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2018 NURSING ANNUAL REPORT

Achieving Nursing Excellence



CENTRACARE

* St. Cloud Hospital



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A MESSAGE FROM THE CHIEF NURSING OFFICER



WOW! What a year we have had; our 4th Magnet designation, several Beacon awards, PRISM awards, publications, presentations and most importantly, the care St. Cloud Hospital nurses give to patients, families and co-workers every day! Your commitment to Our Best Begins with Me is evident in all you do! Certainly, we have had a year with many successes, growth, development of new programs and refinements of processes to improve quality, safety and experience; we couldn't have done that without you – the People portion of CentraCare's Triple Aim + People. Thank you!

As we look forward to fiscal years 2019 and 2020, we were reminded during our Magnet site visit, to "not rest on our laurels" and keep forging ahead. Our Magnet appraisers, Harriet, Patricia and Judy, encouraged us to keep paving the way: to get involved in local and national professional organizations, to mentor future generations of health care students, to write and publish more often and to seek out opportunities for poster and podium presentations. There are many ways to share our wisdom and excellent outcomes.

As you think about the phrase *Our Best Begins with Me*, I challenge you to act and to create a new "I will statement" that is personal for you and where you want to go as a professional nurse. Create a statement that is meaningful, one you could share with your culture coach or another BFAW (best friend at work). Create a statement that will push you out of your comfort zone and create meaningful change that contributes to your personal self, nursing, the community we serve, St. Cloud Hospital or CentraCare as a whole. Only you can create this change.

As you read the stories shared in the nursing annual report, take pride in what has been accomplished ... but let's not "rest on our laurels." Let's continue to create a nursing community we can be proud of as we move forward toward our 5th consecutive Magnet designation. What will your "I will statement" be?

Jay M. Planon

Joy Plamann, DNP, MBA, RN, BC Vice President-Operations, Acute Care Division/CNO

I will be a strong advocate for nurses and will encourage and assist others (along with myself) to continually raise the bar to be our best everyday for those we serve.

ST. CLOUD HOSPITAL STATISTICS

Our Service Area:

St. Cloud Hospital has a rich tradition of caring for the people of Central Minnesota. Founded by the Sisters of the Order of Saint Benedict in 1886, St. Cloud Hospital has grown from a small community hospital to a comprehensive, high-quality, regional referral center serving a 12-county area.

As the largest health care facility in the region, St. Cloud Hospital offers a full spectrum of inpatient and outpatient services. From state-of-the-art care for heart disease and cancer to preventive health screenings, St. Cloud Hospital has the technology and skilled professionals to meet the health care needs of the region.

St. Cloud Hospital services and specialty programs include:

Behavioral Health Coborn Cancer Center **Pediatrics** Bone & Joint Center **Emergency Services** Progressive Care Hospitalist Program Recovery Plus and Addiction Medicine Breast Center **Imaging Services** Rehabilitation Center Center for Surgical Care CentraCare Digestive Center Integrative Therapies Respiratory Care CentraCare Family Health Center Intensive Care Sleep Center CentraCare Heart & Vascular Center Medical and Oncology Spiritual Care/Parish Nurse Ministries CentraCare Home Care & Hospice Neonatal Intensive Care Surgery CentraCare Kidney Program Observation Medicine Transitions of Care CentraCare Neuroscience and Spine **Outpatient Services** Women's & Children's Services CentraCare Wound Center Palliative Care

Hospital Profile: (July 1, 2017 to June 30, 2018) Expertise:

Licensed beds:	489	RNs with doctoral degrees:	0.8%
Net patient revenue:	\$841,571,798	Nursing management with graduate degrees:	59.1%
Consumers served:	702,000	RNs with baccalaureate or higher degree in nursing:	71.6%
Inpatient admissions:	28,565	National certifications:	
Number of patient days:	125,161	Nursing management:	63.4%
Average length of stay:	4.39	Clinical RNs:	38.49%
Number of outpatient visits:	299,752	Continuing education activities:	2,194
Number of Emergency Trauma Center visi	its: 60,921	(individual classes) (508 unique program records))
Number of home care visits:	53,747	Contact hours offered:	10,409
Number of surgeries:	14,661	(individual sessions) (1,839 contact hours for unid	que offerings)

Our Nursing team is made up of Advance Practice Registered Nurses, Registered Nurses, Licensed Practical Nurses and Patient Care Assistants.

	APRNs	RNs	LPNs	PCAs
Number employed	46	1,775	306	734
Number of FTEs	35.85	1,400.03	223.04	455.57
Skill mix	NA	67.4%	10.7%	21.9%
Average age (years)	41.07	39.16	38.24	30.2
Average length of service (years)	6.35	9.69	7.41	2.6
Turnover rate		6.04%	15.92%	28.63%
Vacancy rate	10.0%	4.6%	15.9%	6.0%

MESSAGE FROM THE MAGNET PROGRAM DIRECTOR



Transition in Magnet Program Director

Roxanne Wilson, PhD, RN, Magnet Program Director, retired in August 2018 to return to St. Cloud State University as a full-time professor of nursing. Wilson led the Magnet Program during the recent redesignation process culminating in St. Cloud Hospital's Magnet Designation for the 4th time in May 2018. She served on the Magnet Steering Committee for St. Cloud Hospital since the inception of the Magnet process in 2001 until 2010. Wilson returned as a Magnet Program Director to contribute to St. Cloud Hospital and to the nursing community in Central Minnesota.

"Nursing makes a huge contribution to quality health care, and I want to know this kind of quality is present for the people who live here," she said. During her tenure, Wilson worked to engage nurses, leaders and other disciplines in the process, to ensure a good foundation of understanding the importance of the Magnet Standards in improving outcomes. In addition, she engaged future Magnet Program supporters in learning the standards, outcome monitoring and writing process.



Melissa Fradette, MSN, RN, CCRN, was one of the Magnet writers. She was excited to learn the process, and her passion for quality was evident in her work. When Wilson announced her return to teaching, Fradette applied and became the new Magnet Program Director. The opportunity to work closely with the Chief Nursing Officer, Magnet Program Director and staff RNs allowed Melissa a year-long orientation to the process. She is highly respected for her work in the Intensive Care Unit, has a passion for improving outcomes and loves to write.

"I was so honored to see the great care we provide at St. Cloud Hospital across inpatient and outpatient units. It is a great opportunity to continue to contribute," she said.

A MESSAGE FROM THE HOSPITAL PRESIDENT

Dear Nurses, Faculty and Students,

Welcome to St. Cloud Hospital's 2018 Nursing Annual Report. As President, I am proud of the stories and information contained in this report that showcases the talents of our St. Cloud Hospital nursing family and how they live our mission each day.

Because health care involves the constant demand to improve quality, increase efficiency and reduce costs, the dedicated nurses at St. Cloud Hospital work as one to provide patients with services they need and outcomes they deserve. The superior level of service the nurses provide is evident in the countless letters of gratitude I receive from patients. The letters are proof the nursing staff is compassionate, patient-focused and connect with our patients every day.

It's also exciting when external entities outside of our hospital recognize and commend our efforts in the journey to achieve Triple Aim excellence. In the past year, St. Cloud Hospital was honored to receive many awards and recognitions which are listed in the annual report, each being a testament to the talent, spirit and commitment exhibited by nurses. One of the biggest accomplishments is achievement of Magnet designation for the fourth time!



To all our nurses, thank you for your commitment to nursing and providing excellent care to the people and communities we serve.

Sincerely,

Craig Broman, MHA, FACHE

St. Cloud Hospital President

aig Broman



Congratulations nurses! Well done for making it through another very successful year, hopefully with your sanity mostly intact, and with a little bit of a social and family life left. Your outstanding commitment, passion and results for serving our community's health care needs remains the best in the world. We, on the St. Cloud Hospital Board representing the entire community, applaud you with a standing ovation for what you do so well and for your achievement of a 4th Magnet designation.

Surely, even more rewarding, has been the times when patients or their families thank you for the care you have given and the kindness you have shown. No doubt there have been many patients who have said "I hope you're my nurse again tomorrow." You can be proud of yourselves and your entire team for having an amazing and everlasting impact on a patient's experience, their journey and their life.

Tim Wensman

St. Cloud Hospital Board of Directors Chair

Tim J. Wensman

W

NURSING STRATEGIC PLAN FY 2017-2018

KEY PRIORITY #1 PATIENT- AND FAMILY-CENTERED CARE:

- Recommit to hourly rounding and My Care Board utilization; identifying and resolving barriers to consistent implementation.
 Implemented My Care Board conversion on inpatient units. Outpatient group planning conversion of My Care Boards as well.
- Hardwire bedside report communication processes by implementing IPASSON, incorporating patients and families as
 partners. In process. Policy revised. Education completed with go-live for refined process started in May 2018. Monitor
 adherence in FY 2019.

