew Bomba, MSN, RN, CEN, manager, Emergency Department, Parkview Huntington Hospital, identified an opportunity for urine collection times in the department. Specifically, urine collection times were greater at the PHH ED compared to other EDs within Parkview. Matthew discussed his concerns with the Nursing Clinical Action Team chair, who then took the issue to the NCAT meeting to brainstorm a solution. The NCAT team discussed many options and felt that a visual indicator for a urine order would be the most effective solution and would lead to decreased urine collection times.

A visual indicator was created in Epic for a urine order, including a red flag and timer on the Epic track board to serve as a visual reminder to nursing staff that a urine specimen is ordered and that the specimen needs to

be collected. The flag appears upon a provider placing an order for a urine specimen and is accompanied by a timer to indicate how long the urine has been ordered and uncollected. Upon collection, the red flag turns to a green checkmark and the timer stops counting, indicating to staff and providers that the urine has been collected. Education was provided to all department staff, and the flag and timer were added to each coworker's Epic track board.

Baseline median urine collection time prior to the intervention was 46 minutes. Three months after the intervention, median urine collection time decreased to 34 minutes. Ongoing evaluation of the project continues to ensure long-term success. The top five co-workers with the quickest urine collection time are recognized weekly on a bulletin board in the department. Each staff member is provided their median collection time monthly, so it can be compared with the overall median department collection time. The urine flag and timer can be added to all Parkview ED track boards, and this information was disseminated at the ED service line meeting. By collaborating with a multidisciplinary team, a positive change was implemented that improved patient care in the ED.

Parkview LaGrange Hospital

Making an Impact with the Swing Bed Program

The nursing team at Parkview LaGrange Hospital works hard to make a lasting impact in their community, taking ownership of the effect they have on the people they live and work with.

The swing bed program at Parkview LaGrange Hospital is a continuing care program with the goal of getting patients back home. Swing bed is a Centers for Medicare & Medicaid Services (CMS) designation for critical access rural hospitals. One of the guiding principles of a swing bed is the functional gain of the patient through the interdisciplinary team. This team is made up of physicians,

nurses, case managers, dietitians, therapists, respiratory team members and pharmacists. Our CMS designation also requires us to look at more medically complex patients, making swing beds a good fit for patients who no longer need an acute stay, but do need more attention than in a normal skilled bed at an extended care facility. Parkview LaGrange has been working to build their swing bed program since 2007.

One such example of the impact of Parkview LaGrange Hospital's nursing care is of a patient recently discharged from the swing bed program who had complicated medical needs after a traumatic fall, resulting in a total

Nursing Excellence and Outcomes *Across Parkview*

Parkview LaGrange Hospital

shoulder arthroplasty and a vascular injury. The patient was admitted to our swing bed program from her acute stay at another location. She had a complicated medical history including a stroke and cervical spine surgery. Due to the vascular injury, the patient came to Parkview LaGrange Hospital with a fear of falling and sustaining further injury. The nurses demonstrated a delicate balance of support and encouragement to help the patient gain back her functionality and confidence.

Shannon Reinbold, BSN, RN, CMSRN, nurse leader, Medical-Surgical, Parkview LaGrange Hospital, has had a great impact in helping patients establish goals in

conjunction with therapies that encourage and push them. This interdisciplinary approach, with nursing overseeing the plan of care, allows patients to continue gaining confidence and strength, and move from needing assistance to more independent living. Parkview LaGrange Hospital nursing also works hard to ensure the documentation is in an appropriate format for insurance review. These notes are specialized to assist case management in communicating with insurance. The aforementioned patient stayed at Parkview LaGrange Hospital for 25 days. With nurses supporting her care 24/7, she was discharged home and has stayed there, safely, for the past six months.

Parkview Noble Hospital

Implementation of a Blended Nursing Model

The last several years have been filled with changes that have gone far beyond what many in our communities had ever envisioned. Healthcare has been challenged like never before to meet the needs of their communities, all while working within constraints of finite resources. The old saying, “Necessity is the mother of all invention” can also be said for innovation.

The nursing staff on the medical-surgical unit of Parkview Noble Hospital (PNH) are a testament to how embracing innovation to meet the needs of patients can make a difference to patients and a department. Team nursing is not a new concept, but the opportunity to combine that team nursing mentality with virtual nursing is new.

In early 2023, the opportunity to invite virtual nurses into the workflow of Parkview Noble Hospital’s med-surg floors was presented. The potential to work collaboratively with a virtual nurse was clearly valuable. Virtual nursing could maximize bedside nurses’ efforts spent caring for patients. Emily Plant, MSN, RN, inpatient manager, Medical-Surgical, Parkview Noble Hospital, and the virtual nursing team, began planning a roll out of a blended nursing model with the input of bedside nurses on the unit. They held biweekly workgroup meetings to plan for the launch of this new collaboration and discussed barriers in the model’s implementation and solutions to problems that arose during the implementation phase.

With the support of leadership, feedback from bedside nurses and a spirit of collaboration, blended nursing was fully implemented for patient admissions in September 2023. Virtual and bedside nurses work together to ensure that new patients are admitted to the unit with the best care. Virtual nurses assist with the admission navigator while bedside nurses can focus on the physical needs and care of the patients. With the success of admission collaboration, PNH is looking forward to the next steps in the blended nursing model. We have seen increases in our Hospital Consumer Assessment of Healthcare Providers and System (HCAHPS) domains of overall rating of the hospital and nursing communication scores and saw a decrease in our percentage of nursing position openings throughout our implementation of blended nursing.

Parkview is so proud of the PNH team and their ability to push forward to the frontlines of innovations and initiatives. The focus on continuous improvement of processes has led us to quality care outcomes that truly stand out.

- Patient satisfaction saw an increase in the overall rating of the inpatient unit from 72.5 in 2022 to 76 in 2023
- Nursing communication increased from 77.4 in the second quarter 2023 to 80.4 at the end of the fourth quarter 2023
- Nurse vacancy rate decreased from 40% in 2022 to zero open nursing positions in December 2023

Nursing Excellence and Outcomes *Across Parkview*

Parkview Ortho Hospital/SurgeryONE

Excellence for Orthopedic Patients

Parkview Ortho Hospital (POH) is the first specialty hospital in northeast Indiana devoted solely to orthopedic surgery and post-surgery patient care. Here, patients can receive breakthrough technologies, as well as advanced orthopedic surgeries and treatments for arthritis, hand and foot surgery, neck and spine surgery, fractures and sprains, sports injuries, pain management, total and partial joint replacement surgery and work-related injuries. The hospital contains 10 surgical suites and one procedural suite. Parkview Ortho Hospital also has full MRI capabilities and its own gym with rehabilitation programs including occupational, physical, inpatient and outpatient therapies.

Parkview SurgeryONE (PSO) is an ambulatory surgery center containing six operating rooms, four procedure rooms and six 23-hour beds. These two facilities allow patients to obtain world-class orthopedic care through our partnership with Ortho NorthEast (ONE) physicians.

POH and PSO have surgical care coordinators on staff to guide preparation, education, pre-admission testing and optimization, and medical clearance for our patients. Patients can also access educational classes, either live or online, with access to our nursing team for personalized education. POH and PSO have a dedicated anesthesia group specializing in regional anesthesia, allowing patients to receive a replacement without requiring full general anesthesia, for quicker wake-up times, fewer complications and shorter recovery periods.

Parkview Ortho Hospital and Parkview SurgeryONE always aim to stay on the cutting edge of new technology and procedural developments to serve patients, utilizing new robotic technology and custom implants. They also focus on increasing the number of same-day discharges for joint replacement surgeries and spinal fusion procedures in order to get patients back to the comfort of their homes and on the road to recovery faster. Through our surgical techniques, lengths-of-stay for these common surgical procedures has been reduced to a goal of same-day discharge.

Orthopedic care at POH and PSO is a team sport with a focus on multidisciplinary collaboration in the care of patients and families. At the core of this care are our highly

dedicated nurses who specialize in all facets of patient care. Many of our registered nurses hold certifications in operating room nursing (CNOR) and orthopedics (ONC) along with other associated certifications. The specialty relies on advanced technology in the operating rooms through our EMR and focused communication workflows. The nursing staff is known for some of the highest patient satisfaction scores while focusing on continuous quality improvement.

POH has been recognized by The Joint Commission as a Center of Distinction for spine, knee and hip care. These certifications highlight our commitment to continuous performance improvement, providing high quality patient care and reducing risks. POH underwent a validation survey for hip and knee care in October 2023 and a validation survey for spine care in January 2024. These were one day surveys with a focus on quality improvement metrics.

POH excelled at all their metrics during these surveys but was particularly proud of the progress made in having patients attending pre-operative educational classes. In 2022, 45% of patients attended the knee class and 50% of patients attended the hip class. In 2023, attendance rose to 75% for the knee class and 75% for the hip class. Spine class attendance has been maintained well above 95% for several years. Net promoter scores of patients and family members who attend the pre-operative class conducted by our registered nurses indicated that 94% of patients would recommend our facility to others for their care.

