



MISSION HOSPITAL

2018

NURSING ANNUAL REPORT

St. Joseph Health   
Mission Hospital

## *Nursing Family,*

We are truly blessed and humbled to be a part of the Mission family and our exceptional nursing team. Last year was extraordinary in so many ways and much of that success is due to your remarkable passion, dedication and expertise! We truly cannot count all the ways you have blessed Mission Hospital, the lives you have saved and the lives you have dramatically improved through your commitment to quality, safety and patient experience.

Thanks to you, we have been able to continue to enhance the many ways our patients and their loved one's experience care at Mission Hospital. This report is a celebration of your significant impact and accomplishments.

We'll begin by congratulating each of you for the success of our three-day Joint Commission triennial survey and the re-accreditation of the hospital and behavioral health programs. Joint Commission accreditation and certification is recognized nationwide as a symbol of quality that is a direct reflection of your commitment to provide the safest, highest quality, best-value health care across all settings.

We also want to celebrate the vital role that each of you played in a variety of 2018 recognitions and accolades, including:

- › **Healthgrades Distinguished Hospital for Clinical Excellence and America's 250 Best Hospitals Award** - recognizing the top 5% of hospitals in the nation.
- › **U.S. News and World Report Best Regional Hospitals** - Mission earned the distinction of being ranked No. 1 in South Orange County, No. 3 in Orange County, No. 7 in the Los Angeles metro area, and No. 12 in the state of California.
- › **Women's Choice Award for America's Best Hospitals for Obstetrics, Heart Care and Stroke** - a symbol of excellence in customer experience.
- › **Comprehensive Stroke Center Certification** - the highest level of certification for stroke and cerebrovascular.
- › **Get With the Guidelines®** - Stroke Silver Plus Quality Achievement Award - recognizes commitment to nationally recognized, research-based guidelines and the latest scientific evidence.

In addition, our various leadership councils were devoted to improving safety and quality through numerous initiatives, including a focus on nurse sensitive indicators and enhanced hand-off communication before, during and after procedures as well as from one patient care environment to another.

Thank you for contributing to each one of these incredible accomplishments and continuing to support our journey toward high reliability. You truly embody our mission, values and our promise statement, "to know, care for and ease the way" for our patients. We are honored to serve alongside you as we care for our community together.



**Seth R. Teigen, FACHE**  
Chief Executive



**Jennifer Cord, RN, MBA, DNP, NE-BC**  
Chief Nursing Officer



**St. Joseph Health** <sup>®</sup>  
**Mission Hospital**

# MISSION, VISION, AND VALUES

## THE MISSION

As expressions of God's healing love, witnessed through the ministry of Jesus, we are steadfast in serving all, especially those who are poor and vulnerable.

## OUR VISION

Health for a Better World

## OUR PROMISE

"Know me, care for me, ease my way."

## OUR NURSING VISION

To be recognized as a leader in providing patient and family-centered nursing care by supporting a professional, values-based culture that demonstrates clinical excellence, fosters respect and delivers holistic care in a fiscally-responsible environment.



# COORDINATING COUNCIL ANNUAL REPORT 2018

The purpose of the Coordinating Council is to direct and facilitate shared governance at Mission Hospital. This council acts as a forum for all chairs of the housewide shared governance councils, APNs, and directors to coordinate activities.

The specific responsibilities of the Coordinating Council include:

- › Enhance communication between the housewide shared governance councils
- › Encourage and support the advancement of nursing services
- › Promote professional development of nurses by participating in the Clinical Ladder promotion and annual meeting.
- › Evaluation of the Professional Practice Model (PPM) and Shared Governance Bylaws
- › Celebrate shared governance outcomes annually during nurses' week activities

## COORDINATING COUNCIL GOALS 2018

1. Increase house-wide shared governance attendance by 3% by December 31, 2018. Current rate 65.2%. House wide shared governance attendance improved from 65.2% to 73.3% by the end of 2018.
2. Increase RN certification rate to 60% or higher by December 31, 2020. Certification rate at the end of 2018 is 54% housewide.
3. Increase Coordinating Council attendance by 3% by December 31, 2018. Current rate 69.4%. Coordinating Council Attendance improved from 69.4% to 72.5% by the end of 2018.