KEY PRIORITY #2 EXEMPLARY PROFESSIONAL PRACTICE:

- Achieve Magnet Re-Designation Achieved 4th Magnet Designation with several exemplars.
- Evaluate reports/systems/processes for Resource Management and determine what is needed to enhance value for inpatient, ambulatory and outpatient settings. Small subgroup met with Human Resources to advise reports to be created for leaders in Dashboard Gear. Work completed.
- Obtain greater involvement and awareness by nurses in performance improvement and evidence-based practice activities.
 Education to leaders on Performance Improvement activities/tools/measurement to occur in FY 2019. Each leader will be expected to launch a Performance Improvement project each quarter in FY 2019. Goal met.
- Revise Nursing Research Review Board process Changes to the Nursing Research policy and NRRB project packet underway and expected to be completed in early FY 2019.

KEY PRIORITY #3 NURSING CARE DELIVERY:

- Implement strategies to evaluate current sitter policy and reduce sitter hours. Sitter toolkit created and placed on CentraNet. Initial conversations about streamlining ownership of Sitter policy and management of the Sitter activities (VOA, monitoring hours, ensuring best practices, etc.) Goal in process.
- Implement effective strategies to enhance throughput in the acute care setting focused on appropriate nurse staffing to accommodate planned and unplanned admission, transfers and discharges to avoid patient delays. Implementation of the discharge date in Epic to begin July 2018. "Saving" a bed for first case surgical patients and other PDSAs tried in FY 2018. Project to continue into FY 2019.

KEY PRIORITY #4 SHARED GOVERNANCE:

- Implement a Coordinating Council and demonstrate bi-directional communication throughout the Shared Governance model to include enhanced opportunities for clinical nurses to give input and be involved in creating change.
 - Coordinating Committee initiated with several tweaks throughout the year based on feedback from stakeholders.
 Goal met.
- Implement an Advanced Practice Provider leadership model. **Goal met. Model initiated with refinements to occur in FY 2019.**
- Implement the Advanced Practice Provider work plan. Goal met. Recruitment transitioned from HR to Provider Recruitment. APP compensation re-design underway. Town Hall meetings routinely held.

KEY PRIORITY #5 WORKING RELATIONSHIPS:

- Further refine and develop the PCA recruitment and retention processes. **Goal in process. Replacement employment** requisitions no longer need VP approval. Streamlining recruitment processes. Exploring options to refine and create additional capacity in orientation classes.
- Implement Registered Nurse hiring guidelines and increase the percentage of baccalaureate prepared nurses toward 80% by 2020; Goal FY 2018 = 71% Goal met. 71.6%
- Increase the number of RNs who have achieved a certification to 40.93%; Goal 41% Goal met. 41.15%. In addition, three nursing leaders achieved new certification (Goal increase by three nursing leaders).

NURSING STRATEGIC PLAN FY 2017-2018

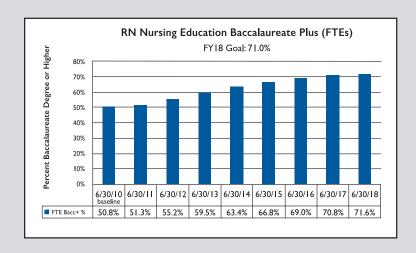
Education and Certification

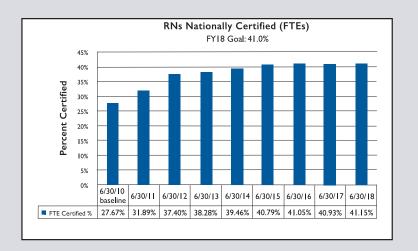
The 2017-2018 nursing strategic plan includes goals to continue to advance nursing professional practice and learning.

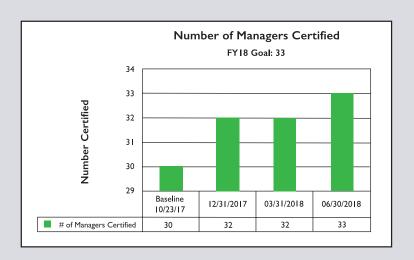
Since 2010, St. Cloud Hospital has had a goal to increase the percentage of RNs with a baccalaureate nursing degree or higher. At the end of fiscal year 2018, the percentage of RNs with a baccalaureate degree or higher was 71.6 %. This met the hospital goal and shows continued progress toward the Institute of Medicine report: The Future of Nursing, which called for health care to set goals to achieve 80% of RNs having a baccalaureate degree by 2020.

The national nursing specialty certification goal was to improve to 41% by fiscal year end 2018. St. Cloud Hospital met the goal at 41.15% with ongoing support offered with review courses and exam reimbursement.

The goal of increasing the number of managers who have a national certification by three individuals was also achieved.







MARCH OF DIMES DISTINGUISHED NURSE OF THE YEAR - 2017



Melissa Fradette, MSN, RN, CCRN, Nurse Clinician, St. Cloud Hospital Intensive Care Unit (ICU), was recognized by Minnesota March of Dimes as the 2017 Distinguished Nurse of the Year: "The ICU interdisciplinary team, St. Cloud Hospital and CentraCare Health provide opportunities and encourage staff to make a difference in the lives of our patients and families every day," she said.

Fradette has led practice and performance improvement projects in ICU including national projects focused on the prevention of ventilator-associated events and catheter-associated urinary tract infections (CAUTI), ICU and hospital projects aimed at the reduction of central line-associated blood stream infections (CLABSI) and CAUTIs and development of an orientation and leadership development program for core charge nurses. She is an active volunteer with the American Association of Critical Care Nurses (AACN) on the Beacon Award Review Panel, an Ambassador and member of the National Teaching Institute Conference Planning Committee.

Fradette's commitment to the nursing profession and passion for evidence-based practice align with the St. Cloud Hospital Strategic Plan and CentraCare Health's Triple Aim + People. The March of Dimes award recognized Fradette for her passion for the nursing profession; presentations on various topics at national conferences; clinical expertise and teaching at the bedside; volunteerism in professional organizations and community; advocating for her peers, patients and families and always seeking opportunities to learn and grow.

Fradette believes in the power of interdisciplinary collaboration, where individual voices are heard through active listening, to provide best practices to the patients and families we serve. The March of Dimes Nurse of the Year award is a culmination of Fradette's commitment to push the nursing profession to the next level in a field that is constantly growing and changing.



PATIENT EXPERIENCE



My Care Boards

Hospitalization can be stressful and overwhelming for patients and families, in part, due to information overload. The use of an evidence-based structured communication tool for patients, families and health care teams has shown a reduction in miscommunication, enhanced teamwork and improved patient experience and quality of care. My Care Boards, implemented in 2012, are used within St. Cloud Hospital inpatient and outpatient rooms as the structured communication tool. Since implementation, various practice changes have occurred, such as use of the IDEAL discharge principles, and it was recommended My Care Boards be updated. In 2016, Ann Backes, MSN, RN, OCN, Director Medical and Oncology and Diane Pelant, MSN, RN, CCRN-K, Director NICU/Perinatology Clinic, received support from the Administrative Nurse Practice Committee to update My Care Boards.

An interdisciplinary task force, led by Backes and Pelant, representing a variety of inpatient RNs and support staff convened to make revisions which were guided by St. Cloud Hospital's Nursing Professional Practice Model and current literature. Feedback was also received from staff, patients, guests, Marketing and Shared Governance committees. As a result, boards were simplified and included

an updated pain scale, space for patient/family questions and a detailed discharge planning section to align with IDEAL discharge principles. Family Birthing Center and Neonatal Intensive Care Unit (NICU) boards were customized to meet unique needs of their patients. Education and reinforcement for consistent use of boards was provided.

Following completion of inpatient *My Care Boards*, a task force consisting of outpatient staff, Patient Experience Committee members and Marketing, led by Backes and Pelant, addressed improvements to outpatient care boards. Following the same process as the inpatient committee, changes were recommended. Emergency Trauma Center boards will be customized with a checklist of common treatment interventions and expected wait time. Implementation of revised boards is slated for Fall 2018.

Feedback obtained from surveys and in person have been extremely positive. Patient experience survey comments demonstrate the impact *My Care Boards* have on overall quality of care and experience evidenced by actual patient comments: "I LOVED that Care Board — it gave me all the info I ever needed." (Bone and Joint); "So nice to have the RN and provider pictures on the boards, nice personal touch and puts a face to the name." (NICU)

PATIENT EXPERIENCE

Awards: St. Cloud Hospital was honored to be a recipient of the 2018 Health Grades Outstanding Patient Experience Award™. The award recognizes hospitals in the top 15% with the highest overall patient experience scores.

