



Looking ahead with excitement,
growth and resilience

MISSION

Our Ministry:

Extends the compassionate ministry of Jesus by improving the health and well-being of our communities and brings good help to those in need, especially people who are poor, dying and underserved.

VISION

Inspired by God’s hope for the world, we will be a ministry where associates want to work, clinicians want to practice, people seek wellness and communities thrive.

VALUES

- Human dignity
- Integrity
- Compassion
- Stewardship
- Service

NURSING MISSION

Deliver compassionate, competent, holistic nursing care grounded in evidence and extend our Catholic identity to bring good help to those in need.

NURSING VISION

Be a destination for professional nursing talent to practice.

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Reflecting on 2019 and 2020

The past two years have been filled with excitement, learning, growth and resilience. We continued our journey to advance professional nursing practice, constantly striving to provide extraordinary care. Thanks to the dedicated efforts of nurses throughout the Cincinnati market, Mercy Health — Fairfield Hospital received Magnet re-designation, The Jewish Hospital — Mercy Health and Mercy Health — West Hospital successfully achieved their first Magnet designations and Mercy Health — Anderson Hospital and Mercy Health — Clermont Hospitals remained steadfast in their commitment to a culture of nursing excellence.

These achievements highlight our nurses' dedication to patients, the communities we serve and our commitment to advancing nursing practice. But they don't tell the whole story.

2020 was designated by the World Health Organization as the Year of the Nurse. While it was not the year we envisioned, it proved to be the year that showcased nursing at its finest. Hospitals went from handling an outbreak to managing a global pandemic with nurses leading the way and giving new meaning to the term superhero. Little did nurses realize how the hurdles and health care challenges created by COVID-19 would impact both their personal and professional lives.

Mercy Health nurses faced and prevailed over obstacles, obstructions and hardships in a calm, professional manner. They adjusted long standing policies and procedures, adopted new skills and practices and adapted to the everchanging circumstances that surrounded their practice - all to meet the needs of patients they served.

In the pages that follow, you'll see stories of leadership, excellence, innovation and compassion. You will see examples of Mercy Health Nurses not only serving as care givers, but also taking on the role of friend and family.

Mercy Health's Cincinnati nurses have much to be proud of, and we look forward to the continued growth, advancement and excellence of our nursing practice in 2021.

Sincerely yours,

The Cincinnati Market Chief Nursing Officers

Nicole Barnett

Nicole D. Barnett DNP, MSN, BSN, RN, CIC
Chief Nursing Officer, Mercy Health — Anderson Hospital

Sandra Hugueley

Sandra Hugueley, MSN, NE-BC, CPPS
VP of Nursing, Mercy Health — Clermont Hospital

Ramona Cheek

Ramona Cheek MS, RN, CPHQ
Chief Nursing Officer, Mercy Health — Fairfield Hospital

Vanessa Vonderhaar-Picard

Vanessa Vonderhaar-Picard, DNP, MEd, RN, CNML
Chief Nursing Officer, The Jewish Hospital — Mercy Health

Jen Jackson

Jen Jackson, DNP, RN, NEA-BC
Chief Nursing Officer, Mercy Health — West Hospital

Stephanie Meade

Stephanie S. Meade, DNP, MBA, RN, NEA-BC
Chief Nursing Officer, Mercy Health — Cincinnati Market
Associate System CNE, Nursing Operations and Outcomes

Cincinnati Nursing Leadership



Stephanie Meade, DNP, MBA, RN, NEA-BC
Chief Nursing Officer
Mercy Health — Cincinnati Market
Associate System CNE, Nursing Operations and Outcomes



Nicole Barnett, DNP, MSN, BSN, RN, CIC
Chief Nursing Officer
Mercy Health — Anderson Hospital



Sandra Hugueley, MSN, NE-BC, CPPS
Vice President of Nursing
Mercy Health — Clermont Hospital



Ramona Cheek, MS, BSN, RN, CPHQ
Vice President and Chief Nursing Officer
Mercy Health — Fairfield Hospital



Vanessa Vonderhaar-Picard, MSN, Med, RN, CNML
Vice President and Chief Nursing Officer
The Jewish Hospital — Mercy Health



Jen Jackson, DNP, RN, NEA-BC
Chief Nursing Officer
Mercy Health — West Hospital

Magnet recognition highlights strong nursing culture

The Jewish Hospital — Mercy Health and Mercy Health — West Hospital in Cincinnati both achieved Magnet recognition for the first time in September 2020. The American Nurses Credentialing Center's Magnet Recognition Program® distinguishes health care organizations that meet rigorous standards for nursing excellence. Only a select group of U.S. health care organizations (8% of all registered hospitals) have achieved Magnet recognition, widely recognized as the gold standard for nursing excellence.

West Hospital's chief nursing officer, Jen Jackson, described Magnet recognition as "tangible evidence of our nurses' commitment to providing the very best care to our patients, of which we are extremely proud."

"Achieving Magnet recognition reinforces to our nurses the culture of excellence that is a cornerstone of how we serve our community," added Vanessa Vonderhaar-Picard, The Jewish Hospital's chief nursing officer.

According to a 13-year study published in the journal *Health Affairs*, patient outcomes were significantly better in hospitals that had been awarded Magnet status. It has also been linked to improved hospital financial performance.

For Mercy Health nurses, Magnet designation means having a voice within the organization and feeling empowered to make changes in the work environment through council membership, research projects and education. Magnet status is an indication that our nurses strive for excellence and continued improvements.

With this accomplishment, Mercy Health now has three Magnet hospitals in the Cincinnati market:

Mercy Health — West Hospital

The Jewish Hospital — Mercy Health

Mercy Health — Fairfield Hospital
2018 designation



Nurses adopt a unified professional practice model

Following months of work, Mercy Health and Bon Secours nurses adopted one unified nursing professional practice model in December 2020. This model and its core concepts – caring, innovation, excellence, faith and professional development – reflect our nursing culture while embracing and building upon our ministry's core culture behaviors: empowered, unified, agile and committed to the ministry.



Caring

We embrace caring theory and science to promote nurse well-being and healthy relationships with each other and those we care for.

Innovation

We continually seek to discover new knowledge, solutions and technology to advance care delivery and nursing science.

Excellence

We strive for excellence to deepen the impact of nursing through collaborative, evidence-based practice that achieves the highest quality outcomes.

Faith

We honor our faith tradition as we live out our nursing mission and vision of a compassionate, healing ministry.

Professional Development

We ensure learning experiences and career pathways that promote professionalism, autonomy, full scope of practice and diverse skills for contemporary roles.

Transformational leadership

Transformational leaders stimulate and inspire others to achieve extraordinary outcomes. They align everyone's goals and objectives with the larger organization while transforming to meet the needs of the future. This requires vision, influence, clinical knowledge and strong expertise related to the professional nursing practice.

FAIRFIELD HOSPITAL

5-Star Discharge Sheet improves patient satisfaction scores

Over a 12-month period, the nurses on the Acute Rehab Unit at Mercy Health — Fairfield Hospital noted patient satisfaction scores related to discharge had fallen below their unit goal and the national average. In the Press Ganey survey, patients were stating they were unsure of their medication regimen at discharge. The nursing staff on the Acute Rehab Unit recognized the need for a new discharge process that would enable them to improve patient outcomes, avoid readmissions and prevent unintentional medication errors.

The nurses developed and implemented the acute rehab-specific 5-Star Discharge Sheet. The sheet would be given to all patients at admission and reviewed before discharge. The sheet highlights five key discussion points:

- 1. Patient location after discharge (home, post-acute care, etc.)
- 2. Importance of physician follow up after discharge
- 3. Awareness of the signs and symptoms to look for at home and when to seek emergency help
- 4. Review of discharge medications: new medications (uses and side effects) and home medications that need to be refilled
- 5. Questions the patient might have for the staff

The discharge sheet was reviewed with the interdisciplinary care team to ensure everyone knew what an important role the sheet played in the patient having a successful discharge.

Nurses began using the 5-Star Discharge Sheet in March 2019 and immediately observed a significant increase in patient satisfaction scores related to discharge compared to the beginning of the year. They have maintained scores above the national average and unit goal.

DISCHARGE DATE	JAN 19	FEB 19	MAR 19	APR 19	MAY 19	JUN 19	JUL 19	AUG 19	SEP 19	OCT 19	NOV 19	DEC 19	2020 AVERAGE
MEAN SCORE	75	59.4	91.7	100	90.6	75	100	87.5	100	83.3	100	87.5	89.3
DATABASE MEAN*	86.7	86.7	86.7	86.7	86.7	86.7	86.7	86.7	86.7	86.8	86.8	86.8	86.8

* Beginning in October 2019, scores were benchmarked with all other inpatient units in national database.

ANDERSON HOSPITAL

Collaborative action plan improves retention of experienced nurses

In 2019, leaders identified a problem retaining experienced intensive care unit (ICU) nurses at Mercy Health — Anderson Hospital. The ICU manager teamed up with an experienced nurse and the unit-based council (UBC) to explore the issue.

The team surveyed ICU nurses. In response to the survey results, they initiated an action plan to increase nurse satisfaction and retention.

The survey identified floating as a dissatisfier. After discussion, the UBC decided that each month nurses recognized as “ICU Extraordinaires” would be eligible to win a float pass.

Other feedback focused on tenure incentives pertaining to weekend and holiday commitments. The manager and the UBC evaluated ideas for viable options that would enable the unit to sustain 24/7 functionality. After several months of preparation, the unit implemented tenure incentives:

- **5 years tenure:** two scheduled weekends off per year without having to find coverage
- **10 years tenure:** one scheduled holiday off per year
- **20 years tenure:** no weekend requirement
- **30 years tenure:** no holiday requirement

The collaborative effort between the unit manager and the UBC resulted in an action plan that led to cutting the unit’s voluntary turnover rate in half, decreasing it from 18.8% in August 2019 to 9.9% in January 2020.



WEST HOSPITAL

Birth center supports grieving families through Rachel’s Gift

A clinical nurse on the Family Birth Center (FBC) identified a missing component to the nursing practice at Mercy Health — West Hospital: a lack of support for families who were grieving after experiencing the loss of an infant. The nurse researched resources available for families grieving the loss of an infant and discovered Rachel’s Gift.