## NURSES' WEEK AWARDS

The Coordinating Council helped to support the annual Nurses' Week celebration in 2018. Awards were given to RNs who met criteria in the following categories: practice, education, leadership, quality and innovation. The award winners for 2018 were:

- › Practice: Jill Donaldson RN  
Team SICU
- › Education: Debbie Busby-Edebiri RN
- › Leadership: Carla Salazar RN
- › Quality: PCSU Unit
- › Innovation: Critical Care Healing Journal
- › Collaborative Practice Award: Comprehensive Stroke Team
- › Partner in Care Award: Angel Salazar, Rachel Talafus, Leonard Ching

## CLINICAL LADDER PROMOTION

The Clinical Ladder Advancement program supports and provides a clear pathway for professional advancement in clinical nursing. This initiative is critical in contributing to an experienced and highly skilled nursing staff. The program was designed to recognize and reward excellence in clinical nursing practice. The following RNs were promoted to Clinical III and Clinical IV status this year:

### CLINICAL III ADVANCEMENTS 2018

Patricia Ayala RN, BSN • Mikaela Baechel RN, BSN, BCEN • Eva Boratyn RN, CMSRN, ONC • Jeff Bunditsatheon RN, BSN, TCRN, MICN  
Jennifer Craib RN, BSN, CMSRN, RN-BC • Christy Culp RN, BSN, TCRN • Usha Desai RN, BSN, CNOR, RNFA  
Carrie Gast RN, BSN, CEN, MICN • Elaine Kotkoff RN, BSN, CMSRN, OCN • Amy Langdale RN, BSN, CCRN  
Christina Maxwell RN, BSN, CNOR • Chelsea Miller RN, BSN • Nicole Miller RN, TCRN • Sheela Mostafa, RN, BSN, ONC, CMSRN  
Carolyn Neill, MSCRN, ONC, RN-BC, BSN • Lisa Springer RN, BSN, RNC • Elizabeth Tantsikian RN, BSN, CEN

### CLINICAL IV ADVANCEMENT 2018

Debbie Busby-Edebiri, BSN, RN, CNOR, CEN • Pamela Monte RNC, BSN, CLE, Clin III • Jennifer Schollenberger RN, BSN, CCRN, TCRN

# HOUSE WIDE PRACTICE COUNCIL ACCOMPLISHMENTS OF 2018

Chairs: **Patricia Ayala & Arianna Barnes**

APN Mentors: **Mary Kay Bader, Jill Donaldson, & Christine Gurny**

Executive Mentor: **Annabelle Braun**

Educator: **Marion Callahan**

## HANDOFF COMMUNICATION GROUP

- › **Goal:** Reduce patient harm by standardizing processes and hand-off communication between health care providers before, during and after procedures, as well as from one patient care environment to another.
- › **Target met:** Tool being implemented when giving report from the ED to non-critical care areas to ensure information that may not be available in Meditech is communicated to the receiving nurse. This tool can be used by the ED nursing giving report and the floor nurse receiving report.

## CARE OF THE PATIENT EXPERIENCING ALCOHOL WITHDRAWAL GROUP

- › **Goal:** Improve patient outcomes and reduce patient and staff harm, when the interdisciplinary team is managing patients admitted to acute care experiencing tolerance, dependence, addiction and abuse of substances
- › **Targets met:**
  1. Updated Alcohol Withdrawal Management Short Set live in Meditech December 2018
  2. Updated Guidelines approved through critical care committee and being uploaded into Lucidoc
  3. Healthstream education completed by all nursing staff April 2018 and mandatory 1 hour live education given September to December 2018

## PRACTICE ALERTS

**HOUSEWIDE PRACTICE ALERT!**

### New Christmas Trees

New oxygen flow meter Christmas trees (also known as tubing nipples) will be rolling out throughout the hospital soon! As you start to see these new items on your unit, please switch them out from the previously used product.

Questions? Email the House Wide Practice Council Chairs: Ari at [Arianna.Barnes@stjoe.org](mailto:Arianna.Barnes@stjoe.org) Patty at [Patricia.Ayala@stjoe.org](mailto:Patricia.Ayala@stjoe.org)

**HOUSEWIDE PRACTICE ALERT!**

### It Just Doesn't Add Up...

When the pulse oximetry sensors are used with the older model vital sign machines, the saturation values may not be accurate. If you are having oxygen saturation values that do not correlate with the assessment when using a vital sign machine, check the saturation on a portable monitor.

Questions? Email the House Wide Practice Council Chairs: Ari at [Arianna.Barnes@stjoe.org](mailto:Arianna.Barnes@stjoe.org) Patty at [Patricia.Ayala@stjoe.org](mailto:Patricia.Ayala@stjoe.org)

**HOUSEWIDE PRACTICE ALERT!**

### Accurate Version Available

Thread Lock features added to reduce un-winding.

Change from Hybrid Thread to ISO Thread in New EoK Endpiece Plus!

Thread Lead moved closer to edge to improve ease of access.

Thread Design NEW THREAD DESIGN

Threaded hub is now available and will be on trial in CICU for one week. You may see these hubs during this trial after the trial is completed and we have received the staff, we will give you more information on any product conversions that will take place.