Patient-Centered Care: In 2018, St. Cloud Hospital continued their focus on Patient- and Family-Centered Care. With efforts to continue to enhance the voice of the patient and family members, the e-Advisor role was created to allow the opportunity for additional patients and family members to be involved giving feedback on safety, quality and experience. These e-Advisor members provide virtual feedback through email. Examples of topics covered by e-Advisors include cell phone use by staff and hand hygiene. Currently, St. Cloud Hospital has 20 active e-Advisors. Another important project that allowed additional feedback from patients and family members in 2018 included our nursing leader rounding tool pilot to capture feedback during hospitalization. Seven nursing departments piloted a rounding tool to help monitor and capture feedback. The pilot was successful and demonstrated time savings for leaders and provided new insights for leaders and staff.

In February 2018, St. Cloud Hospital hosted a regional Minnesota Hospital Association Patient and Family Engagement round table session. Paulette Levasseur, one of the St. Cloud Hospital Patient & Family Advisory Council (PFAC) members, presented her health care story and shared topics that have been reviewed by the St. Cloud PFAC. Levasseur also talked about how proud she is to be a member, and this is one way for her to give back for the wonderful care her husband received at St. Cloud Hospital.

Performance Results: St. Cloud Hospital achieved HCAHPS overall top box ratings in the 85th percentile of hospitals our size and the 91st percentile for Nurse Communication top box ratings. St Cloud Hospital achieved Magnet recognition and met the criteria in every area of nursing influence on patient satisfaction. Our HCAHPS Overall Rating and Press Ganey Outpatient scores both exceeded our hospital goals for the year. The continued focus on top box results demonstrates our commitment to achieving the highest level of satisfaction with patient experience.



Maternal Bonding — The Importance of Positive Outcomes

This past spring, four nervous and lonely moms found themselves on the St. Cloud Hospital Family Birthing Center (FBC) for six to eight weeks of bedrest. Fortunately, the case management team, which includes a registered nurse and licensed social worker, offers a program for hospitalized antepartum moms to come together for support, encouragement and socialization. Catherine Waldoch of Cushing, Minn.; Renee Gonzales of Kerkhoven, Minn.; Korissa Glynn of Sartell, Minn. and Holly Sibicky of Wadena, Minn., attended the program, and from that first meeting, a friendship formed. They found sharing feelings built a more positive hospital experience.

The women also formed positive relationships with staff. Of special note were meaningful experiences with Sandy Schwegman, RN and Joyce Richter, Unit Support. According to the women, the skill and intuition of Schwegman, who has worked on FBC for 45 years, was a valuable source of support. Schwegman was pleased to see the mothers getting together, going for walks and enjoying lunches together. She saw their attitudes change and smiles become more frequent. Richter has 22 years of FBC experience. Part of her role was to accompany the women for lunch in the cafeteria two times per week. The mothers cherished time away from the monotony of the unit for a fun and joyful interaction. "I enjoyed the lunches too and miss them and our time together," Richter said.

OB Hospitalist Stacia Anderson, MD, was one of five providers involved in the women's care. She also noted the positive impact their friendship had on their hospitalization, and ultimately the positive outcomes for their infants. Current research on bedrest encourages women to move, when determined safe. The FBC brings this research to life through encouragement of interaction between moms. Movement helps moms both physically and emotionally.

By the end of April, the four women gave birth to five infants, all but one receiving care in the Neonatal Intensive Care Unit. The babies were born between four and 11 weeks early. Fast forward four months, the moms and babies are all getting stronger. Glynn states she enjoyed watching her twin boys grow from 3 to 10 lbs. They now enjoy walks in their stroller and spending time outside. Although the moms have yet to reunite because of busy lives, they plan to catch up with one another soon. Most importantly, their shared journey in the FBC allowed them to share struggles and lean on one another for support, and from this, they created friendships that will last a lifetime.





Multidisciplinary Lung Cancer Clinic

In Summer of 2017, the Coborn Cancer Center introduced a new multidisciplinary lung cancer clinic. This clinic provides patients the option of seeing several specialty providers in one visit. Prior to seeing patients in the morning, the multidisciplinary team meets and reviews each patient's work up and medical history. The multidisciplinary team includes a pathologist, radiologist, pulmonologist, surgeon, a medical and radiation oncologist and an RN care coordinator. The team discusses the patient and formulates treatment recommendations and options.

The individual providers then see the patient and their family together to review the diagnosis and discuss treatment options. This patient/family-focused clinic allows collaboration between specialty providers and reduces the patient's time to treatment. The RN care coordinator facilitates the patient and family involvement in the process and works with providers and patients in follow up to ensure the treatment plan is arranged effectively. As the patient moves through treatment, the RN care coordinator continues to serve as a consistent resource for the patient and family.

NURSING CARE DELIVERY

Quality Improvement - Acute Pain Management



Kayla Cummings, BSN, RN, CMSRN, has worked on the Surgical Care Units since 2006. She started as a patient care assistant and transitioned into her current career as a registered nurse in 2011. In 2015, she continued to advance her career by enrolling in the Doctor of Nursing Practice-Nurse Practitioner program through the College of Saint Scholastica. Through this formal education, she has obtained skills in leading and performing quality improvement initiatives based on the Nursing Professional Practice Model – the Compass. Her focus for a quality improvement initiative is improving acute pain management in the surgical post-operative patient. Cummings' work was selected to present to Magnet appraisers as part of the 2018 site visit.

Clinical Nurse Improves Care Using Professional Practice Model

The Shared Governance aspect of the Nursing Professional Practice Model supports clinical nurses in leading improvement. Golden Fisk, BS, RN, a clinical nurse on the Rehabilitation unit, provides bedside report at shift change. Fisk was approached by a Patient Care Assistant (PCA) regarding the challenges of not including the PCA in bedside report with the RN. Fisk, along with other staff, evaluated the concerns.

Using the unit Shared Governance committee, Fisk brought forward the concept of RNs and PCAs attending bedside report. The concept was approved and implemented with positive feedback from PCAs, but more importantly, from patients who saw an increase in consistency of care in activities of daily living. Fisk presented the new process during the Magnet Designation site survey in March 2018 as evidence of the voice of staff improving care.



NURSING CARE DELIVERY

Code Sepsis

In March 2017, a Code Sepsis Team was created to provide inpatient clinical nurses the ability to call a group of clinical experts to the bedside when patients display early signs of sepsis. A multidisciplinary group met and built on the success of an existing Acute Response Team (ART) structure, which includes an ICU clinical nurse and Respiratory Therapist (RT) for initial sepsis response. A phlebotomist was added to the group which completed the Code Sepsis Team. When patients display early signs of sepsis, an electronic alert fires in the medical record which prompts clinical nurses to validate early signs of sepsis and call a Code Sepsis.

Upon Code Sepsis Team arrival, the RT assesses airway needs and the ICU clinical nurse reassesses the patient to determine need for provider orders which may include a lactate, blood cultures, fluid boluses and phlebotomist-obtained blood specimens. The addition of a phlebotomist decreased result times for serum lactate levels from an average of 45 minutes to 12 minutes. The Code Sepsis Team has prompted timely implementation of evidence-based interventions, including antibiotics and intravenous fluids and prevented patient transfers to a higher level of care.



First Obstetric Nursing Consultation

The Family Health Center experienced a high no-show rate due to various social determinants of health. Hani Jacobsen, RN, recognized the first Obstetrics (OB) visit was not scheduled with an RN. She had previous experience working at the OB clinic and realized pregnant patients were not receiving targeted education for a healthy pregnancy, particularly for high-risk patients. Jacobsen's assessment found opportunities to provide improved education to OB patients. She initiated workflow process

changes to include first OB consult visits with an RN. High-risk patients include those who face socioeconomic obstacles, health risks and drug/alcohol addictions. Since implementing this change, the clinic has been able to provide enhanced education, reduce high-risk pregnancy issues and increase prenatal follow-ups. The community is benefiting from this new process, aligned with the mission of the Family Health Center.



Oncology Patient Collaboration

The inpatient Medical and Oncology Unit implemented strategic initiatives to enhance the care of oncology patients across St. Cloud Hospital. Based on feedback from clinical nurses and patients, a gap in continuity of care for oncology patients that were transferred off the inpatient Medical and Oncology Unit was identified. Evidence has demonstrated improved outcomes for oncology patients when Oncology Certified Nurses (OCN) are involved with the plan of care. Nurses from the inpatient Medical and Oncology Unit and Medical Progressive Care Unit (MPCU) came together to identify a process to improve the gap.

