

2019 NURSING ANNUAL REPORT

CULTIVATING THE FUTURE OF HEALTH **TOGETHER**





Table of Contents

- 2** A Message from the President/CEO
- 3** A Message from the CNO
- 4** Nursing-Led Efforts Focus on Improving Physician-Nurse Teamwork and Communication
- 6** Formal Mentoring Program Yields Benefits
- 7** Succession Planning Ensures Continuity in Leadership
- 8** Interprofessional Kaizen, with Nursing Leadership, Enhances Emergency Department Throughput
- 10** Support for Professional Development Spurs Certification Rates That Exceed Targets
- 12** Recognizing Nursing Excellence
- 14** Dashboards Enhance Awareness of and Responsiveness to Nurse-Sensitive Indicator Data
- 16** Bringing Peer Review to SVMH
- 18** Developing Infrastructure for Research and Evidence-Based Practice
- 19** Interprofessional Poster Expo: Sharing Ideas, Impact and Knowledge
- 22** Workspace Redesign Improves Patient Satisfaction
- 24** Looking Forward

A Message from the President/CEO

The people who come to Salinas Valley Memorial Healthcare System know they can depend upon us to deliver on our mission and vision: to provide compassionate and culturally sensitive care, outstanding quality and an exceptional patient experience. It is our nurses who are at the forefront in helping us achieve these goals.

There is no question that the needs and preferences of our patients are dramatically changing, brought on by a global pandemic and public health crisis. In all ways, our nurses staffed the front line during a trying time this past spring and delivered the care and commitment that exemplifies all that our health system stands for. Many times, that commitment went above and beyond to help patients and colleagues. Every time, that commitment was underpinned by a steadfast promise to listen attentively to our patients, think critically about solutions, and then creatively implement new strategies to meet – and often exceed – expectations.

This past year we completed the fourth year of our journey to seek Magnet® designation by the American Nurses Credentialing Center for providing the very best in nursing care. This is a rigorous journey defined by the achievement of five criteria: empirical quality results, transformational leadership, structural empowerment, exemplary professional practice, and new knowledge, innovations and improvements. Because of our nurses' perseverance, collaboration and diligence, I have no doubt we will achieve these benchmarks and certification.

Beyond the journey to Magnet® recognition by the ANCC, our nurses have achieved additional accomplishments. They have introduced protocols that have enhanced collegial mentoring, improved professional collaboration, and increased leadership and professional development. They identified and instituted ways to improve patient care in the emergency department and at the Regional Heart Center and increased participation in research and evidence-based practice. In all ways, these initiatives are designed to improve patient outcomes and enhance our practice environment.

It is an honor to work with this accomplished team of nurses and to recognize and celebrate their achievements. Together, we are positively impacting the well-being of our community and improving the lives of our patients. Thank you.



Pete Delgado
President/CEO



“It is an honor to work with this accomplished team of nurses and to recognize and celebrate their achievements.”

A Message from the CNO

It is with tremendous pride and gratitude that I share the Salinas Valley Memorial Hospital's 2019 *Nursing Annual Report*, which illustrates the commitment, expertise and accomplishments of SVMH nurses who motivate and inspire me daily. The achievements highlighted here are the result of our nurses pursuing professional development, embracing peer feedback, participating in evidence-based practice and leading in shared governance. I hope you enjoy the stories that emphasize this incredible work, including:

- + Improving physician-nurse relationships by focusing on teamwork, conflict resolution, professional role clarification and collaborative practice across the care continuum
- + Formalizing the mentorship program with the implementation of the *SVMH Nursing Mentoring Program Guide & Toolkit*, designed to help mentors successfully support mentees as they navigate role transitions
- + Implementing the *SVMH Nursing Succession Planning Guidelines* to ensure the availability of competent nursing leaders during planned and unplanned leadership transitions
- + Creating a nursing dashboard embraced by clinical nurses, effectively disseminating data so nurses can easily grasp unit-level performance on nurse-sensitive indicators
- + Building capacity for nursing research and evidence-based practice by hiring a research librarian and increasing access to nursing research databases and full-text articles

As we entered 2020, we experienced an intense transformation in our lives and in how we deliver care. I would like to recognize the incredible efforts of SVMH nurses who keep our community safe during the COVID-19 pandemic. As the ominous reality has unfolded across the nation, I am so proud of SVMH nurses, who have showed tremendous flexibility, courage and professionalism.

Nurses willingly were deployed to assist homebound frail elderly, deliver meals to the needy, bravely screen potential COVID-19 patients and provide community education about hand hygiene and social distancing.

The professional, compassionate care that SVMH nurses provide for our patients and community daily and under extraordinary circumstances is unsurpassed. SVMH nurses are leading the way to a safer, healthier tomorrow, and I am so grateful to be a member of such a prestigious team of professionals.



Christie McGuire, MBA, BSN, RN, CENP
Chief Nursing Officer



“The professional, compassionate care that SVMH nurses provide for our patients and community daily and under extraordinary circumstances is unsurpassed.”

Nursing-Led Efforts Focus on Improving Physician-Nurse Teamwork and Communication

In late 2018, analysis of nurse satisfaction and employee engagement scores at Salinas Valley Memorial Hospital revealed low scores on several questions pertaining to interprofessional relationships. The majority of nursing practice areas scored below the national average on questions that asked about communication between physicians, nurses and other medical personnel; effective teamwork between physicians and nurses; and the effective use of cross-functional teams.



When 2018 patient experience data showed low scores for the question “Staff worked together to care for you,” Chief Nursing Officer Christie McGuire, MBA, BSN, RN, CENP, understood the link between improving interprofessional communication and teamwork and increasing patient experience scores. She raised concerns about physician-nurse relationships and the impact it was having on both employee and patient satisfaction.

In collaboration with the executive team, SVMH nursing leadership created a Physician-Nurse Collaboration Team. McGuire and Vice Chief of Staff Rachel McCarthy Beck, MD, led the team, which included medical leaders, nursing leaders and clinical nurses from several of the lower-scoring practice areas. The team garnered support from the Nursing Leadership Council for the team’s goals:

- + Promote teamwork and collaboration
- + Improve conflict resolution
- + Gain a better understanding of each other’s professional role and contribution to the healthcare team

- + Provide a forum to discuss and propose meaningful change to enhance and increase physician-nurse collaboration and communication

The Collaboration Team raised awareness of their efforts throughout the hospital. Nurses endorsed McGuire’s suggestion that they spearhead a physician-nurse rounding initiative to further promote collaboration. McGuire guided these efforts by encouraging nurses to leverage some of the structures and processes they had developed to support SVMH’s journey toward Magnet® designation by the American Nurses Credentialing Center, including an electronic shared governance referral system, formal training in communication, and a nursing peer feedback model.

The nurse satisfaction survey is administered every two to three years. The team felt a proxy measure for success would be improvement in the patient experience score for the question related to care coordination: “Staff worked together to care for you.” By the end of Q2 2019, the interventions were complete. When patient experience scores were reviewed, there was a noted increase in the care coordination question from 91.1 in Q3 2018 to an average of 92.2 during Q3 2019 to Q2 2020. The Physician-Nurse Collaboration Team anticipates the results of the next nurse satisfaction survey to demonstrate improved scores for communication between physicians and nurses.