House Wide Practice Council Chairs: Arianna.Barnes@stjoe.org Patricia.Ayala@stjoe.org

St. Joseph Health

## **COLLABORATION SUCCESSES**

- › Infection Prevention
  - » SHEILD protocol
  - » TB screening and isolation
  - » Influenza
  - » Hydration Stations Implementation
- › Central Supply
  - » Backorder and supply shortage issues on the units
- › Transportation
  - » Competencies on bed alarms
  - » Competencies on placing bedside monitor on standby when transporting patients from the ED
- › Security
  - » Roles of security and nurses in Code Grey situation
  - » How to handle contraband materials and firearms
  - » What to do if a patient wants to leave

## **PULSE CHECK SUCCESSES:**

- › Max limit of fluids administered to the patient removed from Meditech
- › Weekend supply shortages
- › Process for problematic Vial2Bag connectors and pulse ox probes not working
- › Decreased number of nuisance alarms in ED with new GE monitor update
- › Alaris Pump code for PCA changes
- › Plan for nurses in speciality units who get called off/EDO frequently getting crossed trained to other areas of the hospital
- › Laguna Beach Campus calls not getting directly properly

## **VOLUNTEERISM**

Volunteers went to Stroke Education event at Mission Viejo Mall to spread awareness about recognizing the signs and symptoms of a stroke of people of all ages.

# MISSION HOSPITAL NURSING RESEARCH COUNCIL

MARCH 19, 2019

## Purpose and Specific Aims

The Mission Hospital Nursing Research Council promotes a culture of scientific inquiry and innovation to support nursing research, evidence-based practice, quality improvement research and nursing scholarship. Our council supports the translation of scientific evidence to improve excellence in clinical practice, patient outcomes and advances in nursing knowledge. The work of the research council contributes to the success of the nursing shared governance at Mission Hospital, a Magnet-accredited hospital since 2012.

## Ongoing Work

In 2018 the Mission Hospital Nursing Research Council celebrated the completion of four IRB approved nursing studies. The council provided research support for and critical review of three new collaborative clinical studies that received IRB approval in 2018. The council conducted monthly updates of the many nursing evidence-based practice projects and increased the frequency of meetings from 6 to 10 per year in 2018 due to full agendas of study proposal and project reviews and the addition of scholarly presentations.

## New Initiatives

A monthly "Write Time" was recommended by the council to increase nurse participation in the publication of abstracts, articles, and study proposals. The chair and co-chair (nurse scientist and clinical nurse specialist) scheduled three-hour sessions every month to begin in 2019 at the Laguna Beach and Mission Viejo campuses to mentor nurses in professional writing. A new Women and Infants study team was formed to manage two current collaborate nursing studies and evaluate other research opportunities. The nurse research residency program was approved and three staff nurses will be selected for participation in 2019.

## PUBLICATIONS IN 2018

Bautista C, Nydahl P, Bader MK, Livesay S, Cassier-Woidasky AK, and Olson D. (2019). Executive Summary: Post-Intensive Care Syndrome in the Neurocritical Intensive Care Unit. *J Neuroscience Nursing*. 51(4): 158-161.

Saherwala A, Bader MK, Stutzman S, Minhajuddin A, Figueroa S, Ghajar J, et al. (2018 - February). The Adam Williams Foundation Education program is associated with increased adherence to Brain Trauma Foundation Guidelines for hospital care of traumatic brain injury patients. *Critical Care Nurse* 38(1):e11-e20. Doi.10.4037/ccn2018691.

Brissie M, Nester H, and Bader MK. *Neurocritical Care Society Pocket Guide 2018*. Chapter 17 Multidisciplinary Patient Care in the NCCU.

McNett M, Bader MK, Livesay S, Yeager S, Moran C, Barnes A, Harrison K, and Olson DM. (2018). A National Trial on Differences in Cerebral Perfusion Pressure Values by Measurement Location. *NeuroCrit Care*. 28(2): 221-228. DOI: 10.1007/s12028-017-046707.

Bader MK. Clinical Questions and Answers: Translating Therapeutic Temperature Management from Theory to Practice - The Arctic Challenge. (2018). *Therapeutic Hypothermia and Temperature Management*. 8(4): 245-249.

Bader MK. Clinical Questions and Answers: Translating Therapeutic Temperature Management from Theory to Practice - The Arctic Challenge. (2018). *Therapeutic Hypothermia and Temperature Management*. 8(3): 181-185.

Bader MK. Clinical Questions and Answers: Translating Therapeutic Temperature Management from Theory to Practice - The Arctic Challenge. (2018). *Therapeutic Hypothermia and Temperature Management*. 8(2): 121-124.