Each week, the Medical and Oncology Core Charge Nurse, Kara Panek, BSN, RN, OCN, collaborates with MPCU staff to ensure oncology needs of cancer patients in MPCU are effectively addressed. She visits with patients and families providing oncology-specific education and is an oncology resource to clinical nurses, answering questions and assisting with oncology-specific assessments, such as fatigue or symptom management. Patients have shared increased confidence and satisfaction when a transfer to MPCU is required knowing OCNs will be a continued part of the care team. In addition, Melinda Jennings, BSN, RN, OCN, Medical and Oncology Unit Educator, created an overview on how to care for oncology patients based on feedback from MPCU clinical nurses who expressed a need for oncology-specific education. The education is provided to all MPCU RNs during orientation and annual education days, if indicated on the education needs assessment. Jennings has also updated oncology references, available on CentraNet, for use by all patient care staff.

NURSING CARE DELIVERY

Tunneled Central Venous Dialysis Catheter

Tunneled central venous dialysis catheters are a lifesaving mechanism to access patient's blood for hemodialysis, as well as a potential source for blood stream infections (BSI). Sharon Hoffman, BSN, RN, CNN, led an evidence-based practice project which evaluated effectiveness of sterile dressing changes by CentraCare Kidney Program RNs at the St. Cloud Dialysis facility.

BSIs from tunneled dialysis catheter site infections were reduced by 50% during the December 2016 to June 2017 pilot. As a result, RN sterile dressing changes were implemented to all dialysis sites in January 2018 with ongoing comparison. The project's success was presented at the American Nephrology Nurses Association's National Spring Symposium in Las Vegas, Nev. in April 2018.





Oncology Rehabilitation

Oncology Rehabilitation describes a wide range of therapies designed to help patients build strength and endurance, regain independence, reduce stress and maintain energy needed to participate in daily activities.

Coborn Cancer Center spent almost two years working with internal experts to develop an Oncology Rehabilitation program. The mission was to use guiding principles of health and wellness, community reintegration and resilience to create an Oncology Rehabilitation program that provides patients with resources to improve their overall cancer experience. Duplication of existing services throughout CentraCare did not occur, and instead, gaps in services needed were identified to build a comprehensive Oncology Rehabilitation program.

The strength of evidence to support an oncology-specific rehabilitation program was overwhelming. Approximately 100 articles were reviewed by the project team, including expert opinion, randomized control studies, cohort studies and meta-analyses. The most significant challenges cited to creating a successful Oncology Rehabilitation program are patients not being referred to existing services, and not enough qualified professionals to meet the needs. Many people are excluded from rehabilitation programs due to sociocultural reasons.

Twenty-five percent of cancer survivors have poor physical health, and 10% have poor mental health compared with 10% and 6% of adults without a history of cancer respectively.

Interventions developed by the team included a comprehensive list of resources available for cancer patients at the Coborn Cancer Center, across CentraCare, and within the community. The most significant outcome for the team was the creation of a comprehensive Oncology Rehabilitation manual. This manual incorporates resources to care for the mind (e.g., meditation exercises), the body (e.g., how to manage symptoms and healthy eating) and the spirit (e.g., reflection journaling). This 190page bound manual is intended to be used throughout a person's cancer journey. The pilot started in the Fall 2017 and ended Spring 2018. Feedback from patients has been very positive, "You have taken the mystery out of cancer." Formal data is still being analyzed. The final step to this program is establishing movement, nutrition and symptom management classes for patients. These classes were available in the new Coborn Healing Center beginning Fall 2018, with a goal of making symptom management classes available via WebEx late Fall 2018.

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Go 'Fourth' to Magnet Designation

St. Cloud Hospital was recognized with a fourth Magnet Designation in May 2018. This recognition was a culmination of four years of continuous quality improvement. Magnet recognition was achieved through the work of staff nurses, multidisciplinary team members and leaders living out the promise to our community of "Our Best For You."

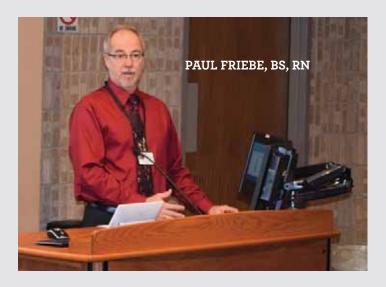
The areas of focus for Magnet quality are:Transformational Leadership, Structural Empowerment, Exemplary Professional Practice, New Knowledge, Innovation and Improvements, and Empirical Quality Results. In every hospital area, nurses evaluate the care within their unit as it relates to Magnet standards. Outcomes are measured for improvement over time and compared to national benchmarks. Staff lead in many ways in this process. Nurses and other team members chair unit-based committees and participate on house-wide committees to share ways to improve. Unit leaders work with providers, nurses and team members to evaluate outcomes and critically analyze areas for improvement. Outcome measures such as nursing and employee satisfaction are analyzed for areas of improvement and strength.

For the 2018 Magnet designation, the Chief Nursing Officer, Magnet Program Director, leaders and staff came together to tell our story. For the first time, St. Cloud Hospital utilized a Magnet Writers program including staff nurses. Each unit identified Magnet Champions to help each staff member recognize this was "Not a one-time story, but a story of what we do consistently." We organized fun events, like puzzles, Jeopardy games and a Magnet Camp led by "Joy Bunyan." A group of singers greeted the Magnet appraisers with a song showing our creative abilities. The appraisers met with groups of nurses,

multidisciplinary team members, community members, faculty, providers, executives, Human Resources and more! They toured St. Cloud Hospital inpatient and outpatient sites. And the final evaluation ... Our fourth recognition with six exemplars. The lesson learned was once again the importance of recognizing the vital role of each person, from the president to the front-line staff, in providing quality care to those we serve.



People



Evidence-Based Practice Projects

St Cloud Hospital nursing culminated two years of Evidence-Based Practice (EBP) Project work with a presentation to the nursing staff and Chief Nursing Officer on April 13, 2018. This team of nurses had completed a three-day advance practice evidence-based practice course taught by St. Cloud Hospital nurses and the University of lowa nursing leaders.

Nurses were assigned to lead EBP projects with mentoring from Roberta Basol, MA, RN, NE-BC; Roxanne Wilson, PhD, RN, Magnet Program Director and Laura Cullen, DNP, RN, RAAN, University of Iowa. Joy Plamann, DNP, MBA, RN-BC, Vice President-Operations, Acute Care Division/CNO, opened the day with a warm welcome and gratitude for the work, lessons learned and outcomes achieved.

Presenters included:

- Jeanne Friebe, BSN, RNC, IBCLC Family Birthing Center care transitions from hospital to home utilizing the IDEAL model
- Paul Friebe, BS, RN Removal of no suicide contracts in acute settings based on evidence
- Melinda Jennings, BSN, RN, OCN Evaluation of a house-wide education process
- Tiffany Omann-Bidinger, BSN, RN PCA recruitment and retention
- Tammy Filippi, BSN, RN-BC Clipping vs. no hair removal for surgical skin preps
- Teresa Jahn, APRN, CNS, CCRN, CCNS Alignment of nursing skill and knowledge in patient assignments
- Kathi Sowada, MSN, MSAOM, RN, LAc, HN-BC Therapeutic music in ICU
- Ariel Roering, BSN, RN Use of single patient EKG leads/BP cuffs to reduce infection risk
- Sarah Dingmann, MSN, RN & Lacy Hemmesch, BSN, RN Early mobility to reduce LOS
- Elizabeth Krekelberg, BSN, RN, CNRN Fall prevention
- Carla Olson, BSN, RN-BC, CMSRN Orthostatic blood pressures
- Sharon Hoffman, BSN, RN, CNN Reducing dialysis tunneled catheter blood stream infections
- Melissa Fradette, MSN, RN, CCRN Post-Intensive Care Syndrome

Institutional Repository

Online repositories have become the primary way organizations collect, preserve and disseminate research and information. In 2017, CentraCare Health launched DigitalCommons@CentraCareHealth to collect and share scholarly research of CentraCare employees. The repository provides a simple way for health care providers to share their research and provides a method to view historical photos and publications from CentraCare's archives. As of June 2018, the repository contains 319 items including published research articles, nursing posters and a variety of CentraCare publications. The site has been viewed by thousands from all over the world through search engines. The repository is a joint project of the Health Science Library and Archives and can be viewed at digitalcommons.centracare.com.

St. Cloud Hospital Simulation Center

The CentraCare Health Foundation Board approved a \$2,911,500 Innovation Fund grant to relocate, expand and introduce high-tech equipment/simulation to the Simulation Center, which opened on March 5, 2018. Simulation provides a bridge between learning and real-life clinical experiences. The center provides opportunities for simulation, task and small team training and large-scale exercises. There are five simulation rooms, one containing a full bathroom, three debriefing rooms, two control booths and clean and soiled utility rooms. Rooms have state-of-the-art video/audio streaming and recording capabilities. The self-contained "hospital within a hospital" mimics patient rooms, from a general unit, to critical care, to emergency bays. The rooms are equipped with nurse call systems and equipment currently used, such as, bedside and end tidal carbon dioxide monitors, defibrillators, vital and ultrasound machines and new three-dimensional technology. The new center has led to increased use of simulation during nursing orientation, new graduate residency and other multidisciplinary simulation experiences. New requests for center use are being made by CentraCare hospitals, clinics and other departments.