Rachel’s Gift is an organization based in Atlanta, Georgia, that partners with hospitals and nursing staff to help parents through the grieving process of infant loss. Rachel’s Gift provides training and resources for nurses to assist parents through this tragic experience. The organization also provides keepsakes for the grieving parents to take home. Nursing leadership approved adding this program for the FBC, and a Rachel’s Gift representative came to West Hospital to deliver training to FBC nurses November 20-22, 2017.

The training identified the impact nurses have during the trauma of infant loss and how nurses truly make a difference during this difficult time. The program quickly expanded to include patients in the emergency department experiencing infant loss and to the community as a monthly perinatal loss support group. Nurses use Rachel’s Gift items to help patients and families during the grieving process.

The program is supported through fundraisers such as Rachel’s Gift Angel Dash 5K run. West Hospital participated in 2018, 2019 and 2020 with virtual teams made up of the FBC staff and families who have experienced infant loss.

The integration of Rachel’s Gift into the nursing practice at West Hospital is an outstanding example of Mercy Health’s Mission and continues today.



CLERMONT HOSPITAL

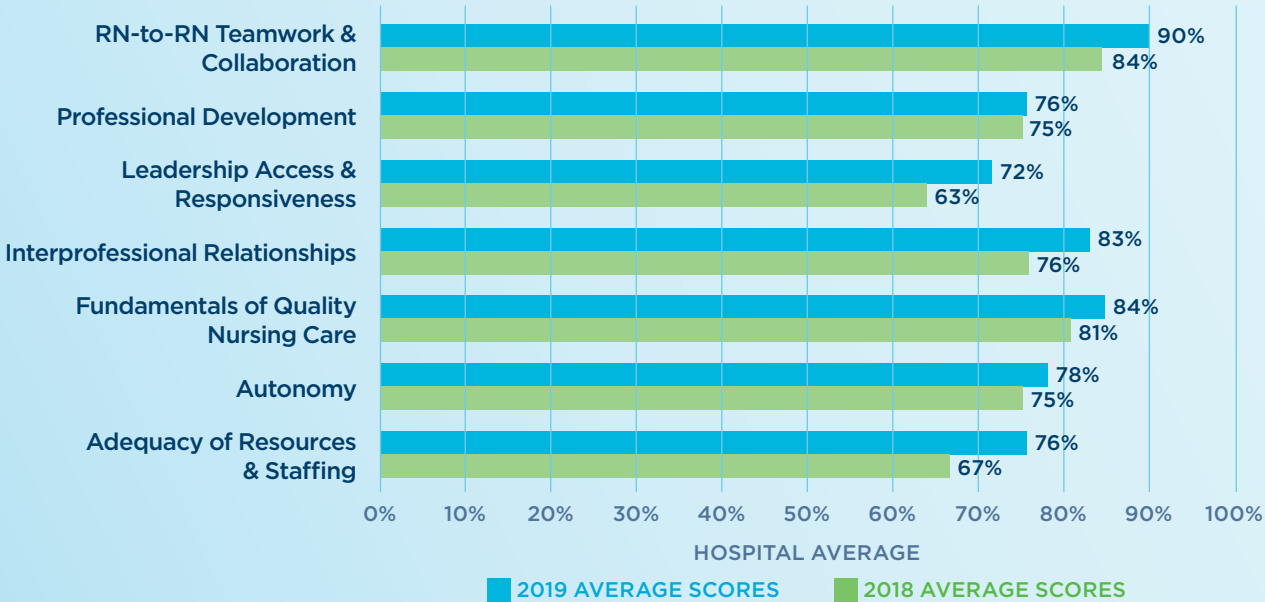
Empowerment improves nurse engagement scores

As part of their Magnet Journey to Excellence, Mercy Health — Clermont Hospital nurse leadership had a goal to improve the hospital’s nursing engagement scores. To help achieve this goal, they transformed their Magnet Champion meetings into nursing empowerment workgroups.

The Magnet Champion team includes a nurse representative from each nursing department. Champions explored the concepts of nursing empowerment, engagement, nurse-sensitive quality indicators and patient experience. The Champions then sponsored fun informational activities and raffles to drive these concepts and engage nurses in the hospital’s Journey to Excellence. Nurses even added their names to leaves on the Nurses Falling for Magnet Journey to Excellence Tree to proclaim their participation in the engagement survey and encourage all nurses to get involved.

Thanks to these efforts, Clermont Hospital experienced a significant improvement in their 2019 nursing engagement scores.

MERCY HEALTH — CLERMONT HOSPITAL NURSING ENGAGEMENT SCORES



Nurses expand roles to optimize patient flow for COVID-19

Before the onset of the COVID-19 pandemic in the Cincinnati area, 6 South in The Jewish Hospital — Mercy Health operated as a medical-surgical and telemetry unit. When cases of COVID-19 were first seen in the U.S., the nurses on 6 South immediately began requesting their manager arrange advanced clinical training to prepare them for the arrival of COVID-19 patients. In particular, the nurses wanted training for ventilator care and management – along with any additional skill that would help them care for these patients.

The hospital soon designated the Progressive Care Unit (PCU) as the COVID-19 unit, and 6 South took on the responsibility of caring for patients with higher acuities. Nurses underwent extensive training for pre- and post-cardiac catheterization care, as well as post-cardiac procedure care such as pacemaker insertions, titratable cardiac drips and preoperative open-heart care.

After becoming skilled at caring for the new higher-acuity cardiac patients, nurses on 6 South began asking for training to care for patients who require BIPAP, heated high flow oxygen up to 40L and ventilator management of patients with tracheostomy. After receiving this supplemental education for the care of respiratory patients, they were able to manage patients requiring additional respiratory support.

The 6 South nurse manager, the nurse practice development associate, the simulation lab coordinator and ICU nurses partnered to educate the staff.

The unit's goal at the beginning of 2020 was to prepare to care for patients with COVID-19, but the nurses have grown into so much more because of the pandemic. One year ago, caring for a post-cardiac catheterization procedure could have intimidated them, but now they are not only using their new knowledge, they are also imparting that knowledge and skills to our new graduate nurses. The Jewish Hospital now has nurses pursuing progressive care certified nurse (PCCN) certifications.

The nurses of 6 South have gained a broader skill set and are proud that they can confidently care for patients with higher-acuity needs, allowing intensive care unit nurses to dedicate their efforts to only the highest-acuity patients.

Improving patient flow and decreasing inpatient admission wait time

Patient census at The Jewish Hospital — Mercy Health usually peaks between November and March due to emergency department (ED) flu admissions and perioperative elective surgeries. The organization had a goal to improve patient flow and decrease inpatient admission wait time.

A nursing leader led an initiative to advocate for more nursing resources and additional bed space. The leader initiated a nursing float pool and determined that unused existing bed space could be opened during peak census as an overflow unit for patients who did not require telemetry. In November 2018, the overflow unit was staffed and opened.

This initiative provided the vital resources needed to not only deliver quality patient care, but also decrease wait times for patients in the ED and PACU who needed inpatient bed placement.

The overflow unit continued to make an impact throughout 2019, and the nursing float pool and overflow unit played a vital role in 2020 during the COVID-19 pandemic.



Structural Empowerment

Solid structures and processes within our organization empower nurses to innovate, collaborate and achieve a higher understanding of the nursing profession. Nurses are empowered to meet the needs of our community. Determining the best ways to achieve the organizational goals is fostered through strong interprofessional relationships.

ANDERSON HOSPITAL

Clinical nurses provide community health screenings and education

Aligning with the Healthy People 2020 initiative, Mercy Health — Anderson Hospital held quarterly Healthy Happy Hour events in 2018 to educate area residents on key health topics, offer health screenings and provide access to health care providers. Healthy People 2020 seeks to improve community health by increasing public awareness and understanding of the determinants of health, disease and disability.

The initial event in February 2018 involved a planning team of nurses from multiple areas of the hospital who organized the educational topics and health screenings. The planning team nurses recruited other nurses, and in 2019 the program grew. More than 300 people attended four Anderson Hospital Healthy Happy Hour events in 2018, and more than 500 attended the quarterly events in 2019.

Anderson Hospital nurses provided musculoskeletal, lung cancer and blood pressure screenings, as well as one-on-one education on major health issues and related hospital services such as:

- Risk factors and signs/symptoms of heart attack and stroke
- Smoking cessation
- Heart failure
- Cardiovascular and noninvasive cardiology services
- Family Birthing Center and women's services
- Acute rehabilitation services

Nursing collaborated with the physicians to provide educational presentations on topics that addressed getting heart smart, how to rejuvenate your joints, healthy lifestyles and women's health.

Our clinicians worked the events to raise awareness and provide much-needed education to attendees about important health issues that affect our community. Attendees have indicated that the health information shared in the physician presentations, one-on-one information tables and health screenings has been invaluable.

CLERMONT HOSPITAL

Shared Leadership Committee adjusts model to boost nurse participation and effectiveness

In January 2020, Mercy Health — Clermont Hospital's nursing-led Shared Leadership Committee members identified a need to change their current program model to better accommodate the needs of their facility. The model consisted of nine committees, which required the attendance of a large number of nurses. Low membership in each of the nine committees created a barrier to getting projects started and completed. The goal of the new model was to improve participation, projects and ultimately outcomes.

The Shared Leadership site-based chair completed a literature review to investigate other types of shared leadership models that would align better with the facility's needs. She developed a model that combined several different aspects of best-practice shared leadership models while also incorporating the Magnet model.

In February 2020, she presented the initial model to nursing leaders and Shared Leadership advisors and co-chairs. The group provided feedback and fine-tuned the model. They then began the work of naming the new committees and developing a new committee charter, purpose statements and goals. The new model includes five committees:

- Art of Caring (focused on patient experience)
- Clinical Excellence (focused on nurse-sensitive quality indicators)
- Employee Engagement
- Unit Based Clinical Council
- A Coordination Committee (made up of all committee co-chairs)

Due to the COVID-19 pandemic, implementation was delayed from March to July 2020, when the new model was introduced to clinical and nonclinical staff during a Founding Members kickoff event that included PowerPoint presentations, poster board displays, handouts, edible treats and a raffle. The information thoroughly reviewed the new model and each new committee's purpose and function. Staff were encouraged to sign up for the committee that interested them most, and those who signed up were deemed Founding Members and entered into a raffle. All shifts throughout the hospital were included in this important, fun endeavor.