Our strategies for success involved streamlining the process to register for a class and offering multiple in-person and online options. A restructured and organized guidebook for each surgery reinforces the class content. Our nurses continue to refine the education process through patient education in MyChart and utilizing QR codes to navigate the patient to the exact content needed. We also continue to increase patient satisfaction by ensuring education and information regarding safe discharge to home. We saw an increase in the number of patients who are discharging on the day of surgery from both our specialty hospital and ambulatory surgery center.

Nursing Excellence and Outcomes *Across Parkview*

Parkview Physicians Group

Ambulatory Care Nursing

Parkview is proud of the Parkview Physicians Group (PPG) ambulatory care nurses in their demonstration of the defining characteristics of ambulatory nurses and their commitment to providing the best care to our patients every day. The defining characteristics that differentiate ambulatory care nursing as a distinct specialty include:

- Requiring critical reasoning and astute clinical judgment to expedite appropriate care and treatment, especially given the patient may present with complex problems or potentially life-threatening conditions
- Providing quality care to individuals, families, caregivers, groups, populations and communities throughout their life span
- Occurring across the continuum of care in a variety of settings¹

PPG ambulatory nurses continue to demonstrate care for the whole person as they learn new skills and new practices in providing care. They showed they can adapt to the changing needs of patients as we came out of the pandemic and they have worked collaboratively and independently to provide care to address patients' wellness, acute illnesses, chronic diseases, disabilities and end-of-life needs.

In 2022 and 2023, PPG Ambulatory Nursing saw growth and professional development in several areas of nursing care.

- Ambulatory Care Nursing
 - Implementation of barcode medication scanning in all primary care clinics and implementation in specialty clinics
 - Decreased overall turnover by 2.74%
 - 398 primary care clinical co-workers completed competency labs
 - 344 specialty clinical co-workers completed competency labs
 - Two nurses certified in Ambulatory Care Nursing
- Primary Care, Care Coordination/Nurse Navigator Program
 - 72% increase in patients with active navigation support
 - 22% increase in completion of transitional care management
 - Developed standard work/resources for patient education on chronic disease management for hypertension, COPD, asthma, CHF, DM, CKD/ESRD
 - All trained in Advanced Care Planning
- Medicare Wellness Nurse Visits
 - 41% increase in completed visits
 - 24% increase in Advanced Care Planning visits
 - 99% rate of care gap closure for the patients they see
- Nursing Professional Development Practitioners/Clinical Education
 - Post clinical orientation survey created; 50 surveys completed with updates to orientation based on survey feedback
 - 33% increase in participation in preceptor development
 - Provided education for culturally competent care

References

1 American Academy of Ambulatory Care Nursing (AAACN). (2017). *Scope and standards of practice for professional ambulatory care nursing*. Pitman, NJ: Author.

Nursing Excellence and Outcomes *Across Parkview*

PRMC & Affiliates

Expanding Nursing Excellence

Reflecting on the past two years, Linda Francies, MSN, RN, CENP, Senior Vice President and Chief Nursing Officer, Parkview Regional Medical Center and Affiliates expresses great pride and gratitude for our Parkview nurses' many achievements. "The workforce challenges we face are many, and the nurses at Parkview Regional Medical Center & Affiliates have again delivered on our promise of nursing excellence.

One of our proudest accomplishments has been the achievement of optimal patient outcomes across the board. Through their unwavering dedication and expertise, our nurses have realized dramatic improvements in our nurse-sensitive indicators, while maintaining a focus on operational efficiencies.

The opening of Parkview Southwest stands as a

testament to expanding access to high-quality healthcare in our community. We are now able to deliver 24-hour emergency and urgent care, lab and imaging services to southwest Fort Wayne. This milestone wouldn't have been possible without the collective effort and collaboration of our teams across all Parkview hospitals in Allen County.

Lastly, I want to take a moment to express my profound appreciation for our nurses' unwavering commitment to excellence. This is what sets us apart and ensures that we continue to provide the best possible care to the patients we serve.

It's a great time to be a Parkview nurse. I am looking forward to another year of making a difference in the lives of those we serve."

PRMC & Affiliates: Parkview Behavioral Health Institute

2023 Human Experience NDNQI Award

In 2023, Parkview Behavioral Health Institute (PBHI) inpatient services reduced readmissions by more than 25%. Through ongoing training, injuries related to workplace violence decreased nearly 60%, which led to a substantial decrease in restraint and seclusion episodes.

Press Ganey awarded PBHI inpatient services with the 2023 Human Experience NDNQI Award for Outstanding Nursing Quality. This accolade is awarded annually to the best performing hospital in each of seven categories based upon hospital type: academic medical center, teaching hospital, community hospital, pediatric hospital, rehabilitation hospital, psychiatric hospital and international hospital. A total of 17 measures are included in the quality assessment, and psychiatric hospitals must have submitted data on at least six measures, including assault rate.

Each hospital is assessed as they compare to other units of the same type. For each measure, standardization by unit type is accomplished by expressing each unit's score in terms of the number of standard deviations the unit fell above or below the mean score compared to all other units of the same type. Scores are averaged across units in each hospital to yield a hospital score on each measure, and each hospital's scores on the relevant measures are averaged to produce an overall score. Hospitals are ranked according to these overall scores. The highest-ranking hospital in each category is identified and, after undergoing a qualitative screening, given the award.



Nursing Excellence and Outcomes *Across Parkview*

PRMC & Affiliates: Parkview Hospital Randallia

Perioperative Warming

It is a peri-operative (periop) standard of care to maintain normothermia or a temperature above 36.0°C (96.9°F) for all patients receiving general anesthesia. Patients whose core body temperatures slip below 36.0°C are at increased risk of surgical site infections, cardiac arrhythmias, blood loss, altered medication metabolism and increased pain. An effective means of maintaining peri-operative normothermia is prevention through prewarming.

The Parkview Hospital Randallia peri-op area implemented a Bair Gown Active Warming System in 2023. Considerations related to patient comfort, staff perception, surgical site infection rate and cost of said system were evaluated. Previously, all patients would receive passive warming via warm blankets in pre-op and pos-top and active warming in the operating room via a Bair Hugger blanket.

This quality improvement project focused on improved temperature control using the active warming system. Results from this project show the average pre-op temperatures were the same before and after implementation at 97.9°F. The average intra-op temperatures showed the most improvement: 96.8°F pre-implementation to 97.2°F post-implementation. Post anesthesia care unit (PACU) average temperatures were lower post-implementation: 97.7°F pre-implementation and 97.4°F post-implementation.

Surgical site infections (SSIs) decreased after implementation; there were three reportable SSIs in 2022 year to date before implementing the Bair system. After the implementation, there was only one reportable SSI for the unit.

A survey revealed that:

- 82% of staff perceived that patients enjoyed the warming and cooling features of the gowns
- 92% of staff perceived that patients had less post-op shivering
- 82% of staff perceived that patients overall felt warmer while utilizing the Bair system

A cost analysis was also completed, finding that the Bair warming system saved an average of \$2,456 per month in linen costs at Parkview Hospital Randallia. The cost prior to implementation for each bath blanket was \$0.85 and the cost of each thermal blanket was \$1.94 for patient use. Each patient used multiple blankets. Total linen costs were an average of \$7,609 before implementation and \$4,977 after implementation.

Following implementation of the warming system, Parkview Hospital Randallia reported lower infection rates, significantly decreased linen costs, higher intra-operative temperatures with less variance throughout all phases of care, and an increase in staff perception of patient warmth with observance of less post-op shivering.

Average Patient Temperatures

	Pre-op	Intra-op	Post-op
Before Bair Prewarming Protocol	97.9°F	96.8°F	97.7°F
After Bair Prewarming Protocol	97.9°F	97.2°F	97.4°F

Data randomly selected from July 2022 and 2023.

NOTE: Patient temperature data was abstracted from 67 charts. The pre-implementation collection period was from July 2022, and post-implementation data was from July 2023. The average intra-op temperatures showed the most improvement.

Nursing Excellence and Outcomes *Across* Parkview

PRMC & Affiliates: Parkview Regional Medical Center

A Practical Approach to Sleep Promotion on an Orthopedic Trauma Unit

Nurses on an orthopedic trauma (OT) unit questioned the evidence and necessity around routine vital sign checks every four-hours during bedtime in relation to nursing workflow, satisfaction and staffing limitations. Opportunities for sleep promotion were evaluated, resulting in the discovery of a sleep bundle pilot on the acute medical floors.

This bundle was then adapted to better suit the needs of the orthopedic trauma patient population, with a goal of balancing nursing tasks and aiding in improved patient outcomes. The sleep bundle pilot was initiated on the OT unit on April 1, 2023, with the goal of positively impacting nursing workflow by reducing unnecessary tasks (e.g., reduction of vital signs, assessment frequency for select patients) and promoting patient rest via a structured, safe process.

This quality improvement initiative included surveying staff to assess perceptions around patient sleep, current personal practices and workflow satisfiers. Criteria was evaluated and adapted to meet the needs of the OT patient population and was aimed at providing appropriately identified patients with a minimum of six hours of uninterrupted rest at night. As of September 1, 2023, approximately 140 patients were included in this initiative, and there were no significant events or negative outcomes among included patients such as falls, HAPIs, rapid responses and codes. Evaluation of patient satisfaction and outcomes (falls and behavioral emergency response calls) is currently underway. Additionally, a follow-up survey completed in August 2023 identified increased or greatly increased job satisfaction among the night shift staff who were surveyed.