Simulation July 1, 2017 – May 31, 2018:

- 663 Simulation sessions with 3,794 participants, included:
 2,575 Nursing
 12 Nurse Practitioners
- 45 I Task training sessions with 5,739 participants
- 885 Participants new to simulation



Nursing Research Studies

Parenting Dependent Children During a Cancer Diagnosis

Roxanne Wilson, PhD, RN and Judy Jensen, BS, RN, OCN, are investigators in a nurse-driven study evaluating parent concerns and family needs of adults diagnosed with cancer who have children under 18 years of age. The parents who enroll in the study complete two surveys.

The Parenting Concerns Questionnaire (PCQ) rates how concerned they have felt in the past month about a variety of child-related issues focusing on the practical impact of the illness on children, emotional impact of illness on children and concerns about co-parenting.

The second survey is a Parenting Dependent Children During a Cancer Diagnosis (PDCCD) survey. The PDCCD survey includes: sociodemographic and illness characteristics, what information has been shared with children, identification of what is helpful in parenting during cancer, identification of needs for guidance in communication, child coping and family/parenting. Additional comments are solicited which will require qualitative analysis of themes for emerging concepts not identified.

The study is currently enrolling patients and hopes to complete enrollment by the end of 2018.

Healing Touch on Coronary Artery Bypass Grafting

Bridget Klein, BSN, RN, RN-BC, CHTP, is a cardiac RN with more than 10 years of experience as a bedside nurse caring for cardiac medical and surgical patients in a Telemetry Unit and a Cardiac-Vascular-Thoracic Surgery Unit. She is also a Certified Healing Touch Practitioner. As a bedside nurse, she learned the role of becoming a principle investigator (PI) moving from a question to a research proposal. Klein's interest was sparked by the findings of a solitary published study evaluating the effects of Healing Touch on Coronary Artery Bypass Grafting (CABG) surgery recovery (Macintyre, 2008). Klein is now the PI of a nursing research study assessing the effects of Healing Touch on the CABG patient outcomes.

Data collection is currently underway to assess Healing Touch's effect on CABG patient's cost per case, anxiety level and post-operative delirium and atrial fibrillation occurrences. The data collection period was March 1, 2018

to Nov. 30, 2018, with a target size of 80 participants. Study participants are randomized to either a control group (where they receive standard care) or treatment group (where they receive standard care plus three healing-touch sessions).

Undertaking this research includes the support of mentors from Roxanne Wilson, PhD, RN and Kirsten Skillings, MA, APRN, CCRN-K, CCNS, CentraCare Heart & Vascular Center leadership, cardiac surgeons and staff, St. Cloud Hospital Healing Touch volunteers and Integrative Health Services. Klein plans to disseminate her work nationally.

Radical Laparoscopic Prostatectomy: Patient Knowledge, Confidence and Anxiety

Feedback from clinical nurses and providers revealed a need to improve patient education for patients who had a prostatectomy. The clinicians found the current education was inconsistent. A literature search was completed confirming fragmented education led to confusion and poor outcomes for patients, creating anxiety and social isolation. The literature supported the basis for a research project on the effectiveness of multimedia learning.

Brenda Haller, BSN, RN, CMSRN, Surgical Care Unit 1, is a leader on a multidisciplinary research team. The study is designed to measure the level of knowledge, confidence and anxiety of prostatectomy post-operative patients who learn self-care with and without structured, interactive, multimedia-based education.

The first part of the study was conducted prior to the implementation of consistent, multimedia education. The multidisciplinary team developed an interactive video available online and on DVD with paper learning as an option. Standardization of delivering the new education content was established and implemented. The second half of the study measuring outcomes post implementation is in process. Statistical analysis will be conducted. The goal is to disseminate the study outcomes regionally and nationally through presentations, posters and publication.



SHARED GOVERNANCE

New Coordinating Committee Takes Off

In fiscal year 2018, St. Cloud Hospital nursing leaders created a new Coordinating Committee to enhance communication and coordination of nursing practice changes, provide guidance to staff regarding which committee to bring nursing topics to and problem solve barriers to care that arise within St. Cloud Hospital departments. The committee consists of chairpersons and co-chairpersons of various nursing-led committees within the organization. Nursing Shared Governance committees are supported by the Coordinating Committee.



The purpose of the Coordinating Committee is to:

- Facilitate bi-directional decision-making and communication in alignment with the needs of St. Cloud Hospital and the nursing strategic plan
- Direct responsibilities to the appropriate committee
- Serve as a group for clinical nurses to bring ideas forward for evaluation and guidance on next steps

Functions of the Coordinating Committee include:

- Dissemination of information between committees in the Shared Governance structure
- Direct agenda topics to the responsible committee as appropriate
- Facilitate the removal of barriers committees may encounter to achieve stated goals
- Evaluate the effectiveness of the Shared Governance structure/committees
- Coordinate the execution of the nursing strategic plan

In the first few months of existence, Coordinating Committee members were already seeing the benefits of enhanced bi-directional communication and having a committee to provide input on where to bring various topics. The implementation of this committee is a small example of continuous performance improvement and re-examining how we work within the Shared Governance structure.

Surgical Care Unit NP/PI Committee

Surgical Care Unit clinical nurses chair and co-chair the unit's Nurse Practice (NP) and Performance Improvement (PI) Committee. Clinical nurses are responsible for development of meeting agendas, meeting facilitation, meeting minutes and culture moments. Committee chair and co-chairs hear unit concerns and bring bedside nurses' recommendations to the committee. Discussions are communicated back to bedside nurses by the chair/co-chair and are shared in mandatory



readings of NP/PI minutes. This bi-directional flow allows staff to bring recommendations to leadership for discussion and back to staff as part of the follow up. The co-chair of NP/PI represents the Surgical Care Unit on the house-wide Clinical Patient Care Committee (CPCC), which allows the clinical nurse to bring practice changes from CPCC to bedside nurses and bring house-wide concerns back to CPCC. This communication is done through reading the unit's newsletter, *Surgical Scoop*. The Surgical Care Unit has a LPN who is a CPCC member and represents hospital LPNs. As a member of CPCC, she brings forward any LPN concerns related to scope of practice or how practice changes could impact the LPN role.

SHARED GOVERNANCE



Advanced Practice Provider Leadership Model

Advanced Practice Providers (APPs) are one of the largest growing segments of employees across CentraCare Health, and continued growth is expected well into the future. As a result of this and many other factors, the executive team supported the development of a formal APP leadership model, which began in September 2017. Amy Hilleren-Listerud, DNP, APRN, ACNS-BC; David Buhl, PA-C and Bobbie Bertram, MBA, APRN, CNP, were all selected into new roles as APP leads, supporting each one of the clinical divisions. Their work for the first year centered around transitioning the recruitment process to the provider recruitment office, building an APP leadership council, becoming involved in various committees to add the voice of the APP provider perspective to conversations and decisions, and getting out into the areas where APPs practice to learn more about what their needs are. A lot was accomplished in the first year, and much value was gained in having APPs represented in a new formal way across CentraCare.



Nurse Champions Influence Nursing-Sensitive Indicators

Nurse champions are transformational leaders who support best practices to decrease hospital-acquired pressure injuries, falls, central line blood stream infections (CLABSI) and catheter-associated urinary tract infections (CAUTI). Katie Meyer, RN, CMSRN, Surgical Care Skin Champion, has dedicated time each month to conduct skin safety rounds to assess patients at high risk for pressure injuries, and collaborates with the patient care team and wound ostomy continence nurses to develop an individualized plan to reduce risk. Liz Krekelberg, BSN, RN, CNRN, SCRN, Neuroscience Spine Falls Champion, used evidence to create patient and family education materials to reduce falls on alert and oriented patients. Sara Maciej, BSN, RN, OCN, Medical and Oncology CLABSI Champion, created a poster with her peers to describe how to identify compromised central-line dressing and process to consult with the Vascular Access Team. May Schomer, BSN, RN, RN-BC, CRRN, Inpatient Rehab CAUTI Champion, assisted with implementation of new bathing standards to eliminate the risk of infection for patients with central lines and urinary catheters. Nurse champions engage nurse colleagues, and the concept continues to grow across St. Cloud Hospital.