## 2018 POSTERS AND PRESENTATIONS

<b>Arianna Barnes, BSN RN CCRN SCRNP PHN</b>	The Role of Constriction Velocity in Automated Pupillary Assessments
<b>June Melford, RN-BC MSN</b>	S.A.F.E. Toileting
<b>Arianna Barnes, BSN RN CCRN SCRNP PHN</b>	Fish out of Water: Increasing safety through proactive management in severe alcohol withdrawal
<b>Maria Ramirez</b>	Evaluation of the Implementation of Workflow RE-design Strategy and Changes in Hospital Oncology Nurse Occupational Fatigue

<b>Kathy Van Dusen, RN MSN CEN CPEN NHDP-BC</b>	Medical Emergencies at 30,000 feet: Advanced Critical Care and Emergency Nursing
<b>Kathy Van Dusen, RN MSN CEN CPEN NHDP-BC</b>	When Disaster Strikes: Advanced Critical Care and Emergency Nursing
<b>Kathy Van Dusen, RN MSN CEN CPEN NHDP-BC</b>	Workplace Violence: I didn't go into healthcare to become a victim
<b>Teresa A Wavra, RN, MSN, CNS, CCRN</b>	Pancreatitis: A Tale of Cell Destruction
<b>Teresa A Wavra, RN, MSN, CNS, CCRN</b>	Cold Case File: Mastering Target Temperature Management after Cardiac Arrest
<b>June Melford, RN-BC MSN Elvia Bender, RN BSN CCRN</b>	Prevention of Medical Device related Pressure Injuries
<b>Jill Donaldson, RN MSN CNS CMSRN</b>	Developing an Opioid Overdose Response and Naloxone Administration Community Education Program
<b>Arianna Barnes BSN RN CCRN SCR N PHN</b>	The Critical Care Healing Journal Gives Space for a Complete Recovery from Illness
<b>MaryKay Bader, RN MSN CCNS CCRN CNRN SCR N FNCS FAHA Arianna Barnes BSN RN CCRN SCR N PHN</b>	Correlating Neuroanatomy and Neuro assessment
<b>MaryKay Bader, RN MSN CCNS CCRN CNRN SCR N FNCS FAHA</b>	There will be Blood: Coagulation modifiers and Reversal strategies
<b>MaryKay Bader, RN MSN CCNS CCRN CNRN SCR N FNCS FAHA</b>	Mission Possible: Managing Severe Traumatic Brain Injury
<b>Teresa A Wavra, RN, MSN, CNS, CCRN MaryKay Bader, RN MSN CCNS CCRN CNRN SCR N FNCS FAHA</b>	Caring for the Patient undergoing Targeted Temperature Management
<b>Arianna Barnes BSN RN CCRN SCR N PHN Kris Machingo RN BSN CCRN RDMS</b>	Early recognition and Management in Severe Alcohol Withdrawal: The Sobering Truth
<b>Jen Schollenberger, RN BSN CCRN Anabella Anderson, RN BSN CCRN</b>	Clock is TICing: Preventing Trauma-induced Coagulopathy in the Bleeding trauma Population

## IRB APPROVED RESEARCH STUDIES FOR 2018

<b>Christine Gurney, MSN RN</b>	Labor RNs Study: How Does Nursing Care During Labor Influence Outcomes?
<b>Ruhi Majjoub, MSN RN</b>	Incidence of Delirium and Its Sequelae in the Hospitalized Older Adult from Emergency Department to Medical Surgical Units
<b>Christine Gurney, MSN RN</b>	Implementation of Childbirth-Specific Patient-Reported Outcomes Measures in the Hospital Setting

## EVIDENCE-BASED PROJECT GRID

<b>Leads</b>	<b>EBP/ QI Project</b>	<b>Start Date</b>	<b>Title of EBP/ Practice Issue</b>
ALL APNs	EBP	12/1/2018	EBP to improve Nurse Satisfaction Scores
June Melford	EBP	11/1/2018	Incontinence Associated Dermatitis Treatment Protocol
MK Bader	EBP	11/1/2018	Moderate TBI
Jill Donaldson	EBP	10/1/2018	Small bore feeding tubes
Debbi Busbey-Elder	EBP	6/1/2018	Elimination of foley cathetter use in TKR
Christine Gurney	EBP	11/17/2018	Support Vaginal Birth and Reduce Primary Cesareans
Kathy Van Dusen	EBP	10/17/2018	Pain Medication for Long Bone Fractures
Jill Donaldson	EBO	3/1/18	Opioid free - Physician orders in the ER

# MISSION HOSPITAL GRADUATE NURSE RECOGNITIONS EVENT

Nursing care has become increasingly complex. Nurses need to be able to apply health policy, system improvement, research, evidenced-based practice, teamwork and collaboration, complex decision making and leadership skills. In 2014, The American Association of Colleges of Nursing provided an overview of several studies that showed that nurses who obtain advanced degrees and hone these skills experience better patient outcomes, and they asked that hospitals provide proof of plans to increase their number of nurses with Bachelor of Science in Nursing (BSN) degrees to 80% by 2020 as part of Magnet designation.