Sleep Bundle

Inclusion Criteria

- Patient is medically stable and meets all four of the following criteria:
 - Respiratory status at baseline
 - Sepsis score = low 0-4
 - Deterioration index = green/low (0-37)
 - 18 years or older

OR

- Patient is medically cleared (waiting placement)

Exclusion Criteria

- Patient is medically unstable (based on four criteria)
- Transfer from ICU/progressive care in past 24 hours
- Post-op within 24 hours of anesthesia end time
- Requires frequent monitoring due to treatment(s), medication(s), condition(s):
 - Clinical Institute Withdrawal Assessment for Alcohol (CIWA)/ Clinical Opiate Withdrawal Scale (COWS), stroke/rule out stroke/transient ischemic attack (TIA)
 - Restraints
 - Continuous IV fluids or continuous IV medications
- Patient-controlled analgesia (PCA)
- Unmanaged sleep apnea or supplemental oxygen above baseline
- Every four hour intermittent urinary catheterization
- Significant skin concerns requiring wound care treatments outside of preventive measures
- On telemetry with new arrhythmia in the past 24 hours

If a patient no longer meets the inclusion criteria, they should be removed from the sleep bundle. A progress note should be entered in the patient's chart and a brief explanation should be added to the original initiation form.

Staff Survey Results

Total staff survey responses: 33

Night shift responses: 18

- Impact on overall job satisfaction due to sleep bundle: 70% greatly increased or increased satisfaction, 30% neutral or no change

Nursing Excellence and Outcomes *Across Parkview*

PRMC & Affiliates: Parkview Regional Medical Center

- Able to consistently take a break when caring for at least one patient on the sleep bundle: True for 89% of night shift staff surveyed
- Availability of other team members or nurse leaders to help when needed: 55% greatly increased or increased availability, 45% neutral or no change

Patient Survey Results

Total patient feedback surveys: 88

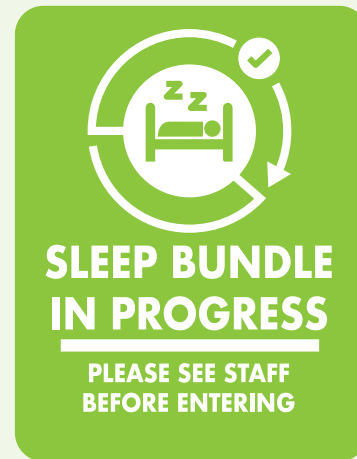
Likert scale 1 (very poor) to 5 (very good)

- Quality of sleep while in the hospital: 3.90
- Rest satisfaction during sleep bundle window: 4.17

Fun Facts

- Ortho trauma has had zero nurse turnover on night shift from April 2023 - Dec. 31, 2023, aside from a new hire who had a family emergency a couple weeks into orientation and had to leave
- There have been zero significant events (falls, HAPI, rapid responses, codes) while patients were on sleep bundled care through roughly the end of December

- The project did not specifically track delirium, but from audits, there were no documented cases of hospital-acquired delirium noted in any discharge summary that began during or after sleep bundled care was initiated. We can't quite say that the sleep bundle decreases delirium, but we can confidently say that it doesn't increase rates.



Care Delivery Model: A Team Effort

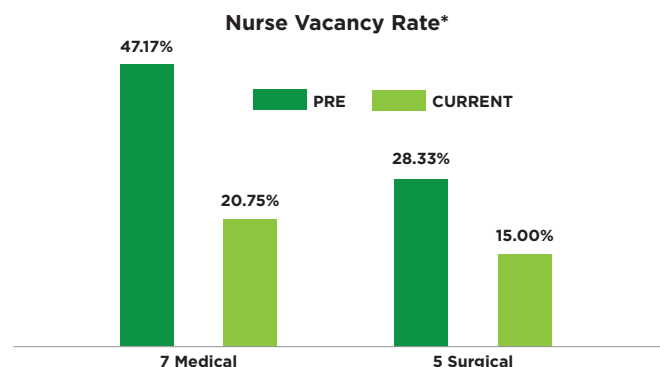
At PRMC, 5 Surgical and 7 Medical launched a new care delivery model in October 2023. The model uses RNs, LPNs and PCTs working as a team to care for a group of patients. The nurse leaders are integrated into these care teams and share in the patient assignment.

Since launching this model, the teams have tracked multiple process and outcome metrics to determine the impact on patient care and nurse satisfaction. Initial data suggests a positive impact, but further trending is needed to verify sustainment. We hope to share those results soon.

A nurse survey was completed pre-implementation and four months after full implementation. Some highlighted feedback:

- "Working alongside an LPN is great. It splits the workload and there is always someone close by to help you."
- "The team model has given me more opportunities to work at top of license."

- "It has encouraged me to work closer with the other nurses. I feel like it is okay to ask them for help when I need it since I am a newer nurse."
- "I feel with team nursing you are able to ask for help and not feel like you are dragging the nurse down by doing so."



*Vacancy rate based on positions filled, including those not yet in orientation.

Nursing Excellence and Outcomes *Across Parkview*

PRMC & Affiliates: Parkview Southwest Emergency Department



A Unique Model of Care for Patients

The Parkview Southwest free-standing emergency department (SW ED) opened on November 1, 2023, along with the entire campus on the Parkview Southwest site. This is Parkview's second free-standing emergency department, but the first in the region that offers an urgent care billing option. This unique concept was developed to meet the needs of our southwest population who wanted Parkview services close to home and with a more affordable option for less urgent healthcare. This concept also leaves the decision-making on where to go (urgent care versus emergency care) as a thing of the past, and the patient can get the care they need for their acuity.

The SW ED is a full-service emergency department with full lab and radiology capabilities, and is open 24 hours per day. Urgent care patients are cared for in the same

space from the hours of 7 a.m. – 9 p.m. If a patient does need to be admitted, they will be transferred to an Allen County inpatient hospital that is most appropriate for their needs without additional cost, via a Parkview EMS team.

Under the leadership of Lisa Blair, RN, CEN, Nursing Services Operational Lead, Emergency Care, Parkview Southwest, the SW ED is staffed with experienced nurses and physicians who also work in other emergency departments across the health system. At SW ED, there are 14 rooms, including one large resuscitation bay and one “safer” room. The average daily census for the month of January 2024 was 36 patients per day, with 47% of those being urgent care patients and 52% being emergency patients. We are already exceeding volumes and expect that to continue throughout 2024.

Nursing Excellence and Outcomes *Across Parkview*

Parkview Wabash Hospital

The Impact of Compassionate Caregiving

Care, compassion and collaboration are at the center of this story from Parkview Wabash Hospital. In September 2023, the Parkview Wabash Hospital emergency department received a call of an incoming child in respiratory arrest. The team immediately jumped into action for this critical patient.

Upon arrival, the patient was unresponsive, and the Wabash Fire Department efficiently delivered the patient to the Parkview Wabash emergency department. The firefighters from Wabash Fire Department remained present to provide any assistance needed. True collaboration was evident as the nurses, house supervisor, emergency care technician, respiratory therapist, radiology technician, physician and EMT student gave their all for this child. Co-workers from other units responded to make rounds, answer call lights and attend to the needs of the remaining emergency department patients.

From the moment the patient entered the facility, the Parkview Wabash Hospital emergency department team showed nothing but care and compassion.

Not only did they care for the patient, but co-workers recognized the need to provide emotional support to the distraught parents. At one point during the event, Haley

Donaldson, RN, laid hands on the child and mother, and she began to pray over the family. This small gesture provided light at such a dark time.

While the outcome of this event was not what anyone wanted, co-workers remained focused on providing comfort to the family during this time. Parkview Wabash Hospital's chaplain, pastor Dan Keaton, provided spiritual support and prayed with the family. The house supervisor, Stephanie Smith, RN, ensured the family was given additional time to spend with the child. She also led a debriefing session afterward to discuss the event and provide support to co-workers. Amy Miller, manager of the LifeBridge program, rounded frequently on co-workers after the event to ensure they had someone to talk with to help with the coping process. The nurses, techs, respiratory therapist and provider all leaned on each other in the days following, bonded by an event that will never be forgotten.

Looking back, many TeamSTEPPS key principles were evident that day. The team structure was identified within those first moments of receiving the report of the incoming patient as roles were assigned to team members. The team used closed-loop communication throughout the event when receiving and implementing verbal orders. The house supervisor and provider showed strong leadership as they guided the team. Co-workers utilized situation monitoring as they assessed the needs of the grieving family. All team members showed mutual support throughout the event by debriefing and frequent check-ins with all involved.