Forever our Mel

It's everywhere. T-shirts, billboards, stickers ... we've all seen the slogan, cancer sucks. We could use many other names, but the fact is, cancer sucks. While our story begins with cancer, it ends with something much greater and more powerful than cancer could ever touch or take away. Our Perioperative family has been forever touched by Mel DeYaeger, not by cancer. Our story, rather Mel's story, is about love, strength, hope and unconditional support.

Mel was a registered nurse in the Post Anesthesia Care Unit (PACU). She had a way of making patients feel calm and at ease at their most vulnerable times. Patients were always greeted with her warm eyes and beautiful smile. She would send her patients off stating, "It's time to get reunited with your family upstairs." She knew the importance of family; whether by blood, marriage or friendship. She was blessed to have two families, her family at home and her family at work.

In April of 2017, Mel started to feel run down, tired and sore. Having given birth seven months earlier, the nurse in her attributed it to the life of a working wife and mom. We were convinced she needed a cholecystectomy. None of us were prepared for news other than a simple surgery. Upon hearing her diagnosis of bile duct cancer, Mel's mind went to her children, Gus and Letty. Tears in her eyes, she feared they wouldn't remember her. She was determined to keep their life as normal as possible.

Over the next several months, Mel continued working while having chemotherapy. We could see the hope, strength and courage in her eyes. She was fighting, not like a girl, rather like a heavyweight boxing champion. We quickly put on our gloves and fought, prayed and supported each other. We organized fundraising events including potlucks, bake sales and basket raffles to assist with finances. We arranged for home meals and a cleaning service. Staff throughout St. Cloud Hospital, not just the Perioperative department, generously donated and supported Mel throughout her journey.

Mel was able to attend Holly Ball for the first time in December 2017. Her anesthesia colleagues generously spared no expense by arranging a limousine, VIP table and dinner for Mel and her husband, Royce. Dressed like a princess in an evening gown, her spirit was lifted, and her heart was full.

Shortly after Holly Ball, Mel insisted on meeting her work family for supper. Her spirits were high, and she continued to have hope. While we could see the fight in her eyes, we knew this was her goodbye to us. Her time was limited, and her focus was on the present moment, surrounded by the people she loved and the people that loved her. We exchanged stories and laughed for hours. She was strong, and we were determined to be strong for her. It wasn't until she left that we shed our tears. We again put on our boxing gloves and knew our next steps.

We continued to pray. The Spiritual Care department supported us and Mel by conducting several prayer services in PACU. The anesthesia and OR teams offered to cover the PACU so our staff could attend these. We attempted to select a time when few patients would be in the PACU recovering. God was with us ... not a single patient in the PACU for the entire 25-minute service.

We continued to raise money with a gourmet coffee bar, bake sale, "Team Mel" T-shirts and leadership pie in the face. When Mel heard about the contest she said, "You guys are great! I would have peed my pants! Thanks for everything you have done for me! From serious to silly! I couldn't ask for a better work family, love you guys!" We supported Mel, not only monetarily, but emotionally and spiritually. The combined efforts continued to make her smile and laugh.

Mel was determined to take a family vacation to Florida. Her family was everything to her. As her health continued to decline, we knew the importance of making this happen. Mary Beth Schmidt, PACU, RN, graciously invited Mel and her family into her home. According to Mary Beth, she rarely sees dolphins playing in the ocean. God was present and with Mel ... the dolphins made an appearance and playfully swam for Mel and her family to see. Mel spent her final days eating fish tacos, feeling the warmth of the sun and witnessing the beautiful sunset. Her last moments were with the people she loved most, her family.

With Mel in heaven, our hearts were broken. We lost our colleague, our friend and we were grieving. The staff at St. Cloud Hospital continued to show support for Mel and now, us. We continued to support each other. The Spiritual Care department conducted prayer services and offered resources to the PACU staff. ICU, CCU and the Float Pool assisted with PACU coverage to allow staff to attend Mel's wake and funeral services. St. Cloud Hospital is truly living its mission, vision and values each day. What makes St. Cloud Hospital the place to work? It's the people that quickly become family.

Our support and the community's support continued. Mel's siblings and their spouses held a benefit at the VFW in Sauk Rapids. In addition to all the donations and monetary gifts, the INDY (I'm Not Done Yet) foundation chose to honor Mel as their warrior. At the benefit, we comforted, supported and celebrated her life. She may not have been physically present, but she was there. She's always there and will forever remain our Mel.



Our letter to Mel

Mel.

We are so very grateful to have worked alongside of you and be part of your work family. You were an amazing nurse. You were passionate, caring and empathetic. You knew how to quickly build rapport with patients, whether it be through your calm voice, sassiness or sense of humor.

We have so many great memories of you. Remember the time you started to sing to the patient with dementia who woke up a little nervous? With your imagination and witty humor, you were quickly able to come up with a song about waking up in the PACU. The patient said your song was soothing. We can only imagine the songs you are singing now. We remember your advice when working with challenging people, you compared it to the grieving process stating, "You will go from anger to acceptance and you can't change it." You said you wanted to come back as a cat, sleeping and laying in the sun all day. Is it a coincidence that a stray cat showed up on Ginger's porch and snuggles with her dogs all day? According to Albert Einstein, "A coincidence is God's way of remaining anonymous."

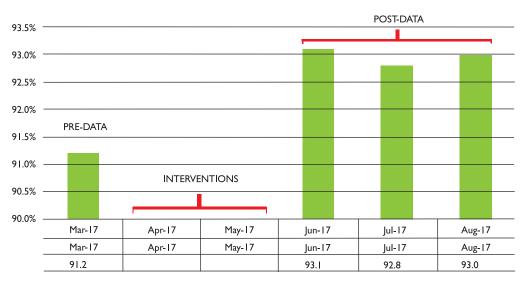
We miss your humor, infectious laugh and enormous smile. We even miss your eye rolls, sailor language and perfect eyelashes. Thank you for the memories we shared and for inviting us into your family. We long for more stories and memories; you are gone too soon. We are comforted knowing you are snuggling with Levi and will remain forever our Mel.

Administrative Nursing Supervisors

Administrative Nursing Supervisors (ANS) are nurses who support hospital operations 24 hours a day, seven days a week. ANSs facilitate patient placement, hospital staffing and serve as a staff resource. They monitor hospital deaths and respond to code blue events. ANSs have implemented the electronic bed placement system and bed huddles to improve patient flow and communication between units. The electronic bed placement system has increased efficiency by 50%. Bed huddles, which occur three times a day, include charge nurses, security, video observation assistants, social workers and environmental services. Bed huddles have improved communication and global perspectives of workflows and hospital activity.



Central Minnesota, Overall Percentage of Children Ages 1 through 12 Years of Age Vaccinated with Measels, Mumps, and Rubella (MMR), According to the MMR Vaccination Schedule



M	Total
Month	Immunizations
April	554
May	1,295
June	741
July	401
August	493
Overall Total	3,484

Community Response to Measles

In April 2017, Minnesota was impacted by a large measles outbreak. Patricia Dumonceaux, MSN, RN, PHN, CIC, Lead Infection Prevention and Control (IPC) nurse for St. Cloud Hospital, along with Rachel Mockros, MBA, coordinator, Emergency Preparedness and the Emergency Preparedness Measles Prevention Committee, which consisted of members from non-CentraCare Health community clinics, CentraCare clinics and hospitals, schools, public health and other community members, partnered to prevent the spread of measles in Central Minnesota. Through implementation of numerous interventions, herd immunity rate for measles, mumps and rubella (MMR) among children ages 1 through 12 increased for the CentraCare patient population, from 91.2% in March 2017 to 93.1% in June 2017, 92.8% in July 2017 to 93% in August 2017. From April through August 2017, a total of 3,484 MMR vaccinations were administered. Dumonceaux's leadership and excellent collaboration by all during the outbreak proved successful with increased herd immunity and zero positive measles cases in our communities.

ICU Think Tank: An Innovative Idea Generator

The Intensive Care Unit (ICU) Think Tank is a multidisciplinary group which meets quarterly. The purpose is to view ICU from a high level, a 30,000-foot perspective, and generate ideas for future performance improvement or practice projects. Group members speak freely of innovative ideas from conference attendance, journal articles and networking with other professionals. Ideas are evaluated for feasibility, impact on patient outcomes, relation to current ICU projects and the capacity of ICU staff to initiate a new project. ICU projects which originated during discussions from the ICU Think Tank include the current Post-Intensive Care Syndrome project and acute respiratory distress (ARDS) patient management changes. The ICU Think Tank has created a culture for change, growth and improved outcomes in the ICU.