To support this goal, the Mission Hospital Professional Education Department and Housewide Education Council sponsored a recognition event, on November 2, 2018, congratulating and honoring RNs who earned an advanced degree in the last 2 years while working at Mission. There were 52 RNs who earned a BSN degree during that time. In addition, 27 RNs had earned an MSN (masters) degree, and 1 RN had obtained a DNP (doctorate) degree.

The ceremony included a traditional nursing “pinning” of the graduates with a “lamp of learning”. The pin signifies hard work, dedication, and excellence in nursing; and is considered a medal of honor. The lamp represents the steadfast caring of nurses that began with the first nurses centuries ago who made nightly rounds, checking on the sick and dying with only a lamp to guide their way. These lamps provided comfort to patients because it reminded them that they were being watched over even in the darkest hours.



As the ceremony started, graduates entered the dimly lit conference center each carrying their own candle as friends, family, and colleagues in the audience watched. They sat their candles down on a table at the front of the room and took their seats. As each candle was added, the display brightened the room serving as an example of how the excellence in each of them brightens the lives of the patients they serve. Jennifer Cord, Chief Nursing Officer, gave a congratulatory speech to the group.

Then, each graduate present was called to stand and be pinned by an RN of his or her choice while a personal bio was read aloud. Some graduates chose their sisters, mothers, and wives to pin them. Others chose friends and colleagues. Each was chosen for the inspiration, support, and encouragement they provided to them throughout their journey – a testament to the willingness of nurses to help each other to excel.

At the end of the ceremony; Lisa Jacoby, Director of Spiritual Care, offered a prayer for the graduates and a cake reception followed. Many of the graduates said they did not have an opportunity to attend graduations at their schools and expressed their appreciation for the recognition and the opportunity to thank those who helped them along the way.



MISSION HOSPITAL GRADUATE NURSE RECOGNITIONS EVENT >



**Susan Smith, BSN** and **Jeanie Hamamura, MSN** (PACU Laguna Beach nurses)



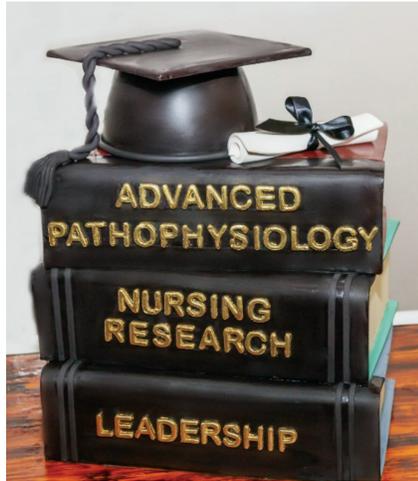
**Jeff Love, MSN** (Neurosurgical Institute Nurse Manager) and his wife **Connie** (also a nurse)



**Mary Birkle, MSN** (Emergency Services Director) and daughter (NCS Manager)



**Cathy Cullen, BSN** (CICU Nurse) and husband (**Steven Cullen, MD**)



Cake



**Alyssa Kutz, MSN** (Same Day Care Nurse) and family



**Amal Hamden, MSN** (Telemetry Sepsis nurse) and Manager (**Stefanie Ferguson**)



**Gen Grable, MSN** (Nurse Educator) and mother (retired Mission Medical Surgical nurse)



**Monica Malcuit, MSN** (Laguna Beach Med Surg & ICU Manager) and children

>

## MISSION HOSPITAL GRADUATE NURSE RECOGNITIONS EVENT >

**Gen Grable** was one of the graduates present. She started her healthcare career at Mission as a PCT in 2002. She likes to say, she “grew up at Mission”. One year later she obtained her Associate Degree in Nursing and accepted a position as a Medical Surgical Nurse. In 2007, she earned her BSN with support from Mission. She became a relief Charge Nurse, Chaired the Housewide Leadership Council, obtained Medical Surgical Nursing Certification, participated in a project to better identify patients with post-operative sleep apnea, earned Clinical Ladder III Status, and was part of the Quality, Education, and Safety Team (a group of nurses selected to lead patient care improvements in their units). She became interested in Nursing Education and decided to go back to school for her MSN in 2014, again with support from Mission. She accepted a position as a Nurse Educator and currently leads Mission’s student training and new nurse Transition in Practice programs. Gen has a passion for helping students and nurses as they begin their own journeys. She said she is grateful for the support Mission has given her. She considers Mission employees her family, and some literally are. Her mother is a retired Mission Medical Surgical Nurse. Her father is a retired Mission Surgical Tech. Her husband is a Mission Respiratory Therapist. She was thrilled to be able to share this experience with all of them and have her mother pin her.