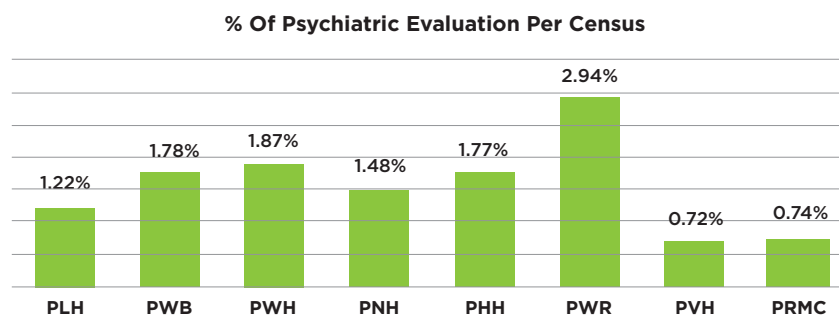
Nursing Excellence and Outcomes *Across Parkview*

Parkview Warsaw

Improving Care for Mental Health Patients

In 2022, Parkview Warsaw Emergency Department (ED) nurses recognized an increase in the volume of behavioral health patients and the challenges of increased wait times within our ED. When exploring the data, this increase was evident through the number of psychiatric evaluations per

the overall census. The graph below shows this data and highlights the significant difference between psychiatric evaluations at Parkview Warsaw compared to other Parkview facilities, with Parkview Whitley Hospital at the second highest rate.



Taking it a step further, we investigated the wait time for our patients that were considered high-risk for suicide. We found through a random sampling of 219 of these patients, the average length of stay in the ED was 345 minutes, or 5.75 hours.

For the 2022–2023 year, Parkview Warsaw and Parkview Whitley Hospital nursing teams had the opportunity to partner with the Indiana Hospital Association (IHA) on a Small Rural Hospital Improvement Project (SHIP) with hopes to improve the care that was being provided for these patients. The team began the project by assessing and discussing their comfort level for taking care of mental health patients through a survey. One of the highest categories that drove the recommendations from the survey was wanting more information, tools and education on how to care for patients on the border of a mental health illness.

Based on these results, the recommendation was made for us to increase co-worker competence and confidence in providing enhanced care, patient education and safety planning to those patients with behavioral health needs in the ED.

With the leadership and guidance of their manager, Michelle McNeil, MSN, RN, CEN, the Parkview Warsaw Nursing Clinical Action Team (NCAT), including Cassandra

Savant, RN, BSN, and Tieler Coble, RN, BSN, developed a mental health box to provide resources for this issue. They trained the teams through a mental health video they developed that referenced the survey and the challenges identified. The video shared a description of activities to educate patients, such as internal coping strategies and external distractions, provided scripting for the nursing teams and incorporated an example using video role play.

To improve collaboration and communication to the patient on the safety plans that our patients may be sent home with, McNeil, along with Parkview Whitley ED manager, Katelyn Lopez, MSN, FNP-C, met with Darci Herron from the Parkview Behavioral Health Institute (PBHI) regarding the inclusion of nursing in PBHI's virtual visit for safety planning.

The post-survey results showed a positive change: 91% of team members stated they had access to activities or resources for mental health patients — a jump from the 64% starting point. As seen in the results, the nursing teams have made a strong impact on our patients and staff by developing these mental health boxes. These boxes have since been shared with other departments across both Parkview Warsaw (now Parkview Kosciusko Hospital) and Parkview Whitley Hospital, providing additional assistance to patients and staff facility wide.

Nursing Excellence and Outcomes *Across Parkview*

Parkview Whitley Hospital

Better Outcomes for Stroke Patients

In the last few years, Parkview Whitley Hospital (PWH) has seen an increase in the number of stroke activate codes. To provide the best care to our patients, nurses from the Emergency Department (ED) and Medical-Surgical department joined together with PWH rehabilitation, speech therapy, imaging, pharmacy, EMS, laboratory and patient access to work collaboratively with Parkview Neurosciences in order to pursue a higher level of stroke care and improve outcomes for our stroke patient population.

The collaboration and pursuit for Joint Commission Primary Stroke Certification involved ensuring streamlined processes within the ED. While many improvements and achievements are continually being made, it is noteworthy to mention that Tonya Deen, RN, MSN, Stroke Coordination, Parkview Whitley Hospital and Parkview Warsaw, along with our ED nurses, collaborated with EMS to improve our Door to Stroke Activate and Door to Needle times. Education was provided on C-STAT¹ and BEFAST² to our teams.

Communication using these tools gave the ED nurses a better understanding of stroke-like symptoms and the need to call a stroke activate on these patients sooner. Ultimately, this resulted in the improvement of the time in bringing these patients directly to a CT scan. Through pursuing Primary Stroke Certification, the Medical-Surgical Department inpatient nursing team also embraced the opportunity to improve our stroke patients' care. Focused education was done on each of the inpatient stroke measures. In particular, the inpatient nursing team took a multidisciplinary approach to improve dysphagia screens. The nurses worked closely with Tonya Deen and speech therapy team members to identify and resolve gaps related to completing the screens. They discovered opportunities for improved communication and use of the stroke order sets for our physicians.

In August 2022, after preparation and review of compliance related to certification standards and performance measures, Parkview Whitley Hospital was awarded the Joint Commission's Gold Seal of Approval for Primary Stroke Certification. Parkview Whitley Hospital is proud of their loyal, cohesive teams and for their collaboration to make improvements in the quality, safety and care of our stroke patients.



The graph below illustrates their success.

Evaluated Focus	2021	2022	2023
Door to Stroke Team Activate			
PWH	12 min	13 min	6 min
PWR	13 min	15 min	9 min
Door to Needle			
PWH	63 min	59 min	46 min
PWR	68 min	54 min	41 min
Door to NCCT Start			
PWH	11 min	12 min	6 min
PWR	18 min	15 min	9 min
Dysphagia Screen			
PWH	40%	76%	78%
PWR	40%	64%	85%
Stroke Team Activate Volumes			
PWH	150	153	163
PWR	50	94	107

During that same time, Parkview Warsaw (Kosciusko) was awarded the Joint Commission Acute Stroke Ready Certification.

The accomplishment made by these teams was certainly a collaborative effort and one that is proving to offer additional excellent care to our patients.

¹C-STAT and BEFAST are tools used to rapidly assess stroke symptoms.
²C-STA: Cincinnati Stroke Triage Assessment Tool
 B.E.F.A.S.T: Balance, Eyes, Face, Arms, Speech, Time

Nursing Excellence and Outcomes *Across* Parkview

Community Nursing

Meeting the Diverse Needs of our Community

Parkview conducts a community health needs assessment every three years to gauge the overall health of our residents and target areas for improvement. This survey focuses on our overall population, with special sections for low-income and rural residents. Thus, through a broad-based governance model and intentional community involvement, Parkview strives to guarantee that each community in our service area has an equal voice in determining health priorities. Community nursing's initiatives tie back to the health system's initiatives based on the results from the community health needs assessment. Most programs tie into the following initiatives: infant mortality, access to care, obesity, mental health, tobacco cessation and asthma education. Our department is funded through the Parkview Community Health Improvement Program.

The Community Nursing Department is an interdisciplinary team consisting of 10 registered nurses, one registered respiratory therapist, three certified community health workers and an administrative assistant, all working to address identified health needs of children,

families and individuals in Allen County. Our team works with the underserved, uninsured and most vulnerable populations in community partner agencies. Programming has expanded well beyond the original school nurse initiative to include registered nurses navigating care at SCAN, The Courtyard, The Rescue Mission, Salvation Army, Charis House, St. Joseph's Mission Women's Shelter, and Vincent Village.

We also provide safe sleep education to parents in the community. If parents self-identify as having no crib or bassinet for their baby to sleep safely in, a portable crib is provided.

We also support moms in the community who breastfeed when needed. Other staff provide follow-up phone calls and home visits for education and trigger mitigation to patients discharged from a Parkview ER/hospital with a primary discharge diagnosis for asthma. We work with the Center for Healthy Living to provide tobacco cessation programs for adults and pregnant moms and work with many community partners on other projects and public health concerns in our communities.

Nursing Excellence and Outcomes *Across Parkview*

Community Nursing

Infant Safety Project

Parkview has supported a safe sleep program since 2009, when 13 infant deaths were contributed to unsafe sleep practices by the Allen County Child Fatality Review Team. Allen County has two of the highest zip codes in Indiana for Infant Mortality (46806 and 46805). The 46806

zip code in Allen County has the seventh highest infant mortality rate by zip code in Indiana according to the Indiana Department of Health in 2023. Despite efforts to decrease the infant mortality rate in Allen County, infants continue to die in this community.

Infant Mortality Rates

The infant mortality rate is the number of infant deaths for every 1,000 births.

United States	Indiana	Allen County	Allen County Black Residents	46806
5.4	6.6	6.9	15.2	11.4

Note: from “The Future of Firsts: 2023 Allen County Infant Mortality Report,” by Healthier Moms & Babies

Natalie McLaughlin, BSN, RN, NCSN; April Didion, BSN, RN; and Amy Moord, RN, are Parkview community nurses who work at the Fort Wayne Community School’s Family

and Community Engagement Center (FACE) clinic in partnership with FWCS and SuperShot. They wanted to help educate students on safe sleep practices.

School	# Students Living in 46806	Total # Students	% Students Living in 46806
Blackhawk	4	259	1.5%
Jefferson	2	225	0.9%
Kekionga	24	186	12.9%
Lakeside	22	167	13.2%
Lane	114	225	50.6%
Memorial Park	42	191	21.9%
Miami	45	175	25.7%
Northwood	13	199	6.5%
Portage	61	149	40.9%
Shawnee	27	231	11.7%
Towles	11	71	15.5%
TOTAL	365	2,078	17.6%

Nursing Excellence and Outcomes *Across* Parkview *Community Nursing*

In 2017, the nurses incorporated safe sleep education into their babysitting classes. These classes are offered to students ranging in age from 11-13 and are held during FWCS school breaks. Their infant safety education included placing an infant back to sleep safely, shaken baby syndrome prevention and recognizing/relieving infant choking. Through this additional information given to students during their babysitting classes, nurses became aware of a deficit in education in this age group related to infant safety. Their vision grew to provide this education to all eighth graders in FWCS in the hope of teaching this generation the importance of infant safety.