PARTICIPANTS

Physician-Nurse Collaboration Team Leads

- + **Rachel McCarthy Beck**, MD; Vice Chief of Staff
- + **Christie McGuire**, MBA, BSN, RN, CENP; Chief Nursing Officer

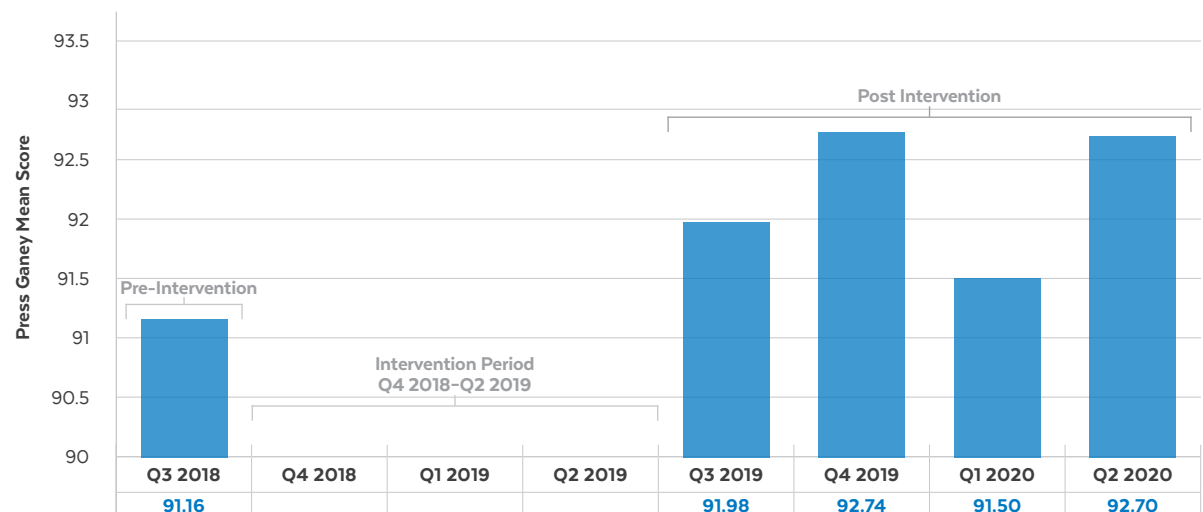
Physician-Nurse Collaboration Team Participants

- + **Maya Atkins**, BSN, RN; Clinical Nurse, Emergency Department
- + **Kristin Herman**, BSN, RNC-OB; Clinical Nurse, Mother/Baby
- + **Agnes Lalata**, MSN, RN, CMSRN; Director, Medical-Surgical Services
- + **Amanda Maguire-Martin**, MSN, RN, CNOR; Unit Shift Supervisor, Endoscopy
- + **Feliciana Orozco**, BSN, RN; Transitional Care Coordinator, Disease Specific Care
- + **Allen Radner**, MD; Chief Medical Officer/Chief Executive Officer, Salinas Valley Medical Clinic
- + **David Ramos**, MD; Chief of Staff, Emergency Medicine
- + **Orlando Rodriguez**, MD; Associate Chief of Staff, Family Medicine
- + **Rakesh Singh**, MD; Chair, Emergency Medicine
- + **Shannon Valdez**, RN, CMSRN; Clinical Nurse, Ortho/Neuro/Spine
- + **Alison Wilson**, DO; Co-Medical Director, Family Medicine

INCREASED PATIENT EXPERIENCE SCORES ON THE QUESTION:

Staff Worked Together to Care For You

■ SVMH Inpatient Units



Formal Mentoring Program Yields Benefits

In the fall of 2019 at a meeting of Salinas Valley Memorial Hospital nursing directors, Critical Care Services Director Scott Baker, DNP, RN, CEN, CNL, NEA-BC, took on the job of developing a formal mentoring program rooted in Magnet® guidelines.

Baker conducted research on other programs and based the SVMH version on adult learning principles and the novice-to-expert continuum created by nursing theorist Patricia Benner, PhD, RN, FAAN. As noted in the opening section of what is now the *Salinas Valley Memorial Hospital Nursing Mentoring Program Guide & Toolkit*, the program is designed to meet the following objectives:

- + Develop supportive and encouraging relationships
- + Guide nurses/leaders in their professional, personal and interpersonal growth
- + Promote mutuality and sharing based on the needs of the mentor and mentee
- + Communicate information concerning expectations, learning opportunities and stressors

“The mentoring program is meant to help any nurse going through a role transition connect with someone who can guide them so they can successfully identify and achieve their personal and professional goals,” Baker says. Role transitions could include new graduate nurses, council chairs growing their leadership skills, and leaders transitioning to a different role.

Baker volunteered to test the program as a mentee, because he was new to his director’s role in critical care at SVMH. Having already established a strong relationship with Trini Juarez, MBA, BSN, RN, the person to whom he had previously reported, Baker chose him as his mentor.

Their meetings began in September 2019, with Baker creating a set of both short- and long-term goals. Short-term goals included becoming comfortable with the use of business analytics software, the critical care cluster staffing matrix, and how capital purchasing works at SVMH. Long-term goals included obtaining American Nurses Credentialing Center certification in healthcare finance for nurse executives and becoming fluent in Spanish to better communicate with SVMH staff, patients and families.

Baker also created a monthly mentoring meeting schedule, with appropriate agendas. When the formal

mentoring relationship ended after six months, Baker had successfully met his short-term goals and was well on his way to meeting his long-term goals.

Mentees and mentors will evaluate the program after six months and submit their feedback to the Nursing Leadership Council. Baker continues to collaborate with the council, Michelle Roberts-Reyes, BSN, RN, and Vanessa Irwin-Nieto, DNP, RN, NPD-BC, NE-BC, CNML, CNE, CLC, to refine the program, support educational efforts, and make sure it is applicable for nurses in any role at SVMH.



“The mentoring program is meant to help any nurse going through a role transition connect with someone who can guide them so they can successfully identify and achieve their personal and professional goals.”

– SCOTT BAKER, DNP, RN, CEN, CNL, NEA-BC

Other SVMH nurses who have successfully used the mentoring program include:

- + Shardé Flannigan, BSN, RN, clinical nurse from the Emergency Department, who sought mentorship from Aubree Collins, BSN, RNC-OB, clinical nurse from Labor and Delivery and chair of the Collaborative Care Council, on becoming a new shared governance council co-chair on the Collaborative Care Council
- + Michelle Roberts-Reyes, BSN, RN, Manager of Outpatient Infusion and Outpatient Wound Care, who sought mentorship from Chief Clinical Officer Clement Miller, MSN, RN, NEA-BC, as she developed her skills as a new leader

Succession Planning Ensures Continuity in Leadership

Succession planning is critical to the future of any successful healthcare organization. The ability to identify, develop and grow future nurse leaders is essential to retaining leadership talent, providing continuity in key positions, and supporting and encouraging individual nurse advancement.

Salinas Valley Memorial Hospital nurse leaders identified the need to formalize the succession planning process to systematically identify and prepare nurses at all levels for future leadership consideration. The early identification of potential successors fosters nurses' needed skill acquisition, and provides them with structured training and experiential opportunities necessary to ensure the availability of nursing leadership during planned and unplanned leadership transitions.

In 2019, after exploring the literature and best practices, Chief Nursing Officer Christie McGuire, MBA, BSN, RN, CENP, and Director of Women's and Children's Services Annette Lindeman, MBA, BSN, RN, developed a draft of the *SVMH Nursing Succession Planning Guidelines*, which define the typical progression for nurses looking to move into leadership positions. Key to the success of the program was vetting the guidelines, processes and tools, and incorporating feedback from nurses across the organization.

Nurse leaders are responsible for discussing professional development goals, including transition to leadership roles, at the time of the annual performance review with potential

leadership candidates. The guidelines contain tools for self-assessment of the entry-level and experienced nurse leader, assessment by an immediate supervisor, and the development of a career action plan.