After implementing the new Shared Leadership model, committee attendance increased despite the pandemic, and several new nurse-driven projects have been initiated. In 2021, committee members will provide feedback via a survey regarding the impact and effectiveness of this new model.

WEST HOSPITAL

Nurse launches daily prayer services for patients and health care heroes

Providers, nurses, caregivers and hospital staff everywhere have worked tirelessly to care for patients during this pandemic. Associates, patients, families and the local community at Mercy Health — West Hospital in Cincinnati, Ohio, have joined together to pray for these health care heroes and their patients twice daily at 3 a.m. and 3 p.m.

The manager of emergency services (an RN) and the director of mission integration started the prayer service.

“You can always stop for three minutes and take some time for reflection,” explained the director.

Called 3 at 3, the prayer service marks the hour of mercy at 3 p.m. and is repeated at 3 a.m. for associates who work night shifts. It became a sacred time to pray for patients, their loved ones and our own staff.

When sharing the motivation for starting this prayer service, the director said, “This team shows up every day and puts themselves in harm’s way to serve patients and they don’t ask for much. They come to work and do their job and don’t realize the enormity of their work. They are my heroes and the reason I show up every day. They truly amaze me.”

Many associates now have alarms on their phones as a reminder to pray, and an announcement is made over the intercom system every day. As word of 3 at 3 spread across social media and into the community, local churches and people in the area have started joining the hospital in prayer as well.

FAIRFIELD HOSPITAL

Nurses improve pain control while reducing medication use

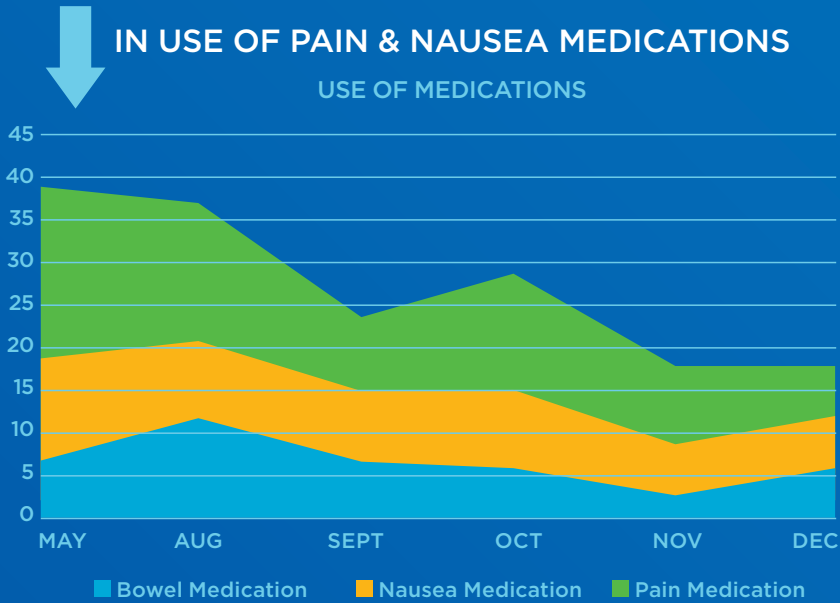
Mercy Health — Fairfield Hospital’s 5 Tower is a 29-bed oncology medical-surgical unit caring for a diverse patient population. The patients often receive surgical interventions or treatments such as chemotherapy and radiation. Cancer-related complications and a variety of other patient diagnoses are not unusual. In May 2019, nurses on the unit observed high usage of pain and nausea medications with their patients.

Recognizing an opportunity to reduce medication use without compromising pain control in their patients, the nurses developed a plan encompassing symptom management coupled with education. They first focused on identifying the type of pain the patient was experiencing, then on establishing the cause and determining if non-pharmacological treatments could be effective in decreasing the pain.

They collaborated with an oncologist and used an evidence-based practice pain scale specific for oncology patients. Use of this scale helped the team consistently assess pain and identify when a patient was having uncontrolled pain symptoms. The team educated staff on the scale and created badge cards with the scale for staff ease of use. Nurses also developed informational sheets to help patients have a better understanding of their pain symptoms and reviewed with them a depiction of the pain scale.

Innovative non-pharmacological modalities were also implemented, such as healing touch and the use of a pain intervention cart. Healing touch is a therapy modality that involves the practitioner consciously using their hands in a heart-centered, intentional way to support and facilitate physical, emotional, mental and spiritual well-being. The pain cart is full of single-use items, such as radio ear plugs, coloring sheets/kits and aromatherapy items that aid in pain distraction and relief.

The staff received very positive feedback from patients about the impact the innovative modalities had on their pain and comfort levels, allowing them to rest and heal. The nurses realized their goal of increasing the patients’ quality of care by decreasing the use of pain and nausea medication without compromising pain control.



Nurses address cancer screening safety concerns

In early 2020, due to COVID-19, elective medical procedures such as cancer screenings were placed on hold to prioritize more urgent needs, preserve medical resources and reduce the spread of COVID-19 in health care settings. As a result, there was a notable decline in cancer screenings and treatments after they became available again. Health care organizations recognized the need to reassure the community that cancer screenings can be performed safely with measures in place to prevent the spread of COVID-19.

In alignment with both the Mission of The Jewish Hospital — Mercy Health and the Healthy People 2020 initiative, The Jewish Hospital’s Blood Cancer Center nurses were invited by the hospital’s director of growth and strategy to participate in the 2020 Trunk or Treat event with the theme “Don’t be spooked by cancer!” The event featured a unique car drive-thru approach to community education and took place on Saturday, October 24, 2020.

The Blood Cancer Center nurses sought to identify potential health problems and possible risk factors while raising awareness about common health issues and encouraging participants to adopt behaviors to improve their health and reduce health risks. The center’s nurses partnered with nursing and hospital staff from other departments at the event to provide six cancer screening and prevention education tables promoting breast, lung, skin, gastrointestinal, brain tumor and blood cancer screening and therapy.

All volunteers wore gloves and masks. Drivers and passengers remained in their cars as the nurses, with the help of volunteers, handed them individually wrapped bags of candy and cancer screening information. They distributed printed educational brochures and screening materials, as well as sunscreen samples to promote skin cancer prevention at the event. This was also an opportunity for health care workers to communicate measures taken at screening locations to prevent the spread of COVID-19. Approximately 288 community members attended the event.

Giving nurses the opportunity to participate in community-based education programs strengthens and develops strong partnerships among community organizations to achieve patient-centered goals and outcomes. This is just one way that nurses at The Jewish Hospital are empowered to achieve organizational goals to improve healthy behaviors in the community and reduce health care disparities in the population we serve.

Infection rate is reduced with use of new catheter product

Nurses at The Jewish Hospital — Mercy Health consistently review patient charts for Foley catheter necessity based on the nurse-driven protocol. Despite this, the rate of catheter-associated urinary tract infection (CAUTI) and use of indwelling urinary catheters continued to remain high at the intensive care unit (ICU).

Two clinical nurses from the unit attended the AACN National Teaching Institute and Critical Care Exposition in the fall of 2017 and learned about the use of the Purewick female external catheter in the critical care setting to decrease the use of indwelling urinary catheters and incidence of CAUTI. They took this evidence-based knowledge to their nursing leaders and requested a trial of the product.

Leaders approved their request, and the ICU nurses trained the unit’s nurses using the evidence-based practice described in the literature review that was presented at the exposition. Five nurses agreed to conduct a trial of the product in March, April and May 2018. The trial feedback was positive, so the Purewick female external catheter was adopted.

Thanks to the nurses’ initiative, the CAUTI rate in the ICU decreased from a baseline of 1.41 in the first quarter of 2018 to 0.46 in the fourth quarter of 2019.

METRICS	2018 Q1	2018 Q2	2018 Q3	2018 Q4	2019 Q1	2019 Q2	2019 Q3	2019 Q4	AVERAGE
HOSPITAL-UNADJUSTED MEASURES	1.41	0.45	0.85	0.44	1.38	0.00	0.46	0.46	0.68

Monitoring cameras improve fall rate in acute rehab unit

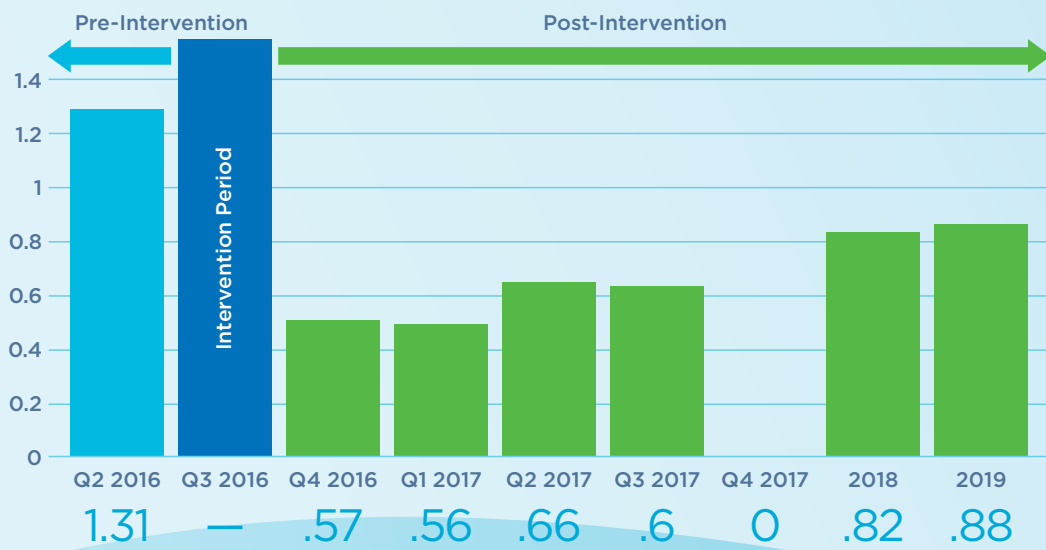
During the third quarter of 2016, clinical nurses of the acute rehab unit (ARU) at Mercy Health — West Hospital noted an increase in patient falls. They shared this information with their Unit Based Council and requested that the ARU purchase Avasys cameras to monitor and communicate with patients who are at high risk of falling.