Research has shown that one of the indicators for not using safe sleep practices is familial/cultural beliefs from older generations. Eighth grade students were chosen for this education as they often begin babysitting at this age and we wanted to start safe sleep education before they become parents themselves.

Parkview nurses collaborated with the middle school science teachers to offer a pilot project in the fall of 2022. They went to each science class in FWCS' middle schools and provided the education. The curriculum for the classes is based on evidence-based research and

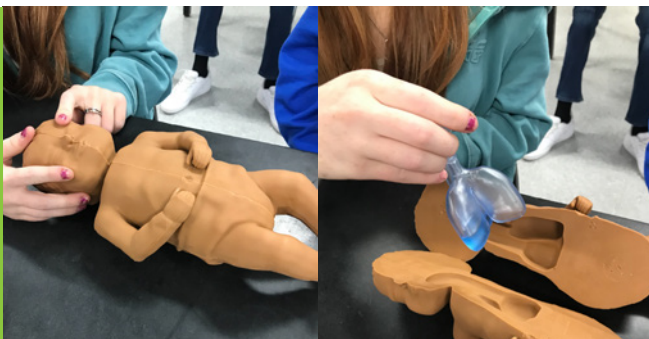


Reality Works shaken baby demo model.

our nurses designed and implemented the classes. The students were provided a five-question pre-test and post-test, PowerPoint, and hands-on activities with the Safe Sleep infant models from the Parkview Simulation Lab. Parkview's Simulation Lab app for iPhones was utilized to show oxygen levels in different infant environment scenarios such as a car seat, co-sleeping with a parent, sleeping on the stomach and placing the infant asleep on their back alone in a crib.

Education was provided to eleven middle schools in nineteen different sessions over three months. Over 1,700 students received education and had a 28% increase from pre- and post-test scores. Infant safety classes are being taught this school year (2023-2024) by Parkview FACE nurses. In 2023, they were seeing similar results for pre/post-test scores.

Our FACE nurses are conducting a retrospective nursing research study through Parkview for this project. To sustain the infant safety class in the future, they are exploring how to incorporate the content into the science curriculum in FWCS and collaborating with community partner educators to provide the classes in the future.



Simulation Lab models.

Nursing Excellence and Outcomes *Across Parkview* *Community Nursing*



Relieving an obstruction in a choking infant.

Results

2022–2023 School Year Results:

- Average 68% pre-test score
- Average 95% post-test score
- Average of 27% knowledge increase

2023–2024 Preliminary Data Based on 5 of 12

Schools:

- Average 65% pre-test score
- Average 93% post-test score
- Average of 28% knowledge increase

Top Three Schools with Students Living in 46806:

- Lane Middle School: 36% knowledge gain
- Portage Middle School: 27% knowledge gain
- Miami Middle School: 32% knowledge gain

Feedback from Students

- “The babies really helped me understand the program.”
- “Thank you for coming out and making sure baby safety is known.”
- “This was helpful information for my future self.”
- “Thank you for telling us the aftermath of situations, such as how your life and baby’s life will be after.”

Sleeping Position:

On Back	On Stomach	Side Sleeping	Car Seat
Swing	Co-Sleeping	Hammock	Adult Bed

O2 Saturation Level 99

Risk Factor:

Nicotine Exposure	Drug Impaired	Alcohol Impaired	Blanket
Stuffed Animal	Pillow	In-Bed Sleeper	Crib bumpers

Sleeping Position:

On Back	On Stomach	Side Sleeping	Car Seat
Swing	Co-Sleeping	Hammock	Adult Bed

O2 Saturation Level 40

Risk Factor:

Nicotine Exposure	Drug Impaired	Alcohol Impaired	Blanket
Stuffed Animal	Pillow	In-Bed Sleeper	Crib bumpers

Sleeping Position:

On Back	On Stomach	Side Sleeping	Car Seat
Swing	Co-Sleeping	Hammock	Adult Bed

O2 Saturation Level 0

Risk Factor:

Nicotine Exposure	Drug Impaired	Alcohol Impaired	Blanket
Stuffed Animal	Pillow	In-Bed Sleeper	Crib bumpers

Safe sleep simulator scenarios created by the Parkview Simulation Lab.

A Focus on Quality and Safety

Prevention of CAUTI and CLABSI Events Across Parkview Health

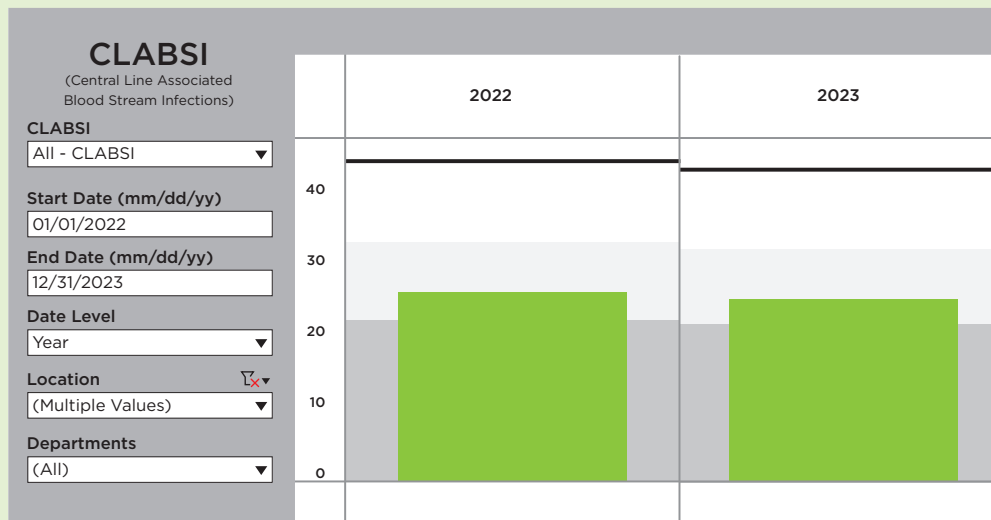
In 2023, catheter associated urinary tract infections (CAUTI) events decreased by 34.4%. The total number of central line associated bloodstream infections (CLABSI) events saw a 3.9% decrease from 2022. The

team contributes the improvements to focuses placed on chlorhexidine gluconate (CHG) bathing, revised urine culture order set and device rounds monthly on patients with a foley or central line catheter.



The device rounds allow for real-time coaching and education. The team continues a yearly Gemba walk to elicit feedback on co-workers' understanding of the protocols. After the walk, education is developed

based upon the gaps in understanding of the policy and protocol. The unit's nurse leads continue to audit and coach daily to ensure compliance to prevent CAUTI, as well as CLABSI events.



Working to Reduce Fall Rates

The Falls Charter has responsibility for all fall reduction activities for the Parkview Health system, allowing for a consistent improvement strategy when opportunities are identified.

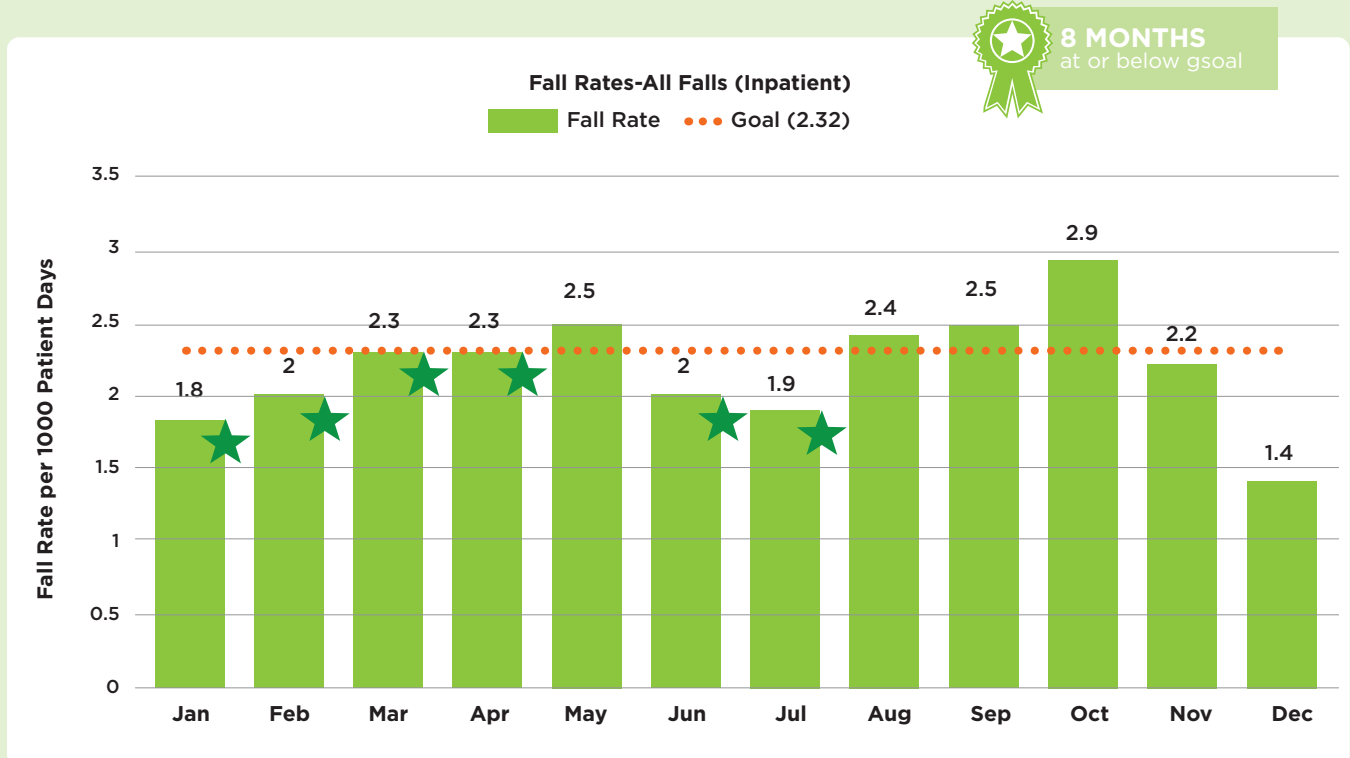
In April of 2021, the Fall Charter was assembled to address the increased rate of falls with harm. One of the first opportunities identified from the fall dashboard data was the need to revitalize the fall prevention competency. Through advocacy with our chief nursing officer team, this was prioritized to be a required competency. Since that time, several process improvements have been implemented.