Often, clinical nurses who express interest in pursuing management are encouraged to first enter into the role of charge nurse or unit shift supervisor. They may also develop leadership skills through successive roles in the shared governance structure as a member, co-chair and chairperson.

In October 2019, the Nursing Leadership Council enthusiastically approved the guidelines, clearly demonstrating SVMH's investment in nurses' growth and professional development by providing coaching, leadership development opportunities, and support so they are able to acquire the necessary skills and experiences to successfully transition into more challenging leadership positions.

Interprofessional Kaizen, with Nursing Leadership, Enhances Emergency Department Throughput

Salinas Valley Memorial Hospital's 16-bed Emergency Department (ED) has more than 60,000 patient encounters per year, for which the national ED bed utilization benchmark recommends nearly three times the number of beds. As SVMH devises comprehensive strategies to expand its ED, the Patient Flow/Throughput Committee focuses on interim strategies to ease ED patient flow. Nurse representation plays an essential role in this committee.

In January 2019, a committee workgroup, informed by the Kaizen philosophy of continuous process improvement, engaged an external consultant to help appropriately decrease ED length of stay. The consultant, Karen Murrell, MD, MBA, FACEP, co-facilitated the interdisciplinary workgroup with ED Director Carla Spencer, MSN, RN, NEA-BC. The group decided to prioritize streamlining throughput for low-acuity ED patients – those with Emergency Severity Index (ESI) levels 4 and 5.

At the first meeting, Dr. Murrell led the ED workgroup through a three-day lean performance improvement process, which included process flow mapping, brainstorming, reviewing the current state and designing the future state. The workgroup discovered that low-acuity patients underwent 72 steps from door to discharge. Workgroup participants evaluated these steps for redundancy and inefficiencies, and they were able to dramatically slash the number of steps to 11 through interventions such as condensing multiple phone calls into one, and replacing several trips to the same location with one.

They then tested the new process, first with one-day trials and then for 90 days, gathering stakeholder feedback along the way.

By the end of that process, the workgroup had:

- + Used a lean process called 5-S to optimize supply access for processes or procedures
- + Stationed a provider where the assessments occur and implemented the process 24/7 for low-acuity ESI 4 and 5 arrivals
- + Set productivity metrics for providers and ED staff
- + Streamlined the radiology workflow
- + Designated the “results waiting” area for vertical patients – those sitting in a chair who need treatment
- + Redesigned the rapid medical exam (RME) process, including removing physician assistants and making RMEs a physician-only process

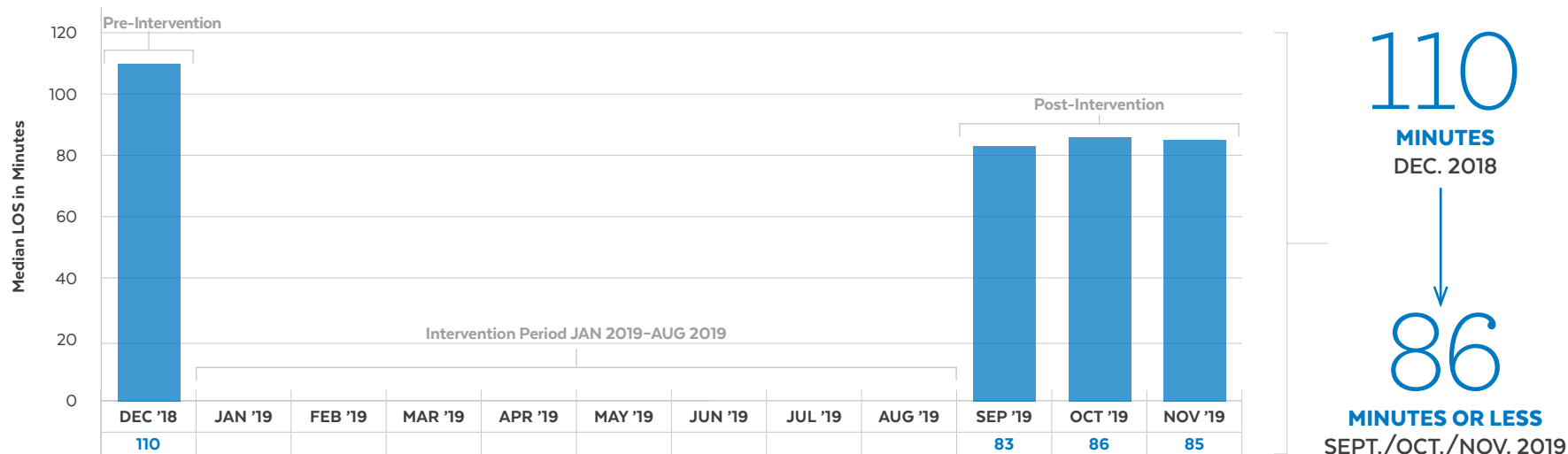
By summer 2019, when the interprofessional Kaizen team met to discuss all stakeholder feedback and data from the trial, they concluded that things had gone very well, but there were additional areas of opportunity. They agreed on a few additional minor changes to the layout of the clinician work areas, modified staffing for both nurses and physician assistants, and made a few other small adaptations.

In addition, all clinicians received education on the triage and patient flow process for low-acuity patients to prepare for a full launch and implementation in August 2019. When the team reported back to the Patient Flow/Throughput Committee about outcomes, the length of stay for low-acuity patients had decreased from 110 minutes in December 2018 to a median of 86 minutes or less for the months of September, October and November 2019. The reduced length of stay has significantly improved throughput for the entire ED.

DECREASED LENGTH OF STAY (LOS) FOR LOW ACUITY PATIENTS

Emergency Department

■ Emergency Department



PARTICIPANTS

- + **Kerry Kantmann**, BSN, RN, CEN; Clinical Nurse, Emergency Department
- + **Rosemarie Cavazos**, Infusion Counter Clerk, Outpatient Infusion
- + **Salvador Delahno**, RN; Clinical Nurse, Emergency Department
- + **Elvira Franco**, Manager, Diagnostic Imaging
- + **Javier Garcia Castro**, Lab Tech Assistant - Lead, Pathology
- + **Jeremy Hadland**, BSN, RN, CEN; Clinical Manager, Emergency Department
- + **Joshua Hajjar**, BSN, RN; Clinical Nurse, Emergency Department
- + **Christopher Kantmann**, PA-C; Emergency Department
- + **Dolores S. Martinez**, Patient Registration Manager
- + **Lynne McKeever**, Director Laboratory Services
- + **Stacy Mognoni**, PA-C; Emergency Department
- + **Charvelle T. Noble**, BSN, RN; Clinical Performance Improvement Specialist, QMS
- + **Neida Puga**, Registration Float Clerk II, Patient Registration
- + **Gina Ramirez**, BSRS, R.T. (R)(CT)(ARRT); Director of Imaging Services
- + **Jessica Rios**, Clinical Assistant, Emergency Department
- + **Rebecca Salvador-Mendoza**, BSN, RN, CEN; Clinical Nurse, Emergency Department
- + **Jorge A. Sanchez**, Operations Supervisor, Diagnostic Imaging
- + **Carla Spencer**, MSN, RN, NEA-BC; Nursing Director, Emergency Department
- + **Charlotte Wayman**, Director, Patient Financial Services/Patient Registration

Support for Professional Development Spurs Certification Rates That Exceed Targets

Salinas Valley Memorial Hospital enthusiastically encourages its nurses' professional development and pursuit of specialty certification. A variety of policies and procedures offer financial support and incentives, while educational and recognition activities also promote increased certification rates.