Avasys cameras are part of a remote patient observation system that provides audio and visual monitoring of patients at risk for falls. Both wireless and portable, the technology enables staff to remind patients to ask for assistance before attempting to ambulate on their own. Avasys cameras were in place on other units in the hospital, but not on the ARU. The nurses determined that it would be beneficial to use the cameras if the patient had a high Morse Fall Assessment score.

The Unit Based Council expedited and approved the nurses' request to purchase Avasys cameras, and the cameras were purchased and put into service by the fourth quarter of 2016.

As a result of clinical nurses advocating for and adopting this technology, ARU falls with injury per 1,000 patient days decreased by approximately half during the following year. This initiative has been positively sustained throughout 2018 and 2019.

3 NORTH ARU FALLS WITH INJURY RATE PER 1,000 PATIENT DAYS



Exemplary Professional Practice

Nurses are autonomous to deliver patient-centered care while collaborating with the interprofessional team and families. Outcomes related to patient experience, quality and work environment stem from a deep understanding of evidence-based practice.

ANDERSON HOSPITAL

Compassionate nursing care leads to CuddleCot™ donation

On Friday, May 31, 2019, Lear and Megan McCoy experienced the stillborn birth of their baby boy at Mercy Health — Anderson Hospital's Family Birthing Center, just a week before his due date. In the midst of their tragedy, the parents and family could not say enough about the support and compassion they received from their nurses. The care team not only witnessed but were a part of the heartache the family endured.



Data on the effect of holding and spending time with a baby after perinatal death largely identify positive psychological outcomes for the parents. The birthing center's nurses know that leaving a stillborn baby behind in the hospital goes against a parent's instinct to care for and protect their baby and deprives them of adequate time to say goodbye. However, in a warm room, the baby's condition can deteriorate quickly, which is distressing for the family.

CuddleCot is a cooling system designed to fit within a small cot or bassinet. It provides a suitable environment for the baby and eliminates the additional trauma that many parents feel when their baby is separated from them in the hospital. The CuddleCot gives the family a very important piece of healing – time to form an important bond with their baby. The McCoys wished to express their gratitude to our staff by donating a CuddleCot to Anderson Hospital.

The couple partnered with friends, the surrounding community and Ashlie's Embrace (a nonprofit organization dedicated to providing CuddleCots to U.S. hospitals and medical centers) to make the donation, and the family and staff reunited in August 2019 for a special dedication of a CuddleCot in their baby's precious honor and memory.

As a care team, we are inspired by the selflessness demonstrated by the parents and their family during this difficult time. Thanks to their generosity, other grieving families will be granted more time with their babies.

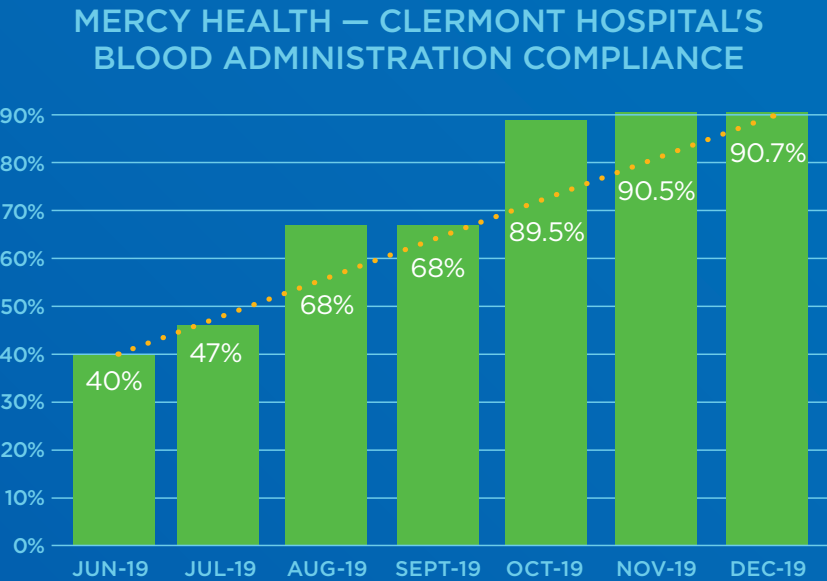
CLERMONT HOSPITAL

Nurses improve blood administration safety

Clinical nurses on Mercy Health — Clermont Hospital's progressive unit identified a need to improve compliance with the ministry's blood administration safety protocol. They knew they could do better, so they worked with the informatics committee to tackle the problem.

A checklist for quick reference during blood administration was the number one request from nurses. Armed with this input, they developed a checklist that hangs from the IV pole during blood administration. The checklist provides the nurses with a concise bedside reference to ensure they are completing all the steps.

All nurses were educated on the blood administration protocol and the newly adopted checklist during unit meetings, shared leadership meetings and informatics committee meetings. Several months after implementing the checklist, Clermont Hospital documented a significant increase in blood administration compliance. Not only has the success of this practice been sustained, it has also been implemented throughout the Cincinnati market.



Nurse's words inspire her patient

In the spring of 2020, Walter Ruiz, 60, from Hamilton, Ohio, suspected something was wrong. The screen printer remembers going to the supermarket and feeling tired. He initially assumed it was related to his diabetes. However, the fatigue persisted. In late April when he was at work by himself, Walter fainted.

"I don't know what time I went down or what time I came to," he said. "I couldn't get up and had to crawl to the wall for support to stand up. I thought my blood sugar was low, but when I got home and measured my sugar it was fine. I laid down and slept. I remember feeling feverish and sometimes cold. My back and leg hurt. I thought maybe I hit a paint can when I fainted."

Four days after his symptoms began, Walter was still tired and got dizzy while brushing his teeth. He had his suspicions about what was happening. When he went to enjoy his customary evening glass of milk and found it had no taste, he knew he had COVID-19.

Walter bathed, shaved and went to Mercy Health — Fairfield Hospital, where he would spend the next 12 days.

"I was well cared for from the moment I came in," he said. "Caregivers were by my side the whole time and I had excellent care."

There was one nurse who stood out the most to Walter.

"As she gave me oxygen, she sat next to me and talked with me," he recalled. "She said something that has stayed with me — 'Don't give up. Don't quit. Fight. You can do this.' I felt it in my soul."

Walter couldn't describe what the nurse looked like due to her mask and PPE. However, the nurse manager of the COVID-19 unit revealed that it was Lisa Lane.

Walter and Lisa reunited recently at Fairfield Hospital, where he put up a banner he made at his screen printing business to thank all the hospital's caregivers for their heroic work throughout the pandemic.

Walter recognized Lisa immediately by her voice. When he thanked her for his care and mentioned how she'd inspired him, Lisa hugged him and noted that it was her honor to care for him and that she didn't do anything any other nurse wouldn't have done.

PPE team helps keep patients and caregivers safe

Due to COVID-19, hospital routines and the way staff approached things looked completely different by the end of 2020 than they did early in the year. Information and protocols were changing daily. To help ensure all hospital team members were following the latest personal protective equipment (PPE) guidelines, Mercy Health — Fairfield Hospital formed a special group at the start of this pandemic.

The PPE team is a multidisciplinary team of two nurses and two physical therapists. This team worked with providers, caregivers and other hospital associates to clearly communicate guidelines regarding PPE usage and conservation, as well as patient care and provider safety. The PPE team rounded on each unit in the hospital to share the latest updates, working every day of the week to cover all shifts and departments.

"The staff looked forward to our visits and gathered around so they could hear the daily updates," said a team member. "They knew we reported their issues and they saw action from our senior leadership in response to their concerns. It was rewarding to hear the creativity and ingenuity from different staff in various areas as we pulled together to respond to the COVID-19 crisis."

The team also helped develop workflows for patient care, PPE usage and reprocessing N95 masks. They worked diligently to connect isolated patients with their loved ones through video chats, as well. The consistency the PPE team has provided during these uncertain times has been comforting, as well as critical to the hospital's response to COVID-19.



FAIRFIELD HOSPITAL

Nursing staff bring granddaughter's wedding to their patient

A grandmother's love is strong, and the nurses on the medical/surgical oncology unit at Mercy Health — Fairfield Hospital understood the need for one of their patients to share in her granddaughter's upcoming wedding. The wedding was being held out of town the next month. The patient, however, was on her second hospitalization in the unit, and it was apparent that she had limited time left.

Hearing this news, the granddaughter and future grandson rushed to the patient's side. The granddaughter and nursing staff decided that the wedding ceremony would take place in the patient's room at Fairfield Hospital. The day was set, and everyone hurried to get ready.

The nurses helped prepare the patient for the ceremony, styled her hair and organized her room so guests could attend. The nurses on 3A, a medical telemetry unit, helped the granddaughter get dressed, and she wore her mother's wedding dress, which had recently been retrieved from storage. Staff also made sure there were cupcakes and a small cake for the bride and groom. The chaplain even brought flowers for the granddaughter to carry.

Due to the side effects of her medication, the patient had been agitated all day. However, when her daughter reminded her the wedding was set to begin, a wonderful calm fell over the patient. The wedding proceeded, and the patient said the blessing just as she would have for the actual ceremony. It was heartwarming.

The family was so grateful to the nursing staff for the love they showed in this situation. The daughter said the nurses "were as much a part of the whole thing as we were. They had so much enthusiasm, care, empathy and worked really hard to make everything the best it could be."

Because of their compassion and care, the nursing staff on 3A were honored with the Team Daisy award in February 2020.

WEST HOSPITAL

Task force reduces levels of hospital-onset C. diff infection

In the first quarter of 2016, the C. diff infection rate at Mercy Health — West Hospital was 0.989 per 1,000 patient days, putting it above the National Healthcare Safety Network rate. To bring its C. diff rate down, West Hospital partnered with Eli Delille at the Health Services Advisory Group, implementing sustainable changes that have reduced the infection rate long term.

The team began with an assessment in 2016 that revealed a gap in practice related to the identification and timing of stool specimen collection. Based on this information, the infection preventionist collaborated with Eli Delille to develop a C. diff algorithm. The hospital formed a large multidisciplinary task force composed of nursing leaders, infection prevention nurse, quality nurse, environmental services, pharmacy, medical staff, microbiology/lab, information technology and an infection disease physician to support the algorithm and its implementation.