The team developed three cycles of improvement. The first performance improvement cycle started in

September of 2022 and focused on creating a Key Driver Diagram (KDD) and updating documentation in our electronic medical record and event reporting systems to ensure all post-fall data points were captured. This resulted in improved data accuracy and transparency for the system. The second focus began in December of 2022 and consisted of policy updates, improvements to our internal dashboard and a standardized fall prevention competency. The last improvement cycle started in January of 2023 and consisted of device integration and updated processes to increase the utilization of virtual sitters for continuous monitoring. In addition, we also instituted compliance rounds to ensure that nurses were implementing appropriate interventions.

The number of falls with harm decreased (from 139 to 93), resulting in a rate decrease of 0.5 to 0.3.

2023 Outcomes



A Focus on Quality and Safety


There was also a decrease in alarms being identified from 25 times in 2021 to seven times in 2023, resulting in a 72% decrease. Additionally, there was an increase in virtual sitter use by evaluating criteria to proactively identify patients that could benefit from this service. From 2022 to 2023, we increased virtual sitter orders by 60%. Through these efforts, we achieved a 40% reduction in falls with harm in the inpatient setting.

Estimated*
COST AVOIDANCE

\$907,642

2022–2023 Inpatient Falls

*estimated cost \$6,694 per fall & \$14,056 per fall w/harm



13 INPATIENT Departments

365+ DAYS SINCE LAST FALL

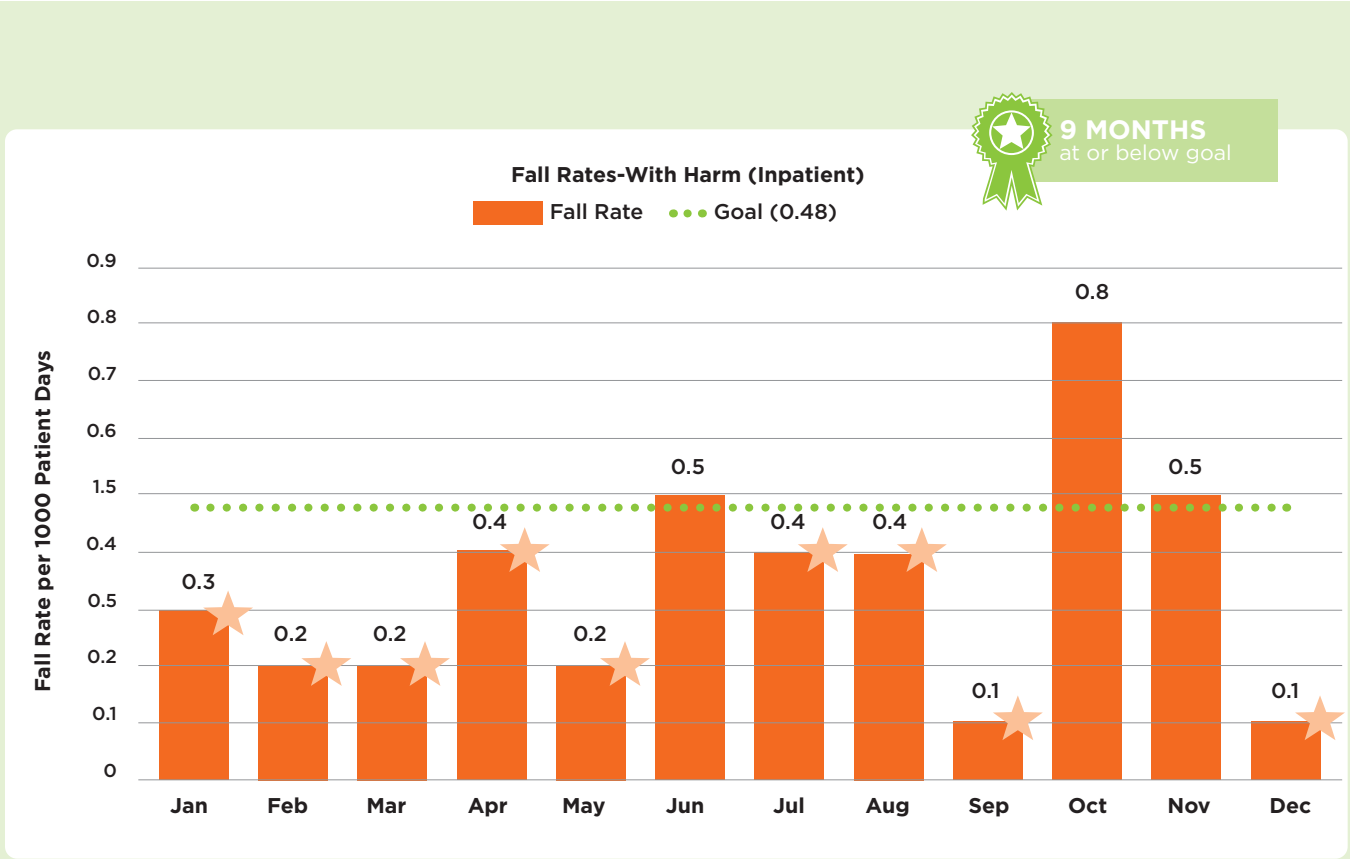


FALL EVENTS

■ Falls w/Harm ■ Falls w/o Harm

Year	Falls w/Harm	Falls w/o Harm
2022	139	568
2023	93	529

of fall events



A Focus on Quality and Safety

Reducing Hospital Acquired Pressure Injuries (HAPI)

In 2023, the Hospital Acquired Pressure Injuries (HAPI) Charter Committee set a goal to reduce full-thickness hospital acquired pressure injuries by 20%. That goal was exceeded, achieving a 35% reduction in those injuries.

The committee's 2023 initiatives focused on accountability. Previous performance improvement cycle initiatives were reviewed to ensure change processes were effective and hardwired. To validate, committee members continued Gemba walks, conducted root cause analysis of events and analyzed trends utilizing dashboards. Gemba walks include observing work-in-progress, engaging with the team, understanding the work process, and identifying opportunities for improvement.

Dashboards were optimized to improve performance and usability. Filters for date, hospital, unit, injury stage and device are available. In 2023, a wound location filter was added. This functionality provides a timely way to assess unit level trends and develop improvement plans.

Unit accountability was the focus of a subcommittee which included the five units at PRMC with the highest HAPI rates: MICU, 3 South Progressive, 4 OT, 5 Surgical, and 6 Medical. The group met monthly and would review trends, share ideas for improvement, develop action plans and report on progress toward goals. These five teams combined decreased their overall HAPI numbers by 37% and full-thickness HAPIs by 56%.

Individual accountability was highlighted by the development of a skin protection and care competency. All nurses and patient care technicians were to complete the competency in 2023. It was reviewed at professional development days and focused on pressure injury prevention, skin assessment and skin documentation, including photographs. Photo documentation upon admission has been leveraged to prove present upon admission (POA) status of numerous pressure injuries.