After evaluating baseline certification rates collected via the HealthStream® Professional Portfolio, members of the Nursing Leadership Council established an organization-wide certification improvement goal of 1%, with a stretch goal of 2%, for fiscal year 2019. In addition, after analyzing the certification data and discovering that several units with the most nurses had the lowest certification rates, the Magnet Steering Committee worked with the Professional Development Council to address the disparity.

Among the strategies that SVMH deployed in 2019:

CERTIFICATION CLASSES

In collaboration with the Magnet Steering Committee, Vanessa Irwin-Nieto, DNP, RN, NPD-BC, NE-BC, CNML, CNE, CLC, Manager of Education, established processes to offer certification courses on-site, with the first round of classes offered for practice areas with the lowest certification rates. The classes, which began in 2019 and continued into 2020, have attracted approximately 100 participants to date. They are also available to nurses outside of SVMH when capacity allows, thus benefiting the larger nursing community.



Certification Courses	Dates Offered
CEN	April 3 & 4, 2019
PCCN	April 10 & 11, 2019
CMSRN	May 2 & 3, 2019
CMSRN	September 5 & 6, 2019
CCRN	September 10 & 11, 2019
CEN	October 9 & 10, 2019
Pediatrics RN-BC (Online Review Course)	November 2019- January 2020
RNC-OB	July 20-22, 2020
Upcoming Courses	Dates Offered
CMSRN	September 29 & 30, 2020
RNC-MNN	November 11-14, 2020

CERTIFICATION REVIEW COURSE REIMBURSEMENT

In 2019 SVMH decided to provide certification review courses for free to SVMH nurses who passed the certification examination. Nurses who attend a review course have 60 days to successfully complete the certification exam. If they are not successful, they incur the course fee by payroll deduction. Nurses who are already certified and want to attend the course for review can use continuing education hours, if available. To increase accountability and awareness, SVMH also developed an employee agreement and FAQs about the reimbursements.

READILY AVAILABLE INFORMATION

In the fall of 2019, SVMH provided office space for shared governance leaders to do their work. Led by Sheilah Quentin, BSN, RN, CAPA, clinical nurse chair of the Professional Development Council, shared governance leaders created and displayed binders in the shared governance office and on the units that contain specialty-specific certification information.

RECOGNITION ON CERTIFIED NURSES DAY

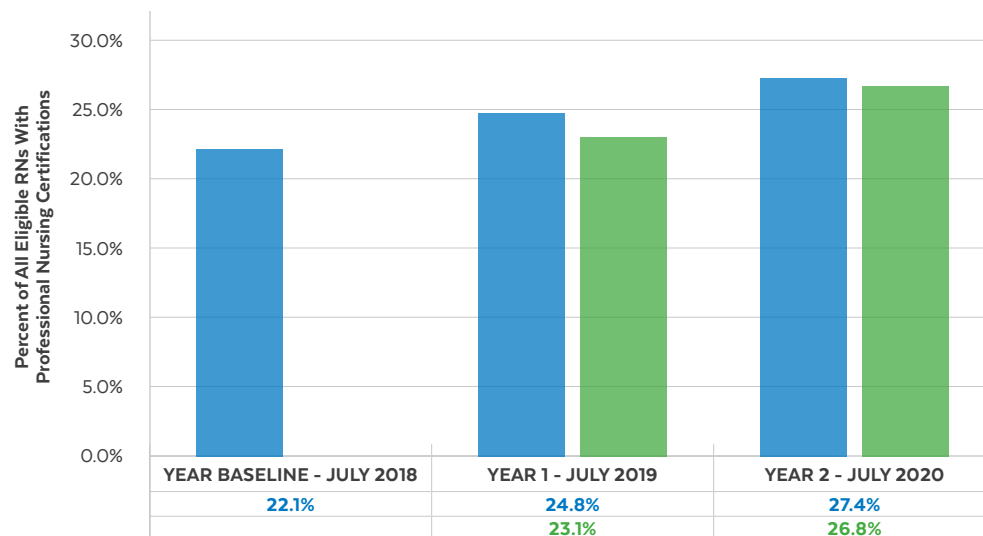
For Certified Nurses Day 2019, the Professional Development Council sent invitations to all certified nurses to attend a breakfast with the chief nursing officer. The chief nursing officer also sent a personal letter thanking certified nurses for completing certification and rewarding them with a Starbucks voucher. On Certified Nurses Day, there were recognition activities, a photo booth and raffle giveaways. A wallpaper poster contained the names of certified nurses; a similar poster is on continuous display in the hospital lobby.

By July 2019, SVMH had exceeded the stretch goal for nurses' certification, going from a 22.1% certification rate in July 2018 to 24.8% in July 2019. Consequently, the Nursing Leadership Council doubled the goals for fiscal year 2020 to a 2% improvement in certification rate, with a stretch goal of 4%.

ORGANIZATIONAL LEVEL PROFESSIONAL NURSING CERTIFICATION

Targeted Goal for Improvement | SVMH

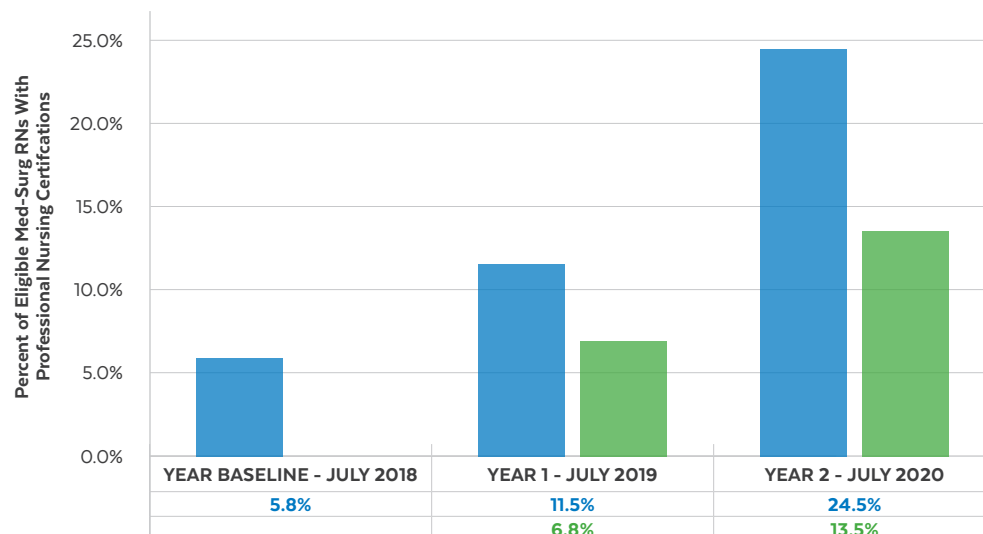
■ Organizational Level Certification Achieved
■ Year 1 Goal = 1% Increase
■ Year 2 Goal = 2% Increase



DIVISION LEVEL PROFESSIONAL NURSING CERTIFICATION

Targeted Goal for Improvement | Med-Surg (3M & 3T)

■ Med-Surg Certification Achieved
■ Year 1 Goal = 1% Increase
■ Year 2 Goal = 2% Increase



Recognizing Nursing Excellence



NURSE OF THE YEAR

Each year Salinas Valley Memorial Hospital recognizes a nurse who exemplifies the nursing mission and the organization's STAR (**S**upport, **T**eamwork, **A**ccountability, **R**espect) values in how they care for patients and others.