To support implementation of the algorithm, the task force put into place the following efforts:

- The nursing educators taught all clinical nurses the algorithm using "The Scoop on Poop" video.
- The infection prevention team implemented as part of their protocol daily EMR checks of outstanding orders for C. diff.
- Using an electronic medical record smart phrase (a preformatted phrase), the organization implemented a double-check process for clinical nurses to use before sending a potential C. diff specimen to the lab. This process requires two clinical nurses to assess each stool specimen according to the criteria outlined in the C. diff algorithm.
- The lab implemented a double-check protocol. In 2020, additional requirements were implemented: began requiring sign off by the nursing supervisor on the patient's third day in the hospital.
- The leadership team discusses C. diff at safety huddles and celebrates the number of days without C. diff infection. C. diff numbers are also reported at hospital leadership meetings, including Quality Committee, Nursing Peer Review Committee and the Hospital Shared Leadership Council.
- The Medical Affairs office distributed C. diff information to physicians.
- The hospital integrated information about the C. diff algorithm into onboarding materials for new hospitalists and clinical nurses.

Following these efforts, West Hospital's rates of hospital-onset C. diff per 1,000 patient days decreased to .4735 in the fourth quarter of 2017. The C. diff. algorithm protocol processes have been sustained across the hospital and continued to further reduce C. diff rates to .3812 per 1,000 patient days in 2018 and .3631 in 2019.

Interdisciplinary approach drives improvements in patient satisfaction

In April 2020, the inpatient unit 5 Tower at The Jewish Hospital — Mercy Health noted a decrease in patient experience scores. During their weekly interdisciplinary team meeting, the team discussed the possibility of partnering with ancillary departments to round together on 5 Tower patients daily. They assembled a rounding team with representation from nursing, pharmacy, therapy, radiology, laboratory and palliative care.

The goal was to gain real-time patient feedback and address any concerns or opportunities for real-time service recovery. Ultimately, this would improve the patient’s experience during their hospital stay.

The rounding team reviewed the patient experience scores and discussed opportunities for improvement, then developed a list of specific rounding questions. They established an interdisciplinary rounding process that included immediate feedback to the manager/charge nurse.

After just one month, the group educated the team and implemented the new rounding process. They decided to meet regularly after implementation to review and analyze the impact of the new process and adjust as needed.

The rounding team members asked the patient and/or family members:

- How is your overall stay?
- Are we addressing your needs? Have we been responsive to your call light?
- What is the biggest concern or question you have?
- What can we do to make your stay better?
- If you could change one thing about your stay, what would it be?

The rounder would also check the room for updated white boards with personal goals for the patient as well as a unit-specific packet in the room.

The interdisciplinary rounding process brought the team together to provide patient-centered care. 5 Tower saw an increase in their overall patient experience scores in Press Ganey and specifically in Communication with Nurses: from June through November, the unit’s satisfaction scores increased to an average of 85.6 compared to the baseline of 80.3.

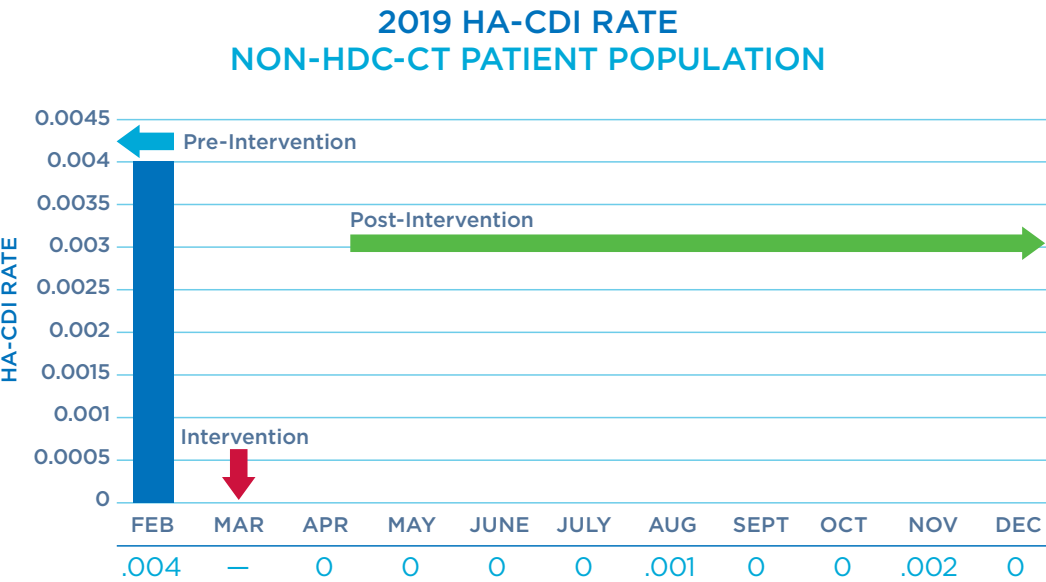
High-touch surface disinfection decreases hospital-acquired C. diff rate

Literature shows that Clostridium difficile (C. diff) rates are twice as high in the U.S. oncology population compared to all other patients. This knowledge prompted four nurses from the Blood Cancer Center at The Jewish Hospital — Mercy Health to develop and implement a best-practice disinfection process for the bone marrow unit. Their goal was to decrease the incidence of hospital-acquired C. diff infection (HA-CDI) for their high-risk patient population: patients receiving non-high-dose chemotherapy (Non-HDC-CT) followed by bone marrow transplant.

They conducted an evidence-based literature review and found that the recommended best-practice intervention was to test the effectiveness of surface disinfection on high-touch areas in patient rooms. The nurses decided to use Clorox® bleach wipes on call lights, bed frames, door handles, counter tops, side tables, nightstands, cables and workstations once per shift.

Since implementation of the high-touch surface disinfection process in March 2019, there have been zero C. diff cases in the targeted high-risk patient population.

Intensive care unit nurses also implemented this Blood Cancer Center project in May 2019 and achieved positive results.



New Knowledge, Innovation and Improvement

Our current systems of health care are redesigned to meet the needs of our patients, the community and our organization. Nurses are at the forefront of generating new knowledge and innovation, having visible contributions to the art and science of nursing.

Multidisciplinary simulations support teamwork and improved patient care

The U.S. is the only developed country with a consistently rising maternal mortality rate. It is estimated that over 50% of all maternal deaths in the U.S. are preventable. In 2020, The Joint Commission released New Standards for Perinatal Safety that identified postpartum hemorrhage and maternal hypertension/pre-eclampsia as areas of focus with regard to preventing obstetric morbidity and mortality.

Mercy Health — Anderson Hospital's Family Birthing Center is committed to ensuring its patients receive the safest care possible. Because the center is constantly looking for ways to improve patient outcomes, the new guidelines represented an opportunity to evaluate the current processes involved with care delivery during postpartum hemorrhages and hypertensive crises. Nursing and physician leadership agreed that all staff involved in the care of obstetric patients would participate in multidisciplinary simulations.

Over seven weeks and 26 in situ simulations, all staff participated in both a postpartum hemorrhage and maternal hypertension situations. These drills included obstetricians, midwives, anesthesia staff, nursing staff, surgical technicians, surgical assistants and blood bank personnel. The multidisciplinary nature of the simulations allowed for more realistic scenarios and the opportunity for participants to practice with colleagues outside their discipline.

Each simulation began with a prebrief and education about updated policies and practice changes, then concluded with a debrief. Having this dialogue with all disciplines present opened the door for conversation and questions that might otherwise never be addressed.

Feedback from participants was overwhelmingly positive, with many sharing that they felt more confident in their role during a postpartum hemorrhage or hypertensive emergency and more comfortable communicating with other team members.

Although the nursing staff in the Family Birthing Center has been regularly participating in simulations for years, making them multidisciplinary took it to the next level. The hope is that this multidisciplinary collaboration continues and opens doors for process improvement in other areas of practice.

Postpartum hemorrhage and maternal hypertension/pre-eclampsia simulations were also hosted in the emergency department and intensive care unit at Anderson Hospital, with the plan to continue this partnership to improve the overall care of obstetric patients in those areas. An unprecedented amount of learning, quality improvement and collaboration between disciplines and departments occurred through all of these simulations.

Team decreases excoriation on opiate-exposed neonates

In late 2018, neonatal nurse practitioners (NNPs) from the Family Birth Center at Mercy Health — Anderson Hospital noted that a high percentage of opiate-exposed newborns in the Special Care Nursery (SCN) were experiencing skin breakdown in the diaper area. Clinical nurses reviewed charts from November 2017–November 2018 and found the skin breakdown rate for newborns receiving medication-assisted withdrawal treatment was 100% by day of life 3.

However, the lack of a skin assessment scoring tool in the electronic medical record led to an inconsistency in nursing documentation. Nursing staff had multiple treatment products available, but they had received minimal guidance on what products to use and when to initiate their use. In addition, the products were kept in the pharmacy and required an order by a provider to obtain them. This at times resulted in delayed skin treatments.

The nursery's NNPs and educator performed a literature review of the most updated evidence and discovered that there was no consensus on a specific product or regimen, but evidence supported having a consistent, systematic approach beginning with prevention. The Family Birth Center purchased the *Association of Women's Health, Obstetric and Neonatal Nurses Neonatal Skin Care, Evidence-Based Clinical Practice Guideline* and used it as a baseline.

In March 2019, the nurses tested several prevention treatment regimens and found that applying Clear Aid Ointment immediately after birth to the diaper area of all opiate-exposed infants was most effective, with no skin breakdown occurring. Based on the findings, the proactive application of protective ointment to all opiate-exposed infants at birth was adopted into practice.

All staff were educated by the neonatal nurse educator on the new protocol and how to document the progress of the moisture barrier. The Clear Aid Ointment is now stocked on the unit and readily accessible.



REGIONAL

Frontline nurse advocacy leads to culture change

As COVID-19 spread through our communities, nurses feared a wave of patients they weren't prepared to care for, so they searched for interventions to save these patients. A key intervention would be the use of manual proning among COVID-19 patients.

Prone therapy is often used for patients who are hypoxic and diagnosed with acute respiratory distress syndrome (ARDS). Before COVID-19, many of these patients were placed on a specialty rotoprone bed, which turns them to the prone position to allow for greater lung expansion and thus improved oxygenation. As the number of patients needing prone therapy increased, it became clear that using rotoprone beds would not be a viable option – there were simply not enough beds.