Nursing and respiratory therapy (RT) hold shared accountability for pressure injury prevention related

Optimizations



STANDARDIZATION

Processes surrounding prevention, early detection, treatment and RCAs



EQUIPMENT

Beds/Matresses, friction reduction equipment, lifts, Air Tap



ACCOUNTABILITY

RCAs for HAPIs, wound care consults



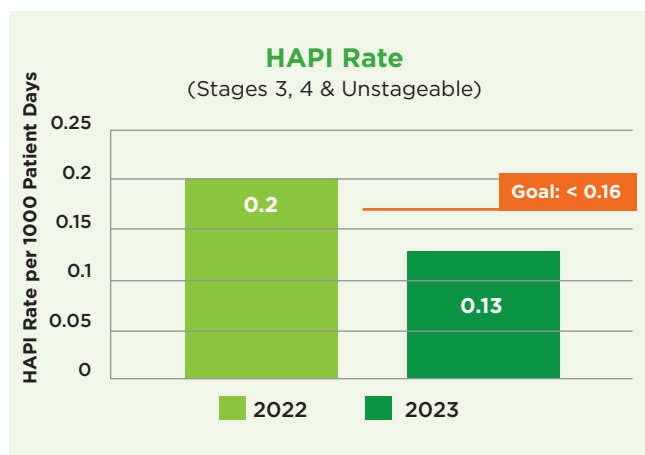
TECHNOLOGY

Epic modifications to drive best practices and optimize documentation

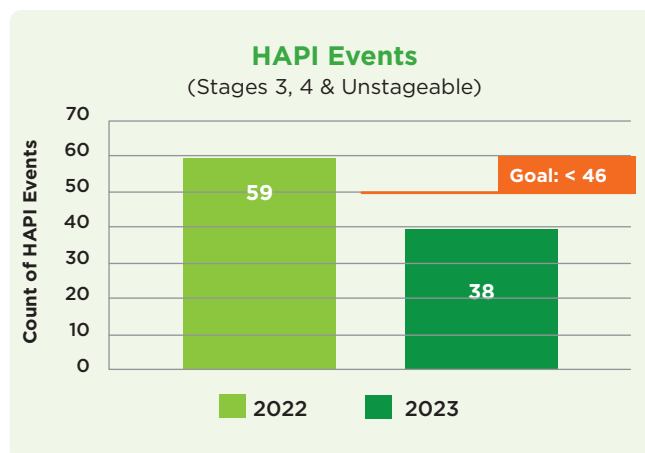
A Focus on Quality and Safety

to RT devices. A crosswalk of documentation by nursing and RT improved communication between both disciplines. The crosswalk included device site assessment and preventative interventions that are now visible to both disciplines. In 2023, there was a 25% reduction in RT device related HAPIs.

In July 2023, a preventability algorithm was developed to assist in identifying non-preventable pressure injuries that occur during a hospital stay. Brooke Randol, CNS, and wound care providers Michelle Diss, NP, and Janalynn Miller, NP, appraised the current literature to inform the algorithm. The recognition of skin failure and/or non-preventable pressure injuries is a convoluted topic that organizations such as the National Pressure Injury Advisor Panel (NPIAP) urge for further research and development.



35% ↓
11 Departments
6+ MONTHS Since Last HAPI Event



36% ↓
\$1.4M Estimated*
COST AVOIDANCE 2022–2023 HAPI Events
*Joint Commission estimated \$70,000 cost per event



DATA TRANSPARENCY

Midas & Epic data, drilldown capabilities, daily surveillance, facility & system level reporting



EDUCATION

Monthly nursing education, NDNQI surveillance & education, skin warriors

Awards *and* Recognitions



For the past four years, Parkview has partnered with the DAISY Foundation to recognize our nurses through The DAISY Award. This award, established in 1999 by the family of Patrick Barnes, was inspired by the sensitivity and comfort Patrick's nurses provided while he was

hospitalized with immune thrombocytopenia. Since his passing, hundreds of thousands of extraordinary nurses have been awarded for the skilled, compassionate care they provide patients and their loved ones.



2022 DAISY Award winners

Ashley Rodenbeck, RN
Parkview Noble Hospital

Diana Williams, ASN, RN
Parkview Regional Medical Center

Sharon Nicodemus, RN
Parkview Whitley Hospital

Megan Middleton, RN
Parkview Regional Medical Center

Cherisse Smith, RN
Parkview Regional Medical Center

Laura McGregor, RN
Parkview Regional Medical Center

Kyli McCullough-Garcia, RDN, LD, BSN, RN, CVRN
Parkview Regional Medical Center

Angela Skinner, BSN, RN
Parkview Huntington Hospital

Andrew Fiepel, RN
Parkview LaGrange Hospital

Heather Fest, BSN, RN
Parkview Whitley Hospital

Mary Frazee, ASN, RN
Parkview Hospital Randallia

Heather Hontz, BSN, RN, CCRN, ES
Parkview Regional Medical Center

Suzanna Gonzales, RN, BSN, MSM
Parkview Regional Medical Center

Aubrey Hilborn, BSN, RN
Parkview Regional Medical Center

Craig Kinzar, BSN, RN
Parkview DeKalb Hospital

Hannah Feller, BSN, RN
Parkview DeKalb Hospital

Danielle Swada, ASN, RN
Parkview Huntington Hospital

Karley Alleshouse, BSN, RN
Parkview LaGrange Hospital

Lydia Bontrager, BSN, RN
Parkview Noble Hospital

Kristina Stinson, BSN, RN
Parkview Whitley Hospital

Sabrina Hill, BSN, RN
Parkview Regional Medical Center

2023 DAISY Award winners

Sarah Strunk, RN
Parkview Regional Medical Center

Allie Gibson, BSN, RN
Parkview Regional Medical Center

MaKayla Farr, BSN
Parkview Huntington Hospital

Kristen Schultis, BSN
Parkview DeKalb Hospital

Patrick Essex, RN
Parkview Packnett Family Cancer Institute

Cortina Cottle, BSN, RN
Parkview Behavioral Health

Peggy Roberts, MSN, RN, CCM
Parkview DeKalb Hospital

Robin Anderson, BSN, RN
Parkview Huntington Hospital

Amanda Caldwell, RN
Parkview Hospital Randallia

Allyson Buchs, ASN, RN
Parkview Regional Medical Center

Christine Glogowski, BSN, RN
Parkview Regional Medical Center

Laura Frey, RN
Parkview Wabash Hospital

David Parker, ASN, RN
Parkview Noble Hospital

Danielle Roger, ASN, RN
Parkview Regional Medical Center

Jennifer Coville, ASN, RN
Parkview Regional Medical Center

MiKayla Hess, BSN, RN
Parkview Regional Medical Center

Charlie Persinger Jr., RN
Parkview LaGrange Hospital

Rebecca Schrensky, RN
Parkview Randallia Hospital

Elizabeth Wendt, RN
Parkview Behavioral Health

Colin Fassold, BA, BSN, RN
Parkview Regional Medical Center

Awards *and* Recognitions



The Nightingale Award recognizes nurses for their contributions to nursing practice and patient outcomes. As servant leaders, nurses who are selected to receive this award provide compassionate and holistic care. They are innovative and mentor others in ways to provide care in a team environment. They consistently exceed patient and family expectations. They are respected by co-workers for their work ethic and their dedication to quality improvement, reliability and perseverance. These qualities align with their organizational priorities related to provision of excellent care, tailoring a personal health journey and demonstrating world-class teamwork.

2022 Nightingale Award Winner: Jenny Dougal



Jenny Dougal, MSN, RNC-OB, NP-C
PPG — Maternal-Fetal Medicine

“Jenny’s approach to caring for patients includes far more than treating them clinically. She consistently meets patients where they’re at and offers a calm and judgement-free space. This gentle approach has allowed patients to open up to Jenny, in turn improving clinical outcomes. She has been crucial in improving prenatal

outcomes/prenatal education over her 44-year career here at Parkview.

Jenny has developed excellent relationships with all of her coworkers, peers and collaborating physicians. She is fueled by seeing patients and often states, ‘it fills her cup.’ Jenny is also seen by peers as a go-to for their needs, even if it’s not work-related. She is always available to lend an ear and gives calm and gentle advice. She is able to provide clear, concise communication and works with our maternal-fetal medicine physicians, other advanced practice providers and staff to develop and maintain exceptional patient care.

In her 44-year career at Parkview, Jenny has worked in many roles, including process initiatives, quality improvement, bedside nursing, nursing manager, nursing director, nursing educator, clinical nurse specialist, OB/GYN nurse practitioner and maternal-fetal medicine

Awards *and* Recognitions

nurse practitioner. She is now PRN in our PPG — Maternal-Fetal Medicine office as part of the emeritus nursing program. Since retirement, she has worked weekly in our office and is also helping with protocols in the Family Birthing Center.

If you walk through labor and delivery, maternal-fetal medicine, OB/GYN or most of the women's specialty

areas, it's rare to meet someone who hasn't been positively impacted by Jenny. I have met several nurses who told me that Jenny was their mentor or trained them when they first started, or that they worked on developing education for staff together."

– Rose Romich

2022 Nightingale Award Winner: Judith Wagoner

"Judy looks at patients and family members in a holistic manner to promote healing and wellness. She learns and uses their names in conversation, and sincerely cares for each individual by asking how they are feeling and how she might make their experience at Parkview better. She always has a smile on her face and has been told on numerous occasions that her presence and touch help ease patients' anxiety and fear. Judy works to help patients improve their overall well-being, and is never afraid to go the extra mile to make that happen.

There are very few people at Parkview Randallia who don't know Judy. She has worked at Parkview for 45 years and maintains open communication with all of her co-workers, always lending a helping hand or passing along wisdom to newer nurses. She is constantly working with different departments to achieve the highest level of care possible. She is encouraging in difficult situations and lends an open ear for nurses when they are having a bad day.