IV Fluid Incident Command Team

Working relationships, a component of the Nursing Professional Practice Model, encompasses collaborative interactions which support nursing care infrastructure. In December 2017, St. Cloud Hospital experienced a critical shortage of intravenous (IV) fluid due to a Caribbean weather disaster. Multidisciplinary leaders and content experts collaborated to understand and create an action plan that defined detailed usage and conservation strategies.

The Incident Command Center (ICC) structure was initiated to respond. Alternative resuscitation fluids, elimination of routine IV fluids and conversion to oral medications and



hydration were strategies implemented. Trusting relationships were inherent, as the group worked to solve a problem that impacted St. Cloud Hospital/CentraCare Health and other Minnesota health systems. Importance of timely communication to frontline staff and clear expectations for leadership of conservation strategies became clear to ICC members. The conservation strategies and aggressive procurement of supply prevented an impact to patient care; procedures and admissions continued as planned without deferral. A crisis was avoided and as a result, working relationships developed to continue to explore opportunities to prevent unexpected product shortage crises in the future.

Nursing Podium Presentations Fiscal Year 2018

- **Abresch, L.** (2018, April). *Cardiac devices and MRIs 2.0.* Presented at Earl Brown Arrhythmias Conference, Brooklyn Center, MN.
- **Belanger, J.** (2017, November). *Bringing the team to the patient: Bedside conferences.* Presented at REACH Association of Rehabilitation Nurses (ARN), Seattle, WA.
- **Blonigen, M.** (2017, October). *Intermediate fetal monitoring.* Presented at Association of Women's Health Obstetric and Neonatal Nurses (AWHONN), St. Cloud, MN.
- **Bohlig, J.** (2017, November). *Pediatric trauma certification.* Presented at Emergency Nurse Pediatric Course (ENPC), St. Cloud Hospital, St. Cloud, MN.
- **Braun, D.** (2018, February). *Membrane systems*. Presented at 6th Annual University of California-San Diego Essentials and Advances in Apheresis Therapies, San Diego, CA.
- **Brower, C.** (2018, March). *Stroke in the young adult: Why?*Presented at American Association of Neuroscience Nursing 50th Annual Educational Meeting, San Diego, CA.
- **Cummings, K.** (2018, March). *The compass: Nursing professional practice model & pain management.* Presented at Magnet Survey Site Visit Professional Practice Model, St. Cloud Hospital, St. Cloud, MN.
- **Dingmann, S. & Hemmesch, L.** (2018, April). *Early mobility to reduce LOS.* Presented at Evidence-based Practice Cohort & Nursing Research Presentations, St. Cloud Hospital, St. Cloud, MN.
- **Dombovy, K. & McArdell A.** (2018, March). *Dialysis caregiver presentation*. Presented at Long Prairie Care Center, Long Prairie, MN.
- **Dombovy, K. & McArdell A.** (2018, May). *Dialysis caregiver presentation.* Presented at St. Otto's Care Center, Little Falls, MN.
- **Dumonceaux, P.** (2018, January). *It effects dialysis patients too: Preventing the spread of the deadly stool.* Presented at American Nephrology Association (ANA) Minnesota Dialysis Conference, Chanhassen, MN.
- **Eisenstadt, D.** (2017, October). *You've hired a new nurse leader: Now what?* Presented at American Medical Rehabilitation Providers Association, Chicago, IL.

- Erickson, M., Hart, P., Lahn, M. & Pelant, D. (2018, March). *Innovation in infant care delivery model.* Presented at Magnet Survey Site Visit Innovations, St. Cloud Hospital, St. Cloud, MN.
- **Filippi, T.** (2018, April). *Clipping vs. no hair removal for surgical skin preps.* Presented at Evidence-based Practice Cohort & Nursing Research Presentations, St. Cloud Hospital, St. Cloud, MN.
- **Fisk, G.** (2018, March). *Professional practice model: RN and patient care assistant bedside report.* Presented at Magnet Survey Site Visit Professional Practice Model, St. Cloud Hospital, St. Cloud, MN.
- Fradette, M. (2017, November). Journey to zero CLABSI's [Webinar]. In HAI Peer Learning Network peer sharing event. Retrieved from https://www.mnhospitals.org/Portals/0/Documents/patientsafety/CLABSI/FINAL_HAILNWebinar_Nov2017.pdf\
- **Fradette, M.** (2018, March). *Post-intensive care syndrome.*Presented at Magnet Survey Site Visit Innovations,
 St. Cloud Hospital, St. Cloud, MN.
- **Fradette, M.** (2018, April). *Post-intensive care syndrome.*Presented at Evidence-based Practice Cohort & Nursing Research Presentations, St. Cloud Hospital, St. Cloud, MN.
- **Fradette, M.** (2018, May). *Diabetic ketoacidosis:*Pathophysiology & treatment. Presented at Intensive Care Unit/
 Progressive Care Unit Potpourri, St. Cloud Hospital,
 St. Cloud, MN.
- **Freund, M.** (2018, May). *Optimizing documentation for inpatient nurses.* Presented at Brown Bag Session, St. Cloud Hospital, St. Cloud, MN.
- **Friebe, J.** (2018, April). Family birthing center care transitions from hospital to home utilizing the IDEAL model. Presented at Evidence-based Practice Cohort & Nursing Research Presentations, St. Cloud Hospital, St. Cloud, MN.
- **Friebe, P.** (2018, April). *Removal of no suicide contracts in acute settings based on evidence.* Presented at Evidence-based Practice Cohort & Nursing Research Presentations, St. Cloud Hospital, St. Cloud, MN.
- **Friedrichs, J. & Walz, D.** (2018, March). *Staff-assisted home hemodialysis in a nursing home.* Presented at Magnet Survey Site Visit Innovations, St. Cloud Hospital, St. Cloud, MN.

Nursing Podium Presentations Fiscal Year 2018 cont

- **Friedrichs, J.** (2018, May). *Staff assisted home hemodialysis in a nursing home.* Presented at Southeast Minnesota Chapter #316 Spring Conference, Mankato, MN.
- **Greenlee, K.** (2018, March). *Quality leadership academy:* Enhancing leadership and improvement science skills through applied practice. Presented at Brown Bag Session, St. Cloud Hospital, St. Cloud, MN.
- **Haller, B. & Schmitz, N.** (2018, March). *Radical laparoscopic prostatectomy: Patient knowledge, confidence, and anxiety.* Presented at Magnet Survey Site Visit Research, St. Cloud Hospital, St. Cloud, MN.
- **Haller, B.** (2018, April). *Radical laparoscopic prostatectomy: Patient knowledge, confidence, and anxiety.* Presented at Evidence-based Practice Cohort & Nursing Research Presentations, St. Cloud Hospital, St. Cloud, MN.
- **Honkomp, B.** (2018, June). *Medical trauma: A family's perspective.* Presented to Master's in Social Work Graduate Students, St. Cloud Hospital, St. Cloud, MN.
- **Jahn, T.** (2018, February). *Alignment of nursing skills and knowledge in patient assignments.* Presented at Nursing Association of Clinical Nurse Specialists (NACNS) annual conference, Austin, TX.
- **Jahn, T.** (2018, April). Alignment of nursing skills and knowledge in patient assignments. Presented at Evidence-based Practice Cohort & Nursing Research Presentations, St. Cloud Hospital, St. Cloud, MN.
- **Jennings, M.** (2018, February). *Highlights from ONS congress 2018*. Presented at West Central Minnesota Oncology Nurses Society Meeting, Coborn Cancer Center, St. Cloud, MN.
- **Jennings, M.** (2018, April). Evaluate house-wide education process. Presented at Evidence-based Practice Cohort & Nursing Research Presentations, St. Cloud Hospital, St. Cloud, MN.
- **Jensen, J.** (2018, March). *Building a body of research in the cancer center.* Presented at Magnet Survey Site Visit Research, St. Cloud Hospital, St. Cloud, MN.
- **Jensen, J.** (2018, April). *Building a body of research in the cancer center.* Presented at Evidence-based Practice Cohort & Nursing Research Presentations, St. Cloud Hospital, St. Cloud, MN.