**Jeffrey Love** started his healthcare career as a Surgical Technologist. After obtaining his Associate Degree in Nursing in 1993, he obtained his first nursing position - “New Grad Nurse” in Mission’s operating room. This was a huge endeavor for a new nurse, but his passion was for surgical services and he was successful. Having earned his BSN, in 2006 he accepted a position as a Clinical Supervisor in Mission’s Ambulatory Surgery Center. In 2010, he completed advanced coursework and became an RN First Assist in Mission’s main operating room. In 2014, he advanced to Charge Nurse as Mission opened the Neurosurgical Institute. At that time, he began to pursue his MBA/MSN and applied what he was learning to look at programmatic growth, financial performance, and the maintenance of quality. Upon graduation from his Masters program, his role changed to Coordinator of Clinical Program Development. When the opportunity arose, he was the natural choice to be the Manager of Neurosurgery. He said his wife Connie, also an RN, was instrumental in his decision to pursue nursing 29 years ago. Her pursuit of professional excellence has always impressed and inspired him. And, her support and love made a very challenging program manageable. He expressed his appreciation for being able to share this celebration with his colleagues and his wife, who he chose to pin him. He hopes his ability to earn his degrees will encourage others to pursue or continue their education.

These are just 2 examples of many Mission nurses who have achieved great success in their careers that we were honored to be able to recognize. **Mary Birkle**, Director of Emergency Services and a recent MSN graduate, said it best when she wrote “I feel inspired by the incredible caliber of nurses I am privileged to interact with every day at Mission. Being recognized by this amazing group enhances my sense of accomplishment and creates a strong community among us.”

# 2018 NURSING AND PATIENT CARE AWARD WINNERS



**Critical Care Healing Journal**  
INNOVATION 2018



**Jill Donaldson RN, MSN, CNS,  
CMSRN**  
PRACTICE 2018



**Debra Busby-Edebiri RN, BSN,  
CNOR, CEN**  
EDUCATION 2018



**Sepsis Team**  
QUALITY 2018



**Comprehensive Stroke Team**  
COLLABORATIVE PRACTICE  
2018



**Carla Salazar BSN, RN, SCRNP**  
LEADERSHIP 2018



**Leonard Ching, Surgical Tech  
Coordinator**  
PARTNER IN CARE AWARD  
2018



**Rachel Talafus, PCT**  
PARTNER IN CARE AWARD  
2018



**Angel Salazar, Endo Tech**  
PARTNER IN CARE AWARD  
2018

# HOUSEWIDE NURSING QUALITY COUNCIL

Co-Chairs: **Megan Clark & Liz Stock**

APN Mentor: **June Melford**

Director: **Deanne Niedziela**

Nursing Quality Council is focused on ensuring and improving quality, safety and outcomes in patient care.

The Council is structured with an interdisciplinary, collaborative focus. Every nursing unit at Mission Viejo and Laguna Beach campus is represented, with representation from Infection Prevention, Pharmacy and Education; together with increased collaboration with the Quality department including Patient Safety, Regulatory, and Risk & Performance Improvement Managers. Leadership is represented by Director, Deanne Niedziela and Chief Nursing Officer, Jennifer Cord.

## NURSING QUALITY COUNCIL MONITORS AND REVIEWS

- › Performance measures include reports from the committees for fall prevention, Pressure Injury, Restraint, Pain Stroke & Sepsis measures & additional Nurse Sensitive Indicators of all in-patient and ambulatory care areas.
- › Survey readiness through Regulatory, Risk and Quality Operations Council updates
- › Medication safety through CareFusion reports and audits on usage and over-ride of guardrails on Alaris IV pumps, Barcode Medication Administration Compliance reports and Pharmacy related QRE's.

Nursing Quality Council works to identify areas of patient safety concern and opportunities for improvement, and assists with developing and implementing action plans, including:

- › Increased Bedside Medication Scanning Compliance by identifying and addressing challenges including incompatible barcodes, scanner and internet connectivity issues.
- › Assisted with smooth implementation of unit-based Quality Dashboards which provide current data on performance indicators pertinent to each unit.
- › Supported change on units related to safe practice and care through identification of failing pulse oximeter probes, delays in obtaining STAT radiology exams and different clinical practice guidelines on the care of critically ill patients with DKA
- › Promoted safety initiatives on the unit related to rapidly changing clinical and pharmacy supplies due to supply shortages, through sharing education on new medication vials, equipment and practice changes.
- › Alaris Guardrail library updated with medications/parameter changes identified through Catch of the Day and QRE reporting and adapted Alaris screen display to reduce use of unprotected 'Basic infusion' mode.

Success continues to be demonstrated through the consistently high percentage of units that outperform the National benchmarks for our key reportable Nursing Sensitive Indicators.