As a critical care service line team, the intensive care unit (ICU) nurses decided to address the need for manual proning education. They developed an educational scenario for the critical care nurses at Clermont and Anderson Hospitals, based on existing protocol and practices at Mercy Health — West Hospital. During the hands-on scenario, nurses walked through a COVID-19 patient case study in which the patient eventually needed to be intubated, sedated, paralyzed and prone. Participants explored every aspect of the manual prone protocol, from skin preparation to ventilator settings. During the scenario, nurses practiced proning techniques on each other to hone their skills. This hands-on simulation gave nurses the skills and confidence they needed to truly excel at implementing prone therapy.

Group after group went through this simulation scenario, and by the end of fall 2020, the critical care nurses at both Clermont Hospital and Anderson Hospital had received the training. By the end of the year, approximately 90% of ICU nurses at those hospitals had been trained. This was a huge culture change, as nurses at both hospitals had never used manual prone therapy before this initiative.

COVID-19 forced frontline nurses to expand their skills, and they became strong advocates for this therapy. It is now considered a first-line treatment for acute respiratory distress syndrome and the use of traditional rotoprone beds has diminished. Early results of manual prone therapy show less time on the ventilator, improvement of skin integrity and faster therapy implementation times. Nurses and physicians are able to implement this treatment quickly and deftly, which greatly impacts overall outcomes for COVID-19 patients.

CLERMONT HOSPITAL

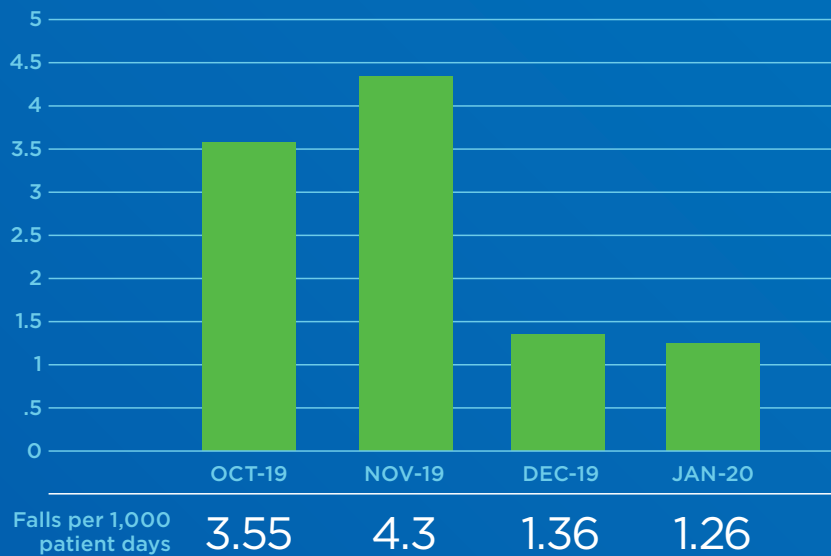
Patient falls decrease following renovation of progressive care unit

The progressive care unit (PCU) at Mercy Health — Clermont Hospital underwent a major renovation in 2019 after nurses and leaders advocated for changes. Prior to the renovation, the unit had just a single nursing station, which isolated staff in one area of the unit.

Clinical staff on the unit stressed the need for two nurses' stations, one at each end of the unit. This change would place twice as many patients in the unit close to a nurses' station, facilitating our nurses' ability to manage multiple patients and respond to patient needs quickly.

The renovation was completed in November 2019, and the unit has already seen a drastic decrease in falls, from 3.55 falls per 1,000 patient days in October 2019 to 1.26 falls per 1,000 patient days in January 2020.

PCU FALLS PER 1,000 PATIENT DAYS



FAIRFIELD HOSPITAL

Nurses find creative ways to bring comfort to patients

COVID-19 has left many patients hospitalized for extended periods of time. These long-term hospital stays can weigh heavily on a patient's spirit, especially with visitor restrictions in place that keep patients separated from their loved ones. Nurses have found creative ways to comfort patients and help them feel connected.

Several nurses at Mercy Health — Fairfield Hospital brought smiles to their patients by giving them stuffed animals to lift their spirits during their stay.

“Our team wanted to make them smile and have a sense of comfort,” said the nurse manager of Fairfield Hospital's cardiovascular and oncology medical surgical units. “When the bears and stuffed animals were presented, the patients got the biggest smiles. We would peek into their rooms through the window and they were often holding the bears when they were alone. That was the greatest heartfelt moment.”



REGIONAL

Nursing shared services education goes virtual and embraces new learning technology

Nursing has traditionally depended largely on classroom teaching for knowledge, skill and competency checks for new hires as well as professional development experiences. As we entered the height of the COVID-19 crisis, it was important to think differently about education.

The health system needed to onboard and educate more nurses and nursing support staff than ever. The most immediate needs were preparing nurses to care for patients in a pandemic with frequently changing guidance. The nursing practice, education and research team consistently demonstrated agility by creating and delivering education through rounding, written materials and videos available through QR reader codes, as well as promoting new care guidelines based on existing and developing evidence.

A member of the nursing practice, education and research team took the lead in coordinating COVID-19 education. She worked with infection prevention, physician, pharmacy and respiratory leadership teams to coordinate information and education as the guidelines evolved. In addition, she partnered with the culture and learning team to move nearly all system nursing education programs to virtual platforms.

The nursing practice, education and research team condensed and redesigned clinical nursing orientation for virtual delivery on WebEx and Skype. This met the health system's immediate needs but was not a sustainable solution, so the culture and learning team purchased Adobe Connect to support nursing in moving to a long-term virtual solution.

After just one Adobe class, the team had the first week of nursing orientation running online. The Nurse Residency Program, Basic and Advanced Cardiac Arrhythmia and Preceptor Academy are now almost 100% virtual and have received high marks from participants on the design, content and delivery of the courses.

The nursing professional development associates, specialists and leaders have tirelessly worked side by side with operational nursing leaders and the clinical front line to encourage nurses and support patient care. Their willingness to embrace new technology, continually revise programs to meet emerging needs and consistently deliver standard curriculum across markets and practice settings highlights an empowered, agile and unified team. In the spirit of the Year of the Nurse, they modeled “lead, innovate and excel.”

REGIONAL

Simulations improve knowledge of trauma nursing care

Although Mercy Health's Cincinnati hospitals are not certified trauma centers, each acute care facility may care for hundreds of trauma patients annually. With this volume of patients needing trauma care, the clinical staff requested additional education. ED nursing leadership gave approval for the ED nursing professional development associates to partner with hospital nursing leaders and local emergency medical services (EMS) to develop and provide an ongoing regional trauma simulation.

The first of these events – designed for prehospital providers, ED nurses, ED technicians and radiology staff – took place at Mercy Health – Fairfield Hospital in December 2019 with the help of UC Air Care. Trainers presented a series of three simulations encompassing the trauma nursing process. The simulations incorporated low-volume/high-risk procedures and equipment, including the pelvic binder, rapid infuser, surgical cricothyroidotomy and cyanokit. Patient scenarios focused on hemorrhagic shock, traumatic amputation and penetrating traumas.

The second event took place at Mercy Health – Clermont Hospital in January 2020 and focused on providing trauma care to a burn victim; UC Air Care helped once again, as did Central Joint EMS. Clinical staff members representing both Anderson and Clermont Hospitals, plus emergency department physicians, physician assistants and nurse practitioners, participated. In addition to simulating pre-arrival care, participants practiced proper handoff during patient transfers and worked as a team to stabilize the “patient.”

The third event took place at Mercy Health – West Hospital in March 2020 and encompassed the case scenarios simulated in the December 2019 event pertaining to hemorrhagic shock, traumatic amputation and penetrating traumas.

The nursing professional development associates used a self-efficacy scale and knowledge assessment tool to determine if self-efficacy improved and if the key educational concepts were understood at each event.

In 2019, self-efficacy scores improved by an average of 3.16 points on a 0-10 scale, and knowledge assessment scores increased an average of 83.3%. Based on this preliminary data, this project's objectives were exceeded. The 2020 event was also highly effective, with self-efficacy scores improving an average of 4.08 points on a 0-10 scale, and the knowledge assessment scores increasing by 74.3%. The cumulative scores for all three sites showed self-efficacy scores improved by an average of 3.22 points on a 1-10 scale, and knowledge assessment scores increased an average of 75%.

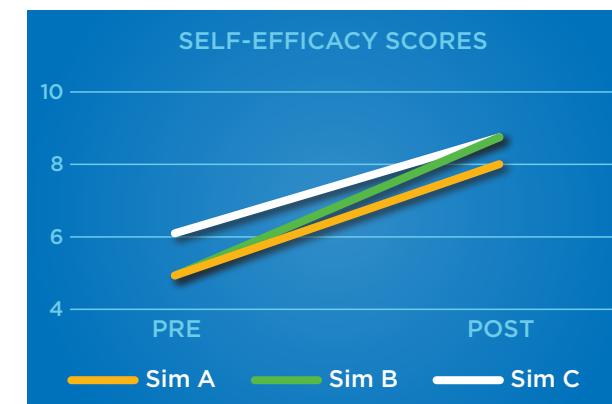
The nursing professional development associates presented this project at the virtual National Emergency Nurses Association conference in 2020. More simulations are being planned throughout the region to take place after the COVID-19 pandemic is under better control.