Congratulations to **Aizel Castaneda, BSN, RN, CMSRN**, our 2019 Nurse of the Year. Aizel was nominated for her compassion and for the exceptional medical care she provides patients. In addition, she was nominated for being supportive, reliable and respectful and for always sharing her knowledge with other nurses. "My role as a professional nurse is to nurture, care and promote the best health for my patients," Aizel says. "I appreciate my colleagues and nursing leadership team for their support, hard work, commitment and dedication as we work together to promote optimum outcomes." Aizel is a clinical nurse in the medical-surgical unit who joined SVMH in 1996.

"My role as a professional nurse is to nurture, care and promote the best health for my patients. I appreciate my colleagues and nursing leadership team for their support, hard work, commitment and dedication as we work together to promote optimum outcomes."

DAISY AWARDS

Salinas Valley Memorial Hospital pays tribute to its extraordinary nurses for their exemplary clinical practice, extraordinary service, and compassion and caring by awarding The DAISY Award® every other month.



Edel Hernandez, RN

February 2019 | Medical-Surgical

Patients nominated Edel for the outstanding, attentive and compassionate care she provided them. Chief Nursing Officer Christie McGuire, MBA, BSN, RN, CENP, says, “Edel is the epitome of a healthcare provider. Every day she inspires her colleagues to provide the best nursing care possible.”



Michelle Orta, MSN, RN, CPDN

April 2019 | Disease-Specific Care

Michelle was nominated by a colleague for going above and beyond when she ensured that a patient who was already discharged from Salinas Valley Medical Clinic was able to receive a necessary medication, through undertaking interprofessional collaborations to overcome insurance issues.



Daisy Carrillo, BSN, RN

July 2019 | Cancer Resource Center

A co-worker nominated Daisy for providing extraordinary care for all patients and in various situations. She takes patient care to the next level, exemplified in how she helped a patient overcome transportation and housing challenges in order to make appointments.



Stephanie Fierro, BSN, RN

September 2019 | Telemetry / 1-MAIN

Stephanie gave a new mother in the intensive care unit the extra encouragement, support and patience needed in her recovery after a complicated birth. Stephanie says this patient “reminds me how we have to put ourselves in our patients’ shoes every day.”



Audrie Ferreira, MS, BSN, RN

November 2019 | Emergency Department

Audrie recognized a patient’s heightened fear when being admitted to the ED and provided the skilled and compassionate care that made the patient feel safe, important and cared for as though they were one of Audrie’s own family members.

**Congratulations
to all recipients
and nominees!**

Dashboards Enhance Awareness of and Responsiveness to Nurse-Sensitive Indicator Data

In the spirit of continuous quality improvement and evidence-based practice, the Quality Council at Salinas Valley Memorial Hospital was seeking a way to make clinical nurses more aware of how they were performing on nurse-sensitive indicators (NSIs).

While monthly NSI data was already available in an Excel file on STARnet, Becky Rodriguez, BS, RN, CEN, Magnet Clinical Excellence Specialist and Quality Council member, was charged with more effectively disseminating the data so nurses on each unit can readily understand areas where they are doing well and areas where they are underperforming. Armed with data, nurses could then formulate strategies to build on strengths and address areas of concern.

She used the feedback from fellow Quality Council members Megan Lopez, MSN, RN, CNL; Jovita Dominguez, BSN, RN; Lino Santos, BSN, RN, CMSRN; Abby Acosta, BSN, RN, CPAN, CAPA; Maura Baker, BSN, RNC-LRN; Tricia Deblois, RN; and Francie Espino, BSN, RN, CCRN, and proposed a simple color-coded dashboard, with green areas indicating “areas of excellence” and pink sections indicating “areas of opportunity.” There are also rows in the display for snapshots of the supporting data as well as the nurse-formulated strategies for achieving the goals.

Beginning in September 2019, each unit began posting a quarterly dashboard on its huddle board. Rodriguez and her colleagues educated charge nurses about the displays and asked that they incorporate the data and strategies in their huddles.

The Magnet Department team also developed a roving cart to take the displays and other educational materials to the units to further increase awareness about the dashboards. Finally, at the SVMH Biannual Nursing Education Update, the team set up a booth to educate the nurses who attended.

“The feedback from RNs has been that they’re excited about seeing the data, understanding where they need to improve, and playing a bigger role in coming up with strategies for where and how to improve,” Rodriguez says.

“The dashboards have been an asset because when bedside nurses have access to their specific units’ data, they not only know how they are doing, but can also be involved in improving outcomes,” says Pam Yates, RN. “The color-coded areas allow for nurses to understand the information at a glance and then, quarterly, the unit practice councils discuss the data and engage bedside nurses in devising a plan for change using critical thinking, data and our shared governance model.”

“The dashboards have been an asset because when bedside nurses have access to their specific units’ data, they not only know how they are doing, but can also be involved in improving outcomes.”

— PAM YATES, RN



JULY 7, 2020
SUNDAY

Welcome to
Med-Surg

of Discharges: 2
Time to discharge: 1.64

One day in retrospect, the years of struggle
will strike as the most beautiful

ST FALL 4/28/20
ONLY → staff
may help HRTF patients
restroom.

REMINDER
- CHECK WORK
- PLUG IN
- ADMIT PACES
- HOURLY R
- GAIT BELTS

Handwritten notes on the whiteboard: "ST FALL 4/28/20", "ONLY → staff", "may help HRTF patients", "restroom." and "REMINDER" with a list of tasks.

DATE	TIME	STATUS	REMARKS
7/7/20	08:00	OK	
7/7/20	09:00	OK	
7/7/20	10:00	OK	
7/7/20	11:00	OK	
7/7/20	12:00	OK	
7/7/20	13:00	OK	
7/7/20	14:00	OK	
7/7/20	15:00	OK	
7/7/20	16:00	OK	
7/7/20	17:00	OK	
7/7/20	18:00	OK	
7/7/20	19:00	OK	
7/7/20	20:00	OK	
7/7/20	21:00	OK	
7/7/20	22:00	OK	
7/7/20	23:00	OK	
7/7/20	00:00	OK	



Bringing Peer Review to SVMH

In late 2018, guided by research that identifies communication breakdowns as an important factor in adverse outcomes, the Salinas Valley Memorial Hospital Practice Council began to explore the development of nursing peer review to improve and sustain patient outcomes.

To help everyone gain a better overall understanding of peer review, the Practice Council coordinated with Chief Nursing Officer Christie McGuire, MBA, BSN, RN, CENP; Magnet Program Director Kirsten Wisner, PhD, RNC-OB, CNS, C-EFM; and Magnet Clinical Excellence Specialist Becky Rodriguez, BS, RN, CEN, to bring in experts in peer review and communication. The first of these was peer review expert Barb Haag-Heitman, PhD, MSN, RN, FAAN. Haag-Heitman taught a workshop focused on six evidence-based principles for peer review:

1. A peer is someone of the same rank
2. Peer review is practice-focused
3. Feedback is timely, routine and a continuous expectation
4. Peer review fosters a continuous learning culture of patient safety and best practice
5. Peer feedback is not anonymous
6. Feedback incorporates the developmental stage of the nurse

That initial workshop convinced the Practice Council that all nurses at SVMH would benefit from a focused training on how to effectively participate in face-to-face peer feedback. A Peer Feedback Task Force, led by Rodriguez and composed predominantly of clinical nurses from various nursing units, set about identifying essential content for a nursing peer feedback workshop. This included addressing potential obstacles to successful adoption of peer feedback, such as fear of speaking up openly about clinical concerns with each other.