<b>NURSE SENSITIVE INDICATOR SCORECARDS</b>		
<b>Nurse Sensitive Indicators (NSI)</b> Nurse Sensitive Indicators are measures that reflect the structure, process and outcomes of nursing care.	<b>Number of units outperforming National benchmark</b> (for 5 or more quarters over 2 years 4Q CY18)	<b>National Benchmark</b>
Falls	✓ 18/23 units	NDNQI (National Database of Nurse Quality Indicators)
Falls with injury	✓ 20/23 units	
Hospital Acquired Pressure Ulcers >Stage II	✓ 10/11 units	
Restraints	✓ 10/11 units	
CAUTI - Catheter Associated Urinary Tract Infection	✓ 9/11 units	CALNOC (Collaborative Alliance of Nursing Outcomes)
CLABSI - Central Line Associated Blood Stream Infection	✓ 9/10 units	

# HOUSEWIDE PRACTICE COUNCIL (HWPC) CHARTER

## OVERALL ROLES AND RESPONSIBILITIES

The Practice Council's purpose is to **Support the development of Best Practice—What we do, How we do it, Why we do it, and Where we do it.**

The council's vision is **The Clinical Practice Council through consensus decision making of its participants will ensure Best Evidence Based Practice!**

### RESPONSIBILITIES:

- › Directs and facilitates excellence in clinical practice and the delivery of patient and family centered care through a multidisciplinary forum for shared decision making.
- › Identifies and examines issues, discrepancies, adherence, and failures in clinical practice through the lens of the unit as well as organizational perspective.
- › Defines and redefines the standard of practice related to current evidence, nursing scope and standards of practice, and the American Nurses Association Nursing Code of Ethics.
- › Reviews, discusses and approves all new or significant changes in nursing policy and procedures, practice standards, and/or clinical guidelines that affect housewide nursing practice
  - » Reviews, discusses and approves all new or significant changes in nursing policy and procedure, practice standards, and/or clinical guideline
  - » Provides access to evidence
  - » Identifies resources (Advanced Practice Nurse and Research Council) to assist in interpretation, translation, and application of the research
- › Reviews and discusses all equipment that impacts nursing care and provides feedback to the Quality Analysis Committee
- › Identifies potential future clinical practice issues and prospectively improves practice

### MEETING

1. Monthly (1st Tuesday of every month) from 10:00am to 12:00pm in the Mission Conference Center
2. Dark in August and December
3. Agenda is standardized format

### COUNCIL STRUCTURE

The council consists of the following members:

- › Chairs of the unit-based nursing practice councils
- › 2-3 advanced practice nurses (APN)
- › Chairs of the individual committees
- › Representatives from professional education and infection prevention
- › Collaborative partner representatives from radiology, rehabilitation therapy, respiratory care
- › Physician

Much of the ongoing work of the Practice Council is completed by work groups or committees. The following work groups are part of the Practice Council:

- › **Evidence Based Practice: Related to All Nursing Areas.**
- › **Patient Care Delivery System: Environment of Care and Equipment**
- › **Multidisciplinary Practice: Coordination and collaboration of Team**

**Goals and Strategic Initiatives:** All of the Practice Council's goals and strategic initiatives support the Nursing Strategic Goals

### **COMMITTEES/WORKGROUPS:**

- › EBP
- › Multidisciplinary Groups
- › Patient Care Delivery System

### **REQUIREMENTS OF MEMBERS AND WORK GROUPS:**

1. Members must attend at least 70 percent of yearly meetings.
2. Inability to attend a meeting must be clearly communicated to the chair in advance. If unable to attend the meeting, identifies a replacement member and an e-mail address so we may send information to the person prior to HWPC meeting.
3. Identify nursing workflow opportunities for improvement through pulse checks and collaborate with multidisciplinary team to improve efficiency and flow.
4. Work groups will include their minutes at the end of the general meeting minutes.
5. Minutes will be posted to the HWPC StaffHub site for minute approval prior to the next meeting.

### **ANNUAL COUNCIL GOALS BY WORK GROUPS:**

#### **Care of the Patient Withdrawing from Substances:**

- › Review evidence based literature related to the management of opioid withdrawal in the hospitalized patients by the April of 2019
- › Develop order sets and guidelines for managing patients experiencing opioid withdrawals and have approved by relevant committees by the end of June 2019
- › Develop and deliver staff education on assessing and managing patients experiencing opioid withdrawal to ensure staff and patient safety by the end of October 2019

### **Code Grey Huddles and Debriefs**

- › Review the literature regarding interdisciplinary communication before, during, and after an assaultive/combatative patient emergency by the end of May 2019
- › Develop a “Code Grey” huddle and debrief tool on a single sheet of paper by the end of July 2019
- › Pilot the use of the tool on an acute care nursing unit by the end of September 2019
- › Review data collected with the tool and present to HWPC for the meeting in November 2019.