Over the course of her 45-year career at Parkview, Judy has built a bag of tips and tricks so deep that it's hard to find a problem she has not already solved. Judy is a champion for learning new information and supporting



Judith Wagoner, BSN, RN
Operating Room, Parkview Randallia Hospital

the latest evidence-based practices. I can only imagine the difference she has made in the community as a servant leader.

Judy is deserving of this award because of her commitment to providing excellent patient care. I have never met another person who cares so deeply for every single patient she has come into contact with during her career. When you watch Judy with patients, it inspires you to be a better nurse and to want to make a difference like she makes in each life she touches."

– Brock Worden



Awards *and* Recognitions

2022 Nightingale Award Winner: Lori Getts



Lori Getts, BSN, RN, CIC
Infection Control

“Over the course of her 23 years at Parkview, Lori has been a leader to her co-workers and other staff members. Excellent communication skills is one of the keys to being an amazing nurse and providing wonderful care to patients and their families. She has recognized that it takes a community, not just one individual, to care for patients and includes her other clinical and nonclinical staff in decision-making processes to determine the best path for each patient.

In her roles as a nurse and nurse supervisor/house supervisor in the first half of her career with Parkview Health, Lori mentored numerous student nurses, nurse

technicians and new nurses to help them identify and adjust to their roles. She guided them in decision-making processes and techniques needed to provide the best care possible to individuals and their families. In her more recent role in infection prevention and control, she has taken on much responsibility in her position. Lori strives to do her best in every task and meet every goal and deadline, while still being a pillar and role model to her co-workers.

There are many reasons why I believe Lori is deserving of this award. First and foremost, her dedication to the healthcare field. Her desire to provide patients with the best care possible is invaluable. She seeks to mentor others as they begin their journey in the medical field. In training others, she seeks to instill the values, kindness, beliefs and skills that have become invaluable to her in her almost 43-year career. Nursing is not just a career to her; it is her life.” – Melissa Crabill

“I cannot think of someone more deserving of this award than Lori. She is a devoted, faithful, caring and hard-working nurse, friend and mother, who seeks to help everyone in any way that she can. While being a loyal friend and co-worker, she has been a wonderful advocate for all that is true and good in the nursing profession.” – Molly Hillegass

2022 Nightingale Award Winner: Rebecca Coffelt



Rebecca Coffelt, ASN, RN, HN-BC
Hematology oncology, Packnett Family Cancer Institute

“Becky is the definition of a Nightingale. She cares for our patients and their families as if they were part of hers. Becky goes above and beyond to make sure patients understand their treatments, have education on new and current medications, and will literally hold their hand through appointments. She sets reminders so that she can call patients to check in. She gets birthday cards for those patients who come into the clinic on their birthday because she wants them to know we are thinking about them and we care.

Awards *and* Recognitions

Becky knows to utilize available resources and initiates interventions. She takes on our most challenging patients, and although they have a whole team to support them, they specifically request Becky. We have patients call in to speak with her and she remembers them and their situation and will move mountains to get them what they need.

Becky is forward thinking and innovative. She created a binder that includes clinic workflows and tips and tricks to help new and current team members get through a day in hematology. She added contact information for multiple resources that assist

us every day. She often takes on the role of a teacher and preceptor to new and current employees. She is a cheerleader to the team who believes that everyone can contribute in some way.

Becky loves to teach but she also loves to learn. She is board certified in holistic care and uses her training with every patient by encouraging them to think beyond their disease and focus on their overall well-being. She looks for opportunities to increase her knowledge or refresh it. She looks for education on the treatments and medications that will help her better explain to patients when they ask questions.” – Lisa Snider

The Judy Boerger Excellence in Nursing Leadership Award

Former Parkview Health Chief Nursing Executive Judy Boerger embodies the highest professional nursing standards and is a role model for compassion and exemplary professional practice through her servant leadership. She has advanced the professional practice and image of nursing at Parkview Health, in our community and in the nursing profession.

Throughout her nursing career, Judy exhibited exceptional compassion and commitment to Parkview patients, colleagues and the nursing profession while continually mentoring nurses to grow and advance in practice. She empowered nurses to have a voice in the care of patients and supported the foundation for this interprofessional collaborative care environment.

Her work to create a professional nursing environment continues to shine through exceptional clinical outcomes and professional growth of our nursing teams. Judy led Parkview Health to the achievement of system Magnet

designation and encouraged nurses to share their voice at all levels including through clinical research, board appointments, national presentations and publications.

The Judy Boerger Excellence in Nursing Leadership Award recognizes a nursing leader who exemplifies the above qualities.

“Let whoever is in charge keep this simple question in her head (not, how can I always do this right thing myself, but) how can I provide for this right thing to be always done?”

– Florence Nightingale

Awards *and* Recognitions



Jan Powers, PhD, RN, CCNS, CCRN, NE-BC, FCCM, FAAN
Director of Nursing Research and EBP

2022 Judy Boerger Award Winner

Jan started at Parkview Health in 2015 as the professional nurse researcher, and took a director role in 2016. Jan brings 38 years of experience from different facilities with extensive critical care experience, and she has served in management positions and clinical nurse specialist roles as well as development of nursing research and EBP programs to advance nursing practice and professionalism.



Jan receiving award from Judy Boerger (right) and Juli Johnson (left).

“I can think of no one more deserving of the Judy Boerger Award than Jan Powers. Jan has brought so much to Parkview Health when it comes to advancing the practice of nursing. Whether it was bringing in the CNS fellow role or creating the Evidence-Based Fellowship classes, her expertise, enthusiasm and mentorship have changed nursing at Parkview. Jan is truly an example of the professional nurse. I can truly say I would not have been as successful in my role today had it not been for the investment Jan made in me and her entire team several years ago.” – Michelle Wood

“I have never had a leader who was so actively involved and hands-on. During COVID, Jan came to MICU on numerous occasions to help place feeding tubes and move a patient from prone to supine and vice versa when extra hands were needed. She recognized the extra hours I was putting in and covered me so that I could have a day or afternoon off for self-care. Looking back, the support Jan provided during the most challenging time for nurses is so appreciated — more than words can say. I am blessed every day to have Jan as my boss, mentor, role model, leader and friend. Her compassion for nursing is genuine and contagious.” – Jennifer Rechter

“Jan exemplifies and continues what Judy began. She is continually advocating for advancing professional nursing practices, empowering nurses to own their autonomous practice and mentoring those nurses who wish to advance their career. She leads the Professional Practice Committee and the Nursing Research and Evidence-Based Practice Committee. She started the Evidence-Based Fellowship classes and continues to ensure that nurses throughout Parkview can participate in the class and nursing research. She continually challenges me to advocate for nursing practice and improved patient outcomes. Jan is an incredible asset to Parkview, our nurses and our patients. I would not be where I am today without her.” – Sarah Cook

Awards *and* Recognitions

Parkview Health Foundation Scholarships for Continuing Education

The Parkview Health Foundation awards scholarships annually for continuing nursing and medical degrees. These opportunities are made possible by the generosity of donors and their desire to support the education of our co-workers.

The Darlene J. Tielker Memorial Nursing Scholarship provides \$2,500 per year (\$1,250 each semester, payable directly to the school) and is renewable for a total of four years.

The Sue Johnson Scholarship provides \$2,000 per year at the beginning of the school year that may be used toward tuition and/or books and is renewable for a total of two years.

The Parkview School of Nursing Alumni Association Scholarship Fund provides up to \$2,000 each to recipients (payable directly to the school) to be used exclusively for tuition assistance. Each recipient may receive the award for a maximum of two years.

The Sherry Snyder Memorial Scholarship provides \$2,000 per year (\$1,000 each semester, payable directly to the school) and is renewable for one year.

The Shirley Traster Nursing Scholarship awards a \$500 scholarship annually to a nurse who best fulfills the qualifications and career aspiration requirements.

The Bev Goss Nursing Scholarship provides \$1,000 (payable directly to the school) to one recipient. That recipient may reapply for a second year.

The Schultz Award provides \$1,000 (payable directly to the school) to one recipient. That recipient may reapply for a second year.

The Jill Dreyer Scholarship awards a \$1,000 scholarship to recipients that may be used to reimburse education-related costs, such as tuition, learning materials or even childcare.

For more information about available scholarships, criteria for eligibility and to access applications, please visit Parkview.com/foundation or email scholarships@parkview.com.

Congratulations to the following scholarship recipients for 2022 and 2023.

Scholarship	2022 Recipients	2023 Recipients
The Darlene J. Tielker Memorial Nursing Scholarship	Sydney Weaver	Tiffany Hallam
The Sue Johnson Scholarship	Amy Johnson Sean Stevens	Amy Moord
The Parkview School of Nursing Alumni Association Scholarship Fund	Alyssa Doak Michelle Lefevra Terry Nikohl	Abigail Denny Stephani Schultz Vicki Miller
The Sherry Snyder Memorial Scholarship	Brooke Rollins	Aaliyah Simmons Oleksandra Davidson
The Shirley Traster Nursing Scholarship	Alyssa Doak Michelle Lefevra	
The Schultz Award	Jillian Whaley Olivia Groves	Jewelina Brindel Brittany Saaf
The Jill Dreyer Scholarship	Leslie Buzzard Edna Salazar Melody Spencer	

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