The task force then developed the workshop in collaboration with Catherine Hambley, PhD, BSN, a clinical psychologist who began her career as a nurse and who consults with organizations on communication, effective team facilitation, and transforming workplace cultures. She and the task force developed a 90-minute workshop called *Taking the Fear Out of Feedback*. The mandatory sessions were part lecture and part hands-on practice.

PARTICIPANTS

Task Force Lead

+ Becky Rodriguez, BS, RN, CEN

Task Force Team

+ **Abby Acosta**, BSN, RN, CPAN, CAPA; Clinical Nurse, PACU

+ **Laurel Black**, MSN, RN, CCRN; Clinical Nurse Educator, Education

+ **Dalila Ceja**, BSN, RN, CCRN; Clinical Nurse, ICU

+ **Lisa Garcia**, MSN, RN, CPN; Clinical Nurse, Pediatrics

+ **Vanessa Irwin-Nieto**, DNP, RN, NPD-BC, NE-BC, CNML, CNE, CLC; Education Manager, Education

+ **Kerry Kantmann**, BSN, RN, CEN; Clinical Nurse, Emergency Department

+ **Megan Lopez**, MSN, RN, CNL, Clinical Nurse, Diagnostic Imaging

+ **Maybelle Peters**, BSN, RN, CMSRN; Clinical Nurse, Ortho/Neuro/Spine

+ **Pam Yates**, RN; Clinical Nurse, Pediatrics

They emphasized the SBI-I (Situation-Behavior-Impact-Inquiry) structure for nurses to frame their peer feedback conversations and offered strategies for reducing the normal anxiety and/or defensiveness that might emerge when providing and receiving feedback. Hambley also provided extra training to a Peer Feedback Champions group so they could be available as a resource on their unit for nurses who wanted more support with giving or receiving peer feedback.

In February 2019, nurses from each unit practice council (UPC) identified a peer feedback focus for their team, which they brought to small group trainings. For example, Medical-Surgical UPC nurses noted a decline in their patient experience scores related to patient education about new medications. For this group, peer feedback centered around increasing accountability for activities supporting patient education about medication purpose, side effects and dosing instructions. This team was able to improve their patient experience scores as a result of their peer feedback efforts.

Now the standard practice is for each UPC team to evaluate their patient experience and quality data quarterly and choose a peer feedback focus that supports improvement in a particular area. To enculturate the new process, the SVMH Education Department is weaving peer feedback into various classes and orientation activities, and nurses are encouraged to use peer feedback as a first step when they have a clinical concern.

“Peer feedback is an essential part of professional nursing practice,” says Abby Acosta, BSN, RN, CPAN, CAPA, a member of the Peer Feedback Task Force. “I value peer feedback because it assures me that my colleagues and I can support each other to ensure safe and high-quality patient care.”

Developing Infrastructure for Research and Evidence-Based Practice

The purpose of the Research and Evidence-Based Practice (R-EBP) Council at Salinas Valley Memorial Hospital is to promote and build capacity for nursing research and evidence-based practice. In 2019, the R-EBP Council concentrated on engaging more SVMH nurses in either original nursing research, an evidence-based practice project or a quality improvement project, with the expectation that EBP will weave seamlessly into nurses' everyday work.

To increase awareness among nurses at SVMH about the resources the R-EBP Council offers, members of the council make regular visits to unit practice council (UPC) meetings and encourage each UPC to initiate a journal club. They have also worked with Medical Staff Services to increase access to research literature and full text articles – and have hired a research librarian to help nurses search the literature. Nurses can now request time with the research librarian through the Magnet Department when working on a project.

In 2019, one of the R-EBP Council's primary achievements was its creation of a quarterly workshop to educate teams of nurses about the Johns Hopkins Nursing Evidence-Based Practice model, a problem-solving approach to clinical decision-

making designed to meet the needs of practicing nurses.

“The Johns Hopkins Nursing model helps us understand research and evidence-based practice and guides us to implement new evidence to improve patient care,” says Norma Coyazo, BSN, RNC-OB, who co-chairs the R-EBP Council.

The model uses a three-step process – practice question, evidence and translation – to help nurses quickly and appropriately incorporate the latest research findings and best practices into patient care. It includes a framework and tools to determine whether a practice question or concern is best solved by using quality improvement, evidence-based practice or research.

Julie Vasher, DNP, RNC-OB, CNS, C-EFM; Aniko Kukla, DNP,

RN, CPNP-PC; Scott Baker, DNP, RN, CEN, CNL, NEA-BC; and Kirsten Wisner, PhD, RNC-OB, CNS, C-EFM, developed and taught the first workshop in November 2019, structuring it so that nurses who attend have the opportunity to tackle a real-life clinical challenge from their unit. The goal is to give nurses and other stakeholders the skills necessary to analyze and present data and to design and implement their own projects, so they feel confident applying EBP and sharing their work.

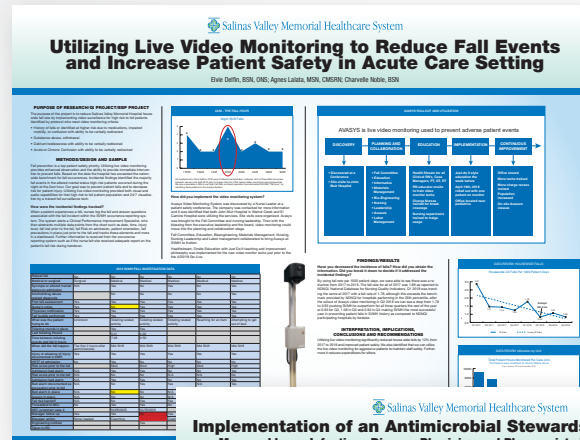
“The workshop was so informative and enlightening, and it broadened my perspective about clinical problem-solving,” says Nursing Supervisor Amy Bonano, MBA, BSN, RN, one of the first workshop attendees. “I learned so much that day – it was a wonderful event!”

“The workshop was so informative and enlightening, and it broadened my perspective about clinical problem-solving. I learned so much that day – it was a wonderful event!”

– AMY BONANO, MBA, BSN, RN

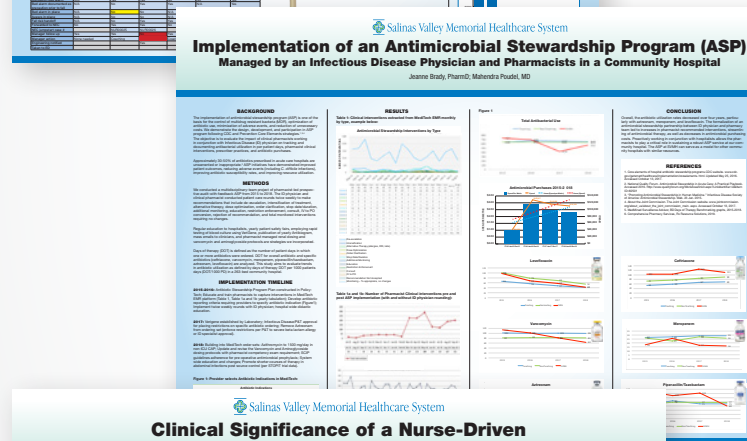
Interprofessional Poster Expo: Sharing Ideas, Impact and Knowledge

One place SVMH nurses can share their work is the annual multidisciplinary poster expo held each year during National Nurses Week; the R-EBP Council considers the expo its crowning achievement. In 2019, nurses presented nine posters on topics ranging from the impact of electronic health records on nursing workflows to how to bring stroke knowledge to Spanish-speaking populations. The 2019 posters are listed on the following pages. Despite the demands of the coronavirus pandemic, the number of poster entries for the 2020 expo is already up by more than 20%.