### **Virtual HWPC meeting**

- › Develop virtual meeting rules from HWPC members by the end of April 2019
- › Offer virtual meeting for member participation by the end of May 2019
- › By the end of 2019, HWPC will engage in a meeting via WebEx

### **Resting hours**

- › Identify key multidisciplinary members who can be impacted by resting hours by the end of April 2019
- › Review the literature regarding the benefits and barriers and scheduled resting hours by the end of June 2019
- › Discuss the implementation of resting hours and identify two units to trial resting hours by the end of August 2019
- › Pilot and evaluate resting hours on trial units by the end of November 2019

# WOMEN AND INFANTS INSTITUTE

**Christine Gurney, RN**

**Sue Jacobson, RN**

We welcome more than 2300 babies at Mission Hospital each year. These sacred events occur in our traditional labor and delivery suites, our surgical suites, and as of July 2018, our midwifery suites.

The optimal delivery is a vaginal delivery, but cesarean deliveries can be a lifesaving procedure when vaginal birth is not safe for mother or baby. Regulatory agencies, insurance companies and others have become concerned about the rising cesarean birth rates and the associated complications and our specialty is tasked to make a difference. One patient population that has been identified for our increased efforts is the Nulliparous Term Singleton Vertex (NTSV) mother: Nulliparous (first birth); Term (37 week gestation or over); Singleton (no multiples); and Vertex (head first).

In early 2016, our NTSV cesarean rates were the highest among our Ministries at 31.8% (Healthy People 2020 Goal <23.9%). A concerted effort began to decrease these rates. Nurses and physicians from the Women & Infants Institute joined a Collaborative to Support Vaginal Birth and Reduce Primary Cesareans with the California Maternal Quality Care Collaborative (CMQCC). Our team attended monthly calls/meetings and implemented practice changes that made a significant impact. The nurse physician collaboration helped to improve communication; as one of our physicians noted, "we are all on the same page and have the same goal." Nurses helped to make a difference by:

- › Completing education on labor support & positions and putting these into practice
- › Highlighting "NTSV" on the patient chalkboard which serves as a visual and constant reminder
- › Supporting our scheduling policy to ensure patients meet criteria prior to being induced
- › Reviewing the Labor Dystocia Checklist with physicians to hold off on cesarean deliveries when safe to do so

We met the Healthy People 2020 goal <23.9% and have sustained this for the last six quarters. Our Collaborative work demonstrates our ability to have a multidisciplinary, quality improvement project with a positive impact on infants, families, and staff.

# HOUSEWIDE NURSING LEADERSHIP COUNCIL

## 2018 NURSING LEADERSHIP COUNCIL GOALS WITH RESULTS:

The Nursing Leadership Council will establish annual goals specifying its principal work focus areas for the coming year.

Goals for 2018 will address findings from the 2017 Shared Governance Survey:

- › **Recruitment:** As part of their Orientation, nurses hired after March 2018 will participate in 2 unit based shared governance meetings within their first 6 months of hire, with an initial goal of 60 percent completion by December 2018. **22 of 104 new hires attended a meeting (approx. 21.1%). Initial challenges were lack of support from managers; official approval received in September 2018 at Manager's meeting. Continued project for 2019.**
- › **Education:** Improve staff understanding of what Shared Governance is from 30% (established from 2017 survey results) to 60%. Results will be measured by repeating the Shared Governance Survey in December 2018, with results to be reported to Council in January 2019. **The 2018 survey reported 35% of respondees didn't know/knew little of sg model. Creation of educational posters and recruitment efforts were used as educational tools.**
- › **Information Dissemination:** In an effort to improve accessibility to all Shared Governance Council activities, including membership, projects, and goals, the NLC, with the input from the other Housewide Councils, will develop and implement 2 plans of action:
  - » Develop a Unit Shared Governance information board that will be consistent in all units, with initial goal of 50% compliance by July 2018, and 80% compliance by December 2018. **RESULTS: Approximately 25% of units have established an information board. Project was affected by some units not having the necessary supplies/materials available. CNO is supporting all units having whiteboards/lettering to achieve consistency. Ongoing project for 2019.**
  - » Develop a means of accessing Housewide Shared Governance information electronically, that would be available to all staff. This has been identified as a long term project for council; Feasibility will be reported to Coordinating Council for approval by July 2018; implementation will be based upon results of feasibility findings. **Education Council has taken lead on this project and has encountered difficulties in program design; ongoing project for 2019.**

# OUR VALUES

## COMPASSION

*Jesus taught and healed with compassion for all. —Matthew 4:24*

## DIGNITY

*All people have been created in the image of God. —Genesis 1:27*

## JUSTICE

*Act with justice, love with kindness and walk humbly with your God. —Micah 6:8*

## EXCELLENCE

*Whatever you do, work at it with all your heart. —Colossians 3:23*

## INTEGRITY

*Let us love not merely with words or speech but with actions in truth. —1 John 3:18*

*Our new Mission, vision and values were introduced in 2018 as part of our coming together with Providence.*

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