OVERALL SCORE:

Self-Efficacy Scale scored on 0-10 scale

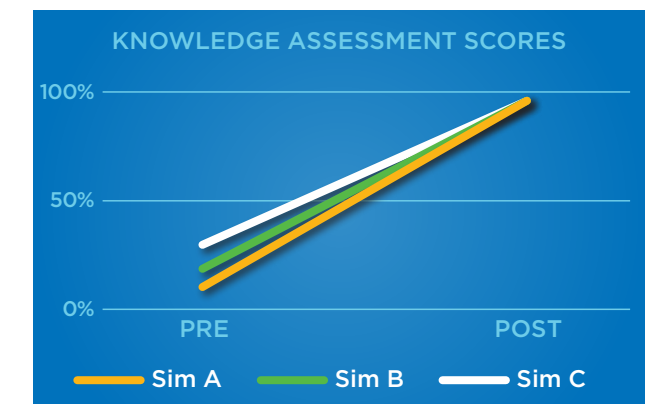
- Baseline — N=28 with mean = 5.31 (range 1-8)
- Post — N=28 with mean = 8.59 (range 6-10)



RESULTS:

Knowledge Assessment Score with 10 questions

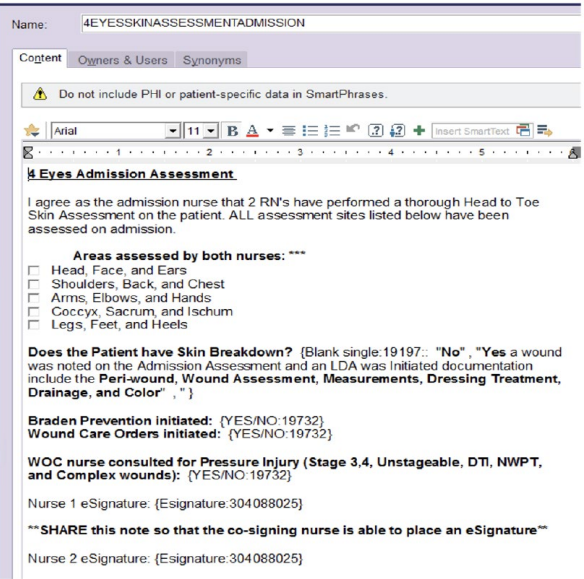
- N=28 with baseline mean = 20% (range 0-50%)
- Post score mean = 95% (range 80%-100%)



Nurses partner with informatics team to reduce skin injuries

A pressure injury occurs when an area of skin or underlying tissue is damaged due to pressure, shear or sometimes both. Because these injuries can complicate a patient’s stay, causing a multitude of issues including pain, infection and an increased length of stay, the nurses at The Jewish Hospital — Mercy Health wanted to determine what could be done to prevent these injuries.

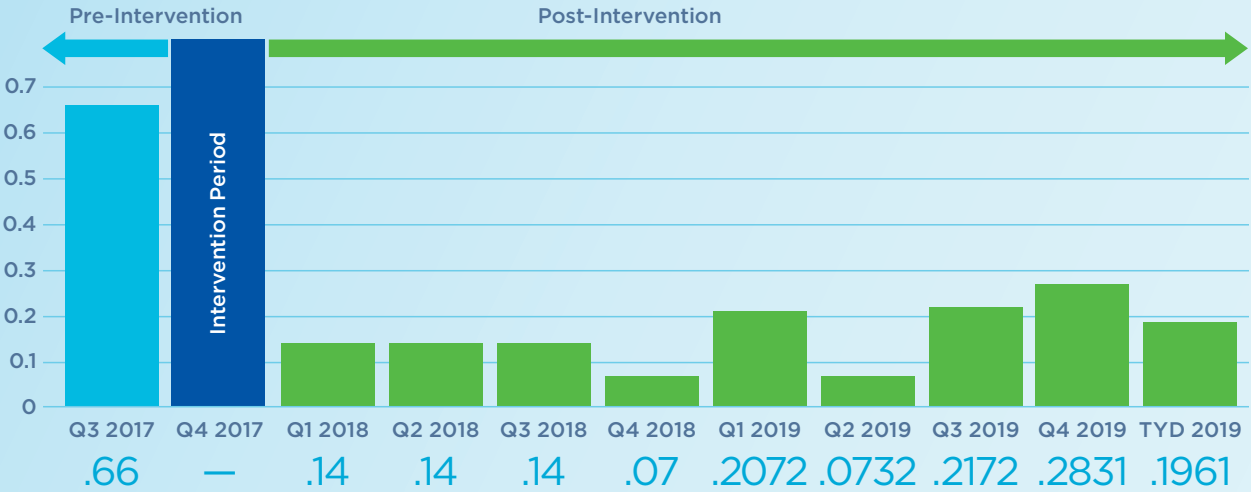
In the third quarter of 2017, facing an increasing number of hospital-acquired pressure injuries (HAPIs), the hospital’s Save our Skin (SOS) clinical nurse champions met to discuss measures that could help reduce the number of HAPIs. They adopted the electronic medical record documentation Four Eyes Skin Assessment to be completed on all admissions and transfers. A four eyes assessment is a process in which two nurses together assess the patient’s skin condition at the beginning and end of each shift.



The nurses worked with the informatics team to create a smart phrase (a preformatted phrase), that would be documented in the electronic medical record. The smart phrase states that two nurses have performed a thorough head-to-toe assessment of the patient’s skin, and it contains a list of actions for nurses to follow if skin breakdown is detected.

After implementing the Four Eyes Skin Assessment smart phrase, nurses at The Jewish Hospital observed a significant improvement in the incidence of HAPIs per 1,000 patient days. This improvement continued throughout all quarters in 2018 and 2019.

JEWISH HOSPITAL HAPI RATE PER 1,000 PATIENT DAYS



Awards

2019-2020 Regional Awards

DAISY Awards

Sunshine Awards

2019-2020 Regional Awards

THE SAGE AWARD

The SAGE Award spotlights nurses who mentor and support today's leaders while always looking for ways to mentor the leaders of tomorrow. SAGE is an acronym for someone who makes a Significant impact on the lives and careers of others, who is an Advisor influencing and shaping the careers of others by sharing wisdom and experience, and by offering opportunities and possibilities, who Guides others through career choices toward leader development, and who Enlightens and challenges others to grow and take risks by acting as a role model.

2019 recipients of the SAGE Award

Kim Youtsey

2020 recipients of the SAGE Award

Allison Lenos

Dena Luttrell

Amy Thompson

Andrea Vonderheide



Transformational Leadership Award

Nurse manager or director who stimulates and inspires followers to achieve extraordinary outcomes and, in the process, develops their own leadership capacity

- 2019 Cryssie Tino
- 2020 Shawna Straub

Structural Empowerment Award

Direct-care nurse, clinical coordinator or educator involved in shared-leadership and decision-making structures and processes that establish standards of practice and address opportunities for improvement

- 2019 Amy Fink
- 2020 Kara Scott

Exemplary Professional Practice

Nurse whose practice demonstrates effective and efficient care services, interprofessional collaboration and high-quality patient outcomes

- | | |
|------------------|---------------|
| 2019 Sarah Barno | |
| 2020 Abigail Jay | Amber Lake |
| Teresa Miller | Heather Mills |
| Nicole Howser | |

New Knowledge, Innovation and Improvement Award

Nurse who conscientiously integrates evidence-based practice and research into clinical operational processes

- 2019 Stephanie Matusak Carole Baldwin
- 2020 Cyndi Ashland

Outstanding Physician Award

Physician who consistently exemplifies the Mission and core values of Mercy Health and demonstrates significant support of the nursing profession

- 2019 Dr. Stephan Feagins
- 2020 Dr. Al-Shathir

Extraordinary Advance Practice Provider Award

CNS or APRN who consistently exemplifies the Mission and values of Mercy Health, based on APP qualities as a care coordinator, an educator, a role model and a community advocate

- 2019 Amanda Metz Laura Dixon
- 2020 Jayne Bodenbach

Partner in Nursing Award

Individual who goes above and beyond to support the practice of nursing

- | | |
|---------------------|----------------|
| 2019 Rhonda Theders | Brie Honchell |
| Sandy Dumford | Diana Burton |
| Ann Whittle | |
| 2020 Stacey Coleman | Bernice Nyanor |

Crown Jewel Award

Nurse who advances the nursing practice with optimism, innovation and excellence. The recipient is an inspirational leader who provides exemplary nursing care while living the Mission of Mercy Health.

The award is given in the spirit of Queen Victoria's recognition of Florence Nightingale. In 1856, Queen Victoria awarded Florence Nightingale a brooch for her services in the Crimean War. The brooch was a sign of royal appreciation at a time when suitable decorations for female civilians did not yet exist. Known as the Nightingale Crown Jewel, and designed under the supervision of Prince Albert, the brooch was engraved with this dedication: "To Miss Florence Nightingale, as a mark of esteem and gratitude for her devotion towards the Queen's brave soldiers, from Victoria R. 1855"

- 2019 Pat Davis-Hagens
- 2020 Ramona Cheek

Community Partner Award

Outstanding member of the community who has demonstrated excellence by dedicating time and effort to the enhancement of professional rapport between Mercy Health and its community partners

- 2019 Shane Packer and Frank Cook — Colerain Township
- 2020 Erik Stephens

Sister Kathy Green Patient Centered Care Award

An associate who exemplifies the characteristics of Sister Kathy Green

A tireless advocate for patient-centered care, Sister Kathy Green inspired a spirit of compassion through service, justice and love. She was known for being playful and spirited, as well as mindful. She prioritized service to the underserved and marginalized and had a passion for wellness, recognizing the importance of being open to alternative therapies to treat the body, mind and spirit.

- 2019 Jim Richter
- 2020 Sister Cheryl Erb

DAISY Awards

The DAISY Award recognizes a nurse’s clinical skill and compassionate care to patients and their families.