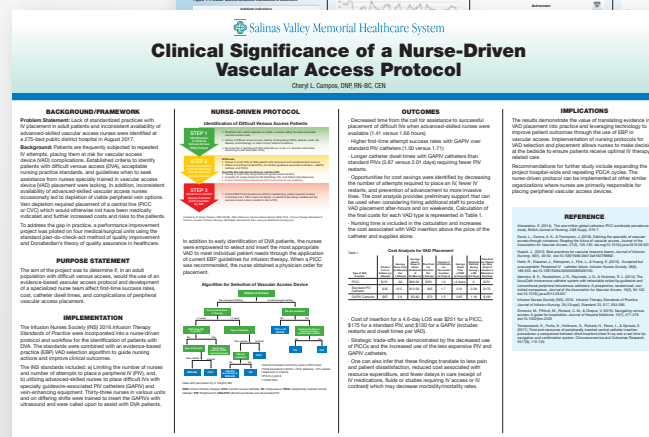
“Utilizing Live Video Monitoring to Reduce Fall Events and Increase Patient Safety in Acute Care Settings”

Elvira Delfin, BSN, RN, CMSRN, ONC
Agnes Lalata, MSN, RN, CMSRN
Charvelle Noble, BSN, RN



“Implementation of an Antimicrobial Stewardship Program (ASP)”

Jeanne Brady, PharmD
Mahendra Poudel, MD

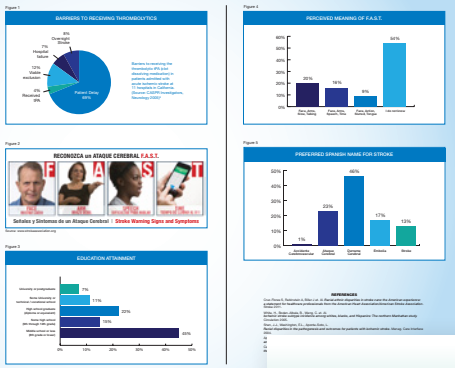


“Clinical Significance of a Nurse-Driven Vascular Access Protocol”

Cheryl Campos, DNP, RN-BC, CEN, CPHQ

Stroke Knowledge in Underserved Spanish Speakers in Monterey County

Caroline Lemon, MS, CCRP, Selene Jamall, MS, Rene Colorado, MD, PhD



“Stroke Knowledge in Underserved Spanish Speakers in Monterey County”

Caroline Lemon, MS, CCRP
Selene Jamall, MS
Rene Colorado, MD, PhD

Improving Care for Newborns Through A Clinical Nurse Instructed Newborn Care Conference

Julie Vasher, DNP, RNC-OB, CNS, C-EFM, Krysta Haught, BSN, Karina Kessler, RNC-NIC, MBA, Adrienne Leyva, BSN, Cherry Zibell, BSN, Daniela Jago, MSN, RNC-OB, Julie Johnson, BSN

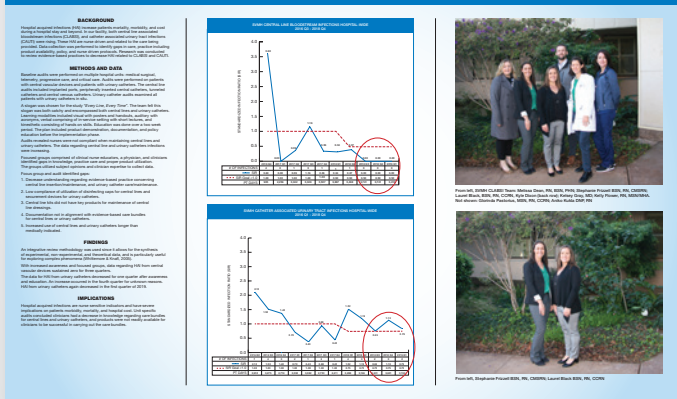


“Improving Care for Newborns Through a Clinical Nurse Instructed Newborn Care Conference”

Julie Vasher, DNP, RNC-OB, CNS, C-EFM
Krysta Haught, BSN, RN
Karina Kessler, MBA, BSN, RNC-NIC
Adrienne Leyva, BSN, RNC-OB, IBCLC
Cherry Zibell, BSN, RN
Daniela Jago, MSN, RNC-OB
Julie Johnson, BSN, RN

Every Line Every Time: Does Implementing Care Bundles Decrease the Incident of Central Line and Urinary Catheter Hospital Acquired Infections?

Laurel Black BSN, RN, CCRN, Stephanie Frizzell BSN, RN, CMSRN



“Every Line Every Time: Does Implementing Care Bundles Decrease the Incidence of Central Line and Urinary Catheter Hospital-Acquired Infections?”

Laurel Black, BSN, RN, CCRN
Stephanie Frizzell, MSN, RN, CMSRN

Providing Family Centered Care in the OR

Julie Vasher, DNP, RNC-OB, CNS, C-EFM; Jennifer Hiller, BSN, RN, CLC; Christine Durden, BSN, RN, CLC; Julie Johnson, BSN, RN, CLC; Daniela Jago, MSN, RNC-OB; Patricia Deblois, RN

PURPOSE OF EBP PROJECT

The goal of this project was to increase the number of family-centered care (FCC) practices in the operating room (OR). The project was designed to address the needs of patients and families who are often excluded from the decision-making process in the OR. The project was designed to increase the number of FCC practices in the OR, and to improve the quality of care for patients and families.

METHODS/DESIGN

A variety of research methods were used. Content analysis was used to identify current FCC practices in the OR. A survey was conducted to assess the needs of patients and families. A focus group was conducted to explore the barriers to FCC. A pilot study was conducted to test the feasibility of the intervention. The intervention was implemented in the OR, and the results were evaluated. The intervention was implemented in the OR, and the results were evaluated. The intervention was implemented in the OR, and the results were evaluated.

FINDINGS/RESULTS

Results are shared in a patient experience survey that also assesses patient satisfaction. Demographic data are reported in the survey. The survey results are reported in the survey. The survey results are reported in the survey. The survey results are reported in the survey.

INTERPRETATIONS, IMPLICATIONS

Family-centered care in the OR contributes to improved patient experience and satisfaction. The results of this project are reported in the survey. The results of this project are reported in the survey. The results of this project are reported in the survey.

Family Centered Care

Respecting and responding to the patient's needs, preferences, and values. Supporting the patient's decision-making process. Providing information and education. Promoting patient participation in care. Supporting the patient's emotional and psychological needs. Supporting the patient's cultural and spiritual needs. Supporting the patient's social and community needs.

“Providing Family-Centered Care in the OR”

Julie Vasher, DNP, RNC-OB, CNS, C-EFM
 Jennifer Hiller, BSN, RNC-OB, C-EFM
 Christine Durden, BSN, RN, CLC
 Julie Johnson, BSN, RN
 Daniela Jago, MSN, RNC-OB
 Patricia Deblois, RN

The Electronic Health Record's Impact on Nurses' Cognitive Work: An Integrative Review

Kirsten Wisner, MS, RNC-OB, CNS, C-EFM; Audrey Lyndon, PhD, RNC, FAAN; Catherine A. Chesla, PhD, RN, FAAN

BACKGROUND

The electronic health record (EHR) has become a central component of patient care. The EHR has the potential to improve patient care by providing a comprehensive view of the patient's health. However, the EHR also has the potential to impact nurses' cognitive work. This integrative review explores the impact of the EHR on nurses' cognitive work.

OBJECTIVE

The purpose of this review is to synthesize the literature on the impact of the EHR on nurses' cognitive work. The review will focus on the impact of the EHR on nurses' cognitive work in the OR.

DESIGN

An integrative review design was used. The review was conducted using a systematic search of the literature. The review was conducted using a systematic search of the literature. The review was conducted using a systematic search of the literature.

RESULTS

The review identified several key findings. The EHR has the potential to improve patient care by providing a comprehensive view of the patient's health. However, the EHR also has the potential to impact nurses' cognitive work. The EHR has the potential to impact nurses' cognitive work in the OR.

CONCLUSION

The EHR has the potential to improve patient care by providing a comprehensive view of the patient's health. However, the EHR also has the potential to impact nurses' cognitive work. The EHR has the potential to impact nurses' cognitive work in the OR.

“The Electronic Health Record’s Impact on Nurses’ Cognitive Work: An Integrative Review”

Kirsten Wisner, PhD, RNC-OB, CNS, C-EFM
 Audrey Lyndon, PhD, RNC, FAAN
 Catherine Chesla, PhD, RN, FAAN

Initiating Early Skin to Skin Care in the NICU

Karina Kessler BSN, RNC-NIC, MBA

BACKGROUND

Skin-to-skin (STS) care in the NICU is a simple intervention that provides a variety of benefits to both the infant and the parent. STS care has been shown to improve infant outcomes, including weight gain, temperature stability, and breastfeeding success. However, the practice of STS care in the NICU is not universal. This project was designed to increase the number of STS care practices in the NICU.

PURPOSE

The purpose of this project was to increase the number of STS care practices in the NICU. The project was designed to address the needs of parents and infants who are often excluded from the decision-making process in the NICU. The project was designed to increase the number of STS care practices in the NICU, and to improve the quality of care for parents and infants.

METHODS

A variety of research methods were used. Content analysis was used to identify current STS care practices in the NICU. A survey was conducted to assess the needs of parents and infants. A focus group was conducted to explore the barriers to STS care. A pilot study was conducted to test the feasibility of the intervention. The intervention was implemented in the NICU, and the results were evaluated. The intervention was implemented in the NICU, and the results were evaluated. The intervention was implemented in the NICU, and the results were evaluated.

FINDINGS

Results are shared in a patient experience survey that also assesses patient satisfaction. Demographic data are reported in the survey. The survey results are reported in the survey. The survey results are reported in the survey.

CONCLUSIONS

Family-centered care in the NICU contributes to improved patient experience and satisfaction. The results of this project are reported in the survey. The results of this project are reported in the survey. The results of this project are reported in the survey.

“Initiating Early Skin to Skin Care in the NICU”

Karina Kessler, MBA, BSN, RNC-NIC



Workspace Redesign Improves Patient Satisfaction

Salinas Valley Memorial Hospital offers comprehensive cardiac care for patients in the Monterey and Salinas area via its Regional Heart Center. The program offers services in the hospital and at two ambulatory clinics, one of which is the Ryan Ranch Center for Advanced Diagnostic Imaging in Monterey.

Historically, cardiology and diagnostic imaging nurses shared one patient intake room at Ryan Ranch, preparing patients for procedures on alternate days. But when patient volumes for cardiology and diagnostic imaging patients increased by about 15%, diagnostic imaging and cardiology nurses needed to prepare patients for procedures simultaneously, rather than on different days of the week.

During a workflow meeting, Ryan Ranch diagnostic imaging clinical nurses voiced their concern that prepping multiple patients in the same intake room was affecting their patients' experience of care. In addition, patient experience scores were down for the assessment and admission process, a finding that prompted clinical nurses to propose a redesign of the work environment with the goal of improving patient experience scores related to privacy and patient comfort.

Diagnostic imaging clinical nurses Nuala Rippere, BSN, RN; Jose Martinez-Melena, BSN, RN; and Lory Castillo, BSN, RN, took the reins for this project. They began by gathering feedback from nurse colleagues at Ryan Ranch while also collaborating with Procedural Nurse Manager Diana Bokemeier, BSN, RN; Diagnostic Imaging Director Gina Ramirez, BSRS, R.T. (R)(CT)(ARRT); and Services Coordinator for CADI Kristin Turner, RHIT. Ultimately, Rippere and Martinez-Melena proposed converting an existing breakroom into a designated diagnostic imaging patient intake room where diagnostic imaging and cardiology nurses could prepare patients for procedures. After the team advocated for their idea, Chief Operating Officer Henry Ornelas, MBA, approved it.

Over the course of two months, Rippere, Martinez-Melena and Castillo developed a customized equipment and supply inventory for the room, including a computer workstation, a reclining patient exam chair,

a new blood glucose monitoring machine, a blood pressure machine and thermometer, medication disposal containers, a sharps box, and various supplies for IVs and medication administration. The team also mapped a proposed workflow and advised plant operations about the implications the proposed workflow had for workspace layout.

In addition, since more diagnostic imaging nurses would staff this site, the team created an orientation list and educational binder covering the three main types of scans, as well as research literature about the medications used in these scans.

The team approved the final layout and design, and Bokemeier and Ramirez worked with the finance, engineering and materials management departments to obtain budget approval and to plan and implement the project. The workflow redesign project achieved the stated goal for improving patient experience scores.

PARTICIPANTS

- + **Diana Bokemeier**, BSN, RN; Procedural Nurse Manager
- + **Lory Castillo**, BSN, RN; Clinical Nurse, Diagnostic Imaging
- + **Jose Martinez-Melena**, BSN, RN; Clinical Nurse, Diagnostic Imaging
- + **Kanae Mukai**, MD; Cardiology
- + **Gina Ramirez**, BSRS, R.T. (R)(CT)(ARRT); Director, Diagnostic Imaging
- + **Nuala Rippere**, BSN, RN; Clinical Nurse, Diagnostic Imaging
- + **Kristin Turner**, RHIT; CADI Services Coordinator

Looking Forward

As we look forward to the inevitable challenges in this unparalleled time of COVID-19, we will focus on lessons learned during the pandemic, professional and personal recovery, and our constant commitment to delivering excellent patient care.

Adapting to new ways of conducting our lives and delivering care with the virus present will necessitate questioning established practices, beliefs and behaviors, and remaining open and prepared to consider alternatives. We will need to optimize the highest level of safe care to best serve our patients and community. We will also remain steadfast in our commitment to advance nursing initiatives that improve patient outcomes and enhance our practice environment.

In 2020 we will continue to:

- + Plan strategically for a surge in COVID-19 cases as community members return to work
- + Study lessons learned during the pandemic to improve personal, organizational and community emergency preparedness responses
- + Build a robust infrastructure that will incorporate evidence-based practice into all clinical and organization decisions
- + Continue to develop our transitions to practice programs, ensuring that newly hired nurses and those transitioning to new roles in the organization have the tools for success
- + Increase our BSN and certification rates among clinical nurses
- + Heighten collaboration and teamwork across the continuum of care

In late 2020, we will submit our Magnet Recognition Program® document to the American Nurses Credentialing Center, representing a very exciting milestone for SVMH nurses. If our document is accepted, SVMH will participate in a multi-day comprehensive site visit validating that our hospital ranks among the top U.S. hospitals that have achieved Magnet status.

I am extremely grateful to SVMH nurses for their commitment and courage as we face the demanding times ahead, and I look forward to a year emphasizing community safety, collaboration and excellence.



Christie McGuire, MBA, BSN, RN, CENP
Chief Nursing Officer



PRIDE in care,
every patient, every day.



A Public Healthcare District

450 East Romie Lane | Salinas, CA 93901

831.757.4333 | svmh.com

© 2020 Salinas Valley Memorial Healthcare System