2019 WINNERS

MERCY HEALTH — ANDERSON HOSPITAL

Jan: Benjamin Hoffman, C3	Jul: Kayla Stevens, A1
Feb: Jessica Apland, C2	Aug: Regean North Custer, C4
Mar: Cynthia Wiseman, C3	Sep: Katrina Cundiff, C5
Apr: Kayla Lawson, ARU	Oct: Ryan Barnhill, C2
May: Pamela Puthoff, FBC	Nov: Jessica Howard, OR
Jun: Kari Keith, C4	Dec: Paula Schuerman, PACU

MERCY HEALTH — CLERMONT HOSPITAL

Q1: Nichole Eglian BSN, RN – PCU Telemetry	Q3: Brian Cadwallader BSN, RN – BHI
Q2: Josh Burnes RN – 2 West	Q4: Karen Reed RN – ICU

MERCY HEALTH — FAIRFIELD HOSPITAL

Jan: Rachel Bright, FBC	Jul: Kathy Harvey, CVU
Feb: Hope Maier, CVU	Aug: Marquette Shannon, 3T
Mar: Kathy Weigand, Admission RN	Sep: Brenda Singleton, 5T
Apr: Brecken Grant, CVU	Oct: Robin Deubell, 3T
May: Laila Kunvarji, 3T	Nov: Felicia Ulmer, 3T
Jun: Barb Roetting, 3A	Dec: Shely Betz, ICU

MERCY HEALTH — WEST HOSPITAL

Jan: Emily Leigh, RN, 3 West Ortho	Jul: Robin Coyne, RN, Radiology
Feb: Rebecca Bova, RN, PCU 5 West	Aug: Belinda Brumley, Clinical Administrator
Mar: Melanie Duell, RN, Cath Lab	Sep: Amanda Witterstaetter, 4 West
Apr: Alecia Carr, RN, Emergency Dept	Oct: Kelly Scroggins, Cath Lab
May: Michelle Millard, RN, 4W/4N Med Surg	Nov: Cody Schindler, Cath Lab
Jun: Lisa Cooley, RN, Rehab 3 North	Dec: Jaqi Smith, Rehab

THE JEWISH HOSPITAL — MERCY HEALTH

Jan: Caroline Khoury, 5 South	Jul: Alicia Reese, 4th fl PCU
Feb: Keith Boyd, 4th fl PCU	Aug: April Morrison, 6 South
Mar: Brad Bailey, ICU	Sep: Jeanne Kellerman, SDS
Apr: Nate Jacobs	Oct: Jenny Vance, Wound Care
May: Katlin Sanders, 5 Tower	Nov: Christina Craig, 6 South
Jun: Katy Pope, ICU	Dec: Stephanie Schmidt, ED

2020 WINNERS

MERCY HEALTH — ANDERSON HOSPITAL

Jan: Adrienne Stocker, FBC	Jul: Amanda Burrough, B3
Feb: Rachel Roy, Case Mgmt.	Aug: Candice Diana, C3
Mar: Chris Booher, C2	Sep: Cathy Burris, FBC
Apr: Nabeel Shah, C5	Oct: Jamie Gunn, FBC
May: Melinda Osborne, A2	Nov: Domingo Martinez, C2
Jun: Kelly NcManis-Wildeboer, C2	Dec: Sharon Moore, C5

MERCY HEALTH — CLERMONT HOSPITAL

Jan: Roberta Dial, Surgery	Jul: Kim Arnett, 2W
Mar: Kristie Scheek, 2W	Sep: Regan Hauke, 2W
May: Mindy Adams, 2W	Nov: Julie Ashman, 2W

MERCY HEALTH — FAIRFIELD HOSPITAL

Jan: Susan Arnold, Surgical Svcs.	Jul: Marlene Blackburn, OR
Feb: Stephanie Rump, ICU	Aug: Brenda Singleton, 5T
Mar: Stacy Jones, OR	Sep: Nicole Toole, 3A
Apr: Rachel Lewis, FBC	Oct: Katie Garvey, 4T
May: Anne Robinson, OR	Nov: Mike Earl, 4T
Jun: Kathy Tracy, Employee Health	Dec: Team Award, 3A

MERCY HEALTH — WEST HOSPITAL

Jan: Abby Steinacker, FBC	Jul: Scott Johnson, Ortho 3W
Feb: Kerrie Santos, Cath Lab	Aug: William (Bill) Blum, ED
Mar: Karen Copenhaver, Wound Care Ctr.	Sep: Peggy Nieberding, Case Managment
Apr: Katie Lowstuter, ICU	Oct: Rhee Eusebio, Rehab 3 North
May: Lyneshia Smith, PCU	Nov: Peggy Biddle, Cath Lab
Jun: Latosha Moore, Ortho 3W	Dec: Marcha Gyarmati, FBC

THE JEWISH HOSPITAL — MERCY HEALTH

Jan: Connie Wendel, ICU	Jul: Rachel Meyers, PCU
Feb: Aislin Stephen, ICU	Aug: Amber Kaiser, 6S
Mar: Christy Troehler, SDS	Sep: Rebecca Kellerman, ED
Apr: Candy Burns, PICC RN	Oct: Erica Ferriell, BCC
May: Rachel Forester, BCC	Nov: Michelle Lam, 5T
Jun: Chastin Anderson, ICU	Dec: Tenayah Davis, 5S

Sunshine Awards

The Sunshine Award is a way for nursing to recognize non-nurse team members for their support of patient-centered care delivery.

2019 WINNERS

MERCY HEALTH — ANDERSON HOSPITAL

Jan: Joe Denton, Spiritual Care	Jul: Cheryl Parker, Vol
Feb: Lela Hicks, C4	Aug: Erin Boyajian, A1
Mar: Christine Robinson, EVS	Sep: Breeann Dameron, B3
Apr: Jamie Allmark, ARU	Oct: Laura Cahill, PT
May: Kaityln Cox, C4	Nov: Tammy Walters, ARU
Jun: Patricia Danese, ARU	Dec: William Down, PACU

MERCY HEALTH — CLERMONT HOSPITAL

Q1: Robyn Lewis - Outpatient surgery	Q3: Chuck Helton - RT
Q2: Sarah Houston - Transporter	Q4: Emily Gilb - PA

MERCY HEALTH — FAIRFIELD HOSPITAL

Jan: Ellie Parker, Dietary	Aug: Mary Ann Zundel, Nuc Med
Feb: Jan Hager, OT, Rehab	Gabe Clark, Transport
Apr: Hanni LaShelle, Dietary	Sep: Linda Wenkler, Speech
May: Jerry O'Neil, EVS	Oct: Tim Wiggins, 5T PCA
Jun: Rachelle Schwarm, CVU Unit Sec	Nov: Mary Beth Mills, Central Supply
Jul: Amber Preston, Resp. Therapist	Dec: Mike Saxon & Lorna Martin, ED

MERCY HEALTH — WEST HOSPITAL

Jan: Amy Richter, Social Worker, MSW	Jul: Angela Hoffman, PCA, PCU
Feb: Erin Wanger, PCA - Rehab	Aug: Aaron Barnett, Emergency Dept. Tech
Mar: Joe Powell, Security	Sep: David Evers, Cath Lab Tech
Apr: Robin Hirth, Lactation Consultant	Oct: Lauren Sutter, Mammo Tech RT
May: Jordan Pringle, Quality Coordinator	Nov: Anita Dmochowski, Mammo Supervisor
Jun: Chelsea Powell, PCA, 4th Floor	Dec: Tina Tinch, PCA 4th Floor

THE JEWISH HOSPITAL — MERCY HEALTH

Jan: Trisha Thomas, Environmental Serv.	Jul: Frank Snyder, Volunteer
Feb: Debbie Fisher, MRI	Aug: Rob Coggins, Transportation
Mar: Deanna Urasek, Pharmacy	Sep: Dr. Milgrom, Internal Medicine
Apr: Dr. Olga Melzer, Physician	Oct: Kasey Boseman, Respiratory
May: Vicki Schneider, Same Day Surgery	Nov: Donna Eason, 6 South
Jun: Sue Carroll, Respiratory	Dec: Brandi Parker, Blood Cancer Center

2020 WINNERS

MERCY HEALTH — ANDERSON HOSPITAL

Jan: Rebecca Riley, Regis	Jul: Samantha Barr, FBC
Feb: Jake Smith, EVS	Aug: Larry Lambert, Maintenance
Mar: Barb Scheiderer, PACU	Sep: Sarah Von Rohr, EVS
Apr: Peggy Riley, EVS	Oct: Skyler Mansu, Dietary
May: John Klein, Transport	Nov: Kelsey Bihlman, Occ Therapy
Jun: Cherie Melzer, FBC	Dec: Shirley Riddle, EVS

MERCY HEALTH — CLERMONT HOSPITAL

Jan: Bill Spies, Security	Jul: Kathy Ison, Dietary
Mar: Michelle Walker, OP Rx	Sep: Ulysses Days, Imaging
May: Patty Grandstaff, Surgery	Nov: Carol Chaney, PT/OT Registrar

MERCY HEALTH — FAIRFIELDHOSPITAL

Jan: Brieann Baker, Pharmacy	Jul: Rob Terlau, Respiratory
Feb: Bennie Green, Dietary	Aug: Stephen Frazier, Maintenance
Mar: Bennie Green, Dieatary	Sep: Destiny Bishop, Dietary
Apr: Lily Tsay, RT	Oct: Dr. Paras Patel, Hospitalist
May: Nathan Rush, Transport	Nov: Amy Taylor , OP Lab
Jun: DimitriosTopalidisMD, CVTS	Dec: Tammy Eady, Chaplain

MERCY HEALTH — WEST HOSPITAL

Jan: Kristi Jackman, Outreach	Jul: Tracy Knapp, Recovery
Feb: Yolanda Robinson, Dietary	Aug: Vanessa Lux, Imaging
Mar: Stephanie Rice, RT	Sep: Bev Marcum, PCU
Apr: Kelly Edwards, Imaging	Oct: Janet Ward, ED
May: Becky Lough, Diagnostics	Nov: Joyce White, Surgery
Jun: Felicia Grigsby, Recovery	Dec: Robbie Jones, PCU

THE JEWISH HOSPITAL — MERCYHEALTH

Jan: Elizabeth Askren, Food & Nutrition	Jul: Dr. Walder, ICU
Feb: Carmen Nikki Irwin, Womens Ctr.	Aug: Tek Chuwan, 5T
Mar: Amanda Penter, WomensCtr.	Sep: Ashley Burns, EVS
Apr: Essence Carter, EVS	Oct: Tena Anderson, Imaging
May: Jenny Metz, Food & Nutrition	Nov: Kierra Pressley, 5S
Jun: Joy Leonard, Volunteers	Dec: Jamaal Stanford, EVS

Bon Secours Mercy Health

Mercy Health is part of Bon Secours Mercy Health, one of the 20 largest health systems in the United States and the fifth-largest Catholic health system in the country. The ministry's quality, compassionate care is provided by more than 60,000 associates serving communities in Florida, Kentucky, Maryland, New York, Ohio, South Carolina and Virginia, as well as throughout Ireland.

Bon Secours Mercy Health provided care for patients more than 11 million times in 2019 through its network of more than 1,000 care sites, which includes 50 hospitals, as well as home health agencies, hospice, skilled nursing and assisted living facilities. Consistent with its commitment to serve each patient with dignity, Bon Secours Mercy Health provides more than \$2 million per day in community benefit.

The Mission of Bon Secours Mercy Health is to extend the compassionate ministry of Jesus by improving the health and well-being of its communities and bring good help to those in need, especially people who are poor, dying and underserved. For more information, visit <https://bsmhealth.org/>.



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