PROFESSIONAL DEVELOPMENT

- **Klein, B.** (2018, March). Evaluation of healing touch's effect on coronary artery bypass grafting (CABG). Presented at Magnet Survey Site Visit Research, St. Cloud Hospital, St. Cloud, MN.
- **Klein, B. & Sowada, K.** (2018, April). *Evaluation of healing touch's effect on coronary artery bypass grafting (CABG).*Presented at Evidence-based Practice Cohort & Nursing Research Presentations, St. Cloud Hospital, St. Cloud, MN.
- **Krekelberg, E.** (2018, April). *Fall prevention.* Presented at Evidence-based Practice Cohort & Nursing Research Presentations, St. Cloud Hospital, St. Cloud, MN.
- **Krekelberg, E.** (2018, April). What? Not another fall! Reducing falls in the Neuroscience patient population. Presented at 19th Annual Neuroscience Conference, CentraCare Health Plaza, St. Cloud, MN.
- **Liestman, B.** (2017, September). *Respiratory emergencies.* Presented at Emergency Nurse Pediatric Course (ENPC), St. Cloud Hospital, St. Cloud, MN.
- **Liestman, B.** (2017, October). *STEMI review.* Presented at Comprehensive Advanced Life Support (CALS), Aitkin, MN.
- **Moser, K.** (2017, September). *TeleHealth & toxicity reviews.* Presented at Oncology Outreach Retreat, St. Cloud Hospital, St. Cloud, MN.
- **Nelson, S.** (2017, August). *Education on sexual assault nurse examiner (SANE) program.* Presented at Veteran's Administration SANE Education, St. Cloud Hospital, St. Cloud, MN.
- **Olson, C.** (2018, April). *Orthostatic blood pressures.*Presented at Evidence-based Practice Cohort & Nursing Research Presentations, St. Cloud Hospital, St. Cloud, MN.
- **Omann-Bidinger, T.** (2018, April). *PCA recruitment & retention.* Presented at Evidence-based Practice Cohort & Nursing Research Presentations, St. Cloud Hospital, St. Cloud, MN.
- **Omann-Bidinger, T.** (2018, April). What? Not another fall. Reducing patient falls in the neuroscience patient population. Presented at 25th National Evidence-based Practice Conference, University of Iowa, Iowa City, IA.

Porwoll, C. (2017, October). *IDEAL transition plan.* Presented at Harvest of Fruits, St. Cloud Hospital, St. Cloud, MN.

Porwoll, C. (2018, March). *Professional practice model: Improving handoff through collaboration.* Presented at Magnet Survey Site Visit — Professional Practice Model, St. Cloud Hospital, St. Cloud, MN.

Pung, K. (2018, April). *Role of transitions coach.* Presented at Parish Nurse meeting, St. Cloud Hospital, St. Cloud, MN.

Revier, S. (2017, October). *Implementation of a serious illness communication program using a systematic approach to facilitate conversations about patient goals and values.* Presented at End of Life Series, St. Cloud, MN.

Revier, S. (2017, December). *Serious illness communication program overview & training.* Presented to Resident Team & Resident Faculty, St. Cloud Hospital, St. Cloud, MN.

Roering, A. (2018, April). *Use of single patient use EKG leads/BP cuffs to reduce infection risk.* Presented at Evidence-based Practice Cohort & Nursing Research Presentations, St. Cloud Hospital, St. Cloud, MN.

Sandberg, C. & Hiemenz, J. (2018, June). *Safely transitioning people off full opioid agonists to buprenorphine overnight.*Presented at Brown Bag Session, St. Cloud Hospital, St. Cloud, MN.

Schmitz, N. (2017, September). *Bariatric population overview.* Presented at Academy of Medical-Surgical Nurses (AMSN) Chapter, St. Cloud, MN.

Simonson, E. (2017, November). *Journey to zero CLABSIs.* Presented at Minnesota Hospital Association (MHA) Healthcare-Associated Infection (HAI) Peer Learning Network, St. Paul, MN.

Sowada, K. (2018, April). *Beyond chemo and radiation: Integrative care for those with cancer.* Presented at University of Minnesota Nursing Research Day, Minneapolis, MN.

Sowada, K. (2018, April). *Therapeutic music in the ICU.* Presented at Evidence-based Practice Cohort & Nursing Research Presentations, St. Cloud Hospital, St. Cloud, MN.

Sowada, K. (2018, April). *Beyond chemo and radiation: Integrative care for those with cancer.* Presented at Evidence-based Practice Cohort & Nursing Research Presentations, St. Cloud Hospital, St. Cloud, MN.

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Stang, K. (2017, September). *Corrosive behavior: When the spouse interferes with care.* Presented at Schwartz Center Rounds, St. Cloud Hospital, St. Cloud, MN.

Stueve, D. (2018, June). *CISD-A framework for support & nurturing resilience.* Presented at Church Safety & Security-Ready, Set, Go, CentraCare Health Plaza, St. Cloud, MN.

Summar, A. (2017, November). *Transition to a nurse practitioner-led rehabilitation consult service.* Presented at REACH Association of Rehabilitation Nurses (ARN), Seattle, WA.

Summar, A. (2017, November). *Emotional changes and long-term complications after stroke*. Presented at St. Cloud Hospital Annual Stroke Education, St. Cloud, MN.

Thoma, J., George, M. & Blais, H. (2018, May). *Overcoming new hire obstacles with an individualized RN orientation in the critical care area.* Presented at American Association of Critical-Care Nurses (AACN) National Teaching Institute, Boston, MA.



AMERICAN ASSOCIATION OF CRITICAL-CARE NURSES (AACN) NATIONAL TEACHING INSTITUTE PODIUM PRESENTERS: HEATHER BLAIS, RN; MELISSA GEORGE, BSN, RN AND JESSICA THOMA, MSN, RN-BC

Tollefson, B. (2017, October). *Collaborative classroom simulations: Longitudinal simulation pedagogy for the tertiary care classroom.* Presented at HealthPartners Clinical Simulation Conference 2017, Minneapolis, MN.

Van Buskirk, K. (2018, April). A workplace violence prevention journey [Webinar]. In National Content Developer, Partnership for Patients.

Nursing Podium Presentations Fiscal Year 2018 cont

Walz, D. (2017, October). *Lessons learned: Staff-assisted home hemodialysis in a nursing home.* Presented at National Renal Administrators Association, Austin, TX.

Wimmer, K. & Hylla, B. (2018, January). *Managing fluids on dialysis*. Presented at Douglas County Hospital, Alexandria, MN.

Worlie, B. (2017, September). *Aggressive management.*Presented at Litchfield Nursing Conference, Litchfield, MN.

Worlie, B. (2017, September). *Simulation on a shoe string budget.* Presented at Maternal Newborn Conference, St. Cloud Hospital, St. Cloud, MN.

St. Cloud Hospital - Schwartz Center Rounds Panel

Cornell, B., Kilgard, L., May, N., Opatz, S. & Walz, D. (2017, November). *In the right place at the right time:*Stepping up in times of need. Presented at Schwartz Center Rounds, St. Cloud Hospital, St. Cloud, MN.

Honkomp, B., Klaverkamp, L. & Schneider, N. (2017, July). Struggling to satisfy: When perceptions of care don't meet expectations. Presented at Schwartz Center Rounds, St. Cloud Hospital, St. Cloud, MN.

Leen, P. (2018, June). *Understanding obesity: There is more to the story.* Presented at Schwartz Center Rounds, St. Cloud Hospital, St. Cloud, MN.

Massmann, J. (2018, March). *Video observation: Crossing the line with a vulnerable adult.* Presented at Schwartz Center Rounds, St. Cloud Hospital, St. Cloud, MN.

McArdell, A. (2018, January). *In-house more than home: Twenty-three hospital admissions.* Presented at Schwartz Center Rounds, St. Cloud Hospital, St. Cloud, MN.

Olson, K., Pelant, D. & Petersen, D. (2018, May). *Out of control: My baby or yours.* Presented at Schwartz Center Rounds, St. Cloud Hospital, St. Cloud, MN.

Stang, K. (2017, September). *Corrosive behavior: When the spouse interferes with care.* Presented at Schwartz Center Rounds, St. Cloud Hospital, St. Cloud, MN.

Nursing Poster Presentations Fiscal Year 2018

Annett, L., Manning, M., Jahn, T., Mackedanz-Johnson, J., Maciej, J. & Skillings, K. (2018, May). Implementation of Strategies to Reduce the Use of Sitter Observation in a Telemetry Unit. Poster session presented at National Teaching Institute (NTI), Boston, MA.

Belanger, J. (2017, November). The Hidden Impact of the Functional Independence Measure. Poster session presented at REACH Association of Rehabilitation Nurses Annual Conference, Seattle, WA and St. Cloud Hospital Nurses Week, St. Cloud, MN.

Czech, J. (2018, April). *Improving Nursing Skills in Caring for Culturally Diverse Patients.* Poster session presented at the University of Minnesota 2018 Nursing Research Day, Minneapolis, MN and St. Cloud Hospital Nurses Week, St. Cloud, MN.

Dinndorf-Hogenson, G. (2017, July). *Moral Courage in Nurses*. Poster session presented at Sigma Theta Tau International Research Conference. Dublin, Ireland.

Dumonceaux, P. & Schmidt, D. (2018, April). *Exploring Community-Associated Clostridium Difficile*. Poster session presented at St. Cloud Hospital, St. Cloud, MN.

Fisk, G. (2018, April). Benefits of Bedside Report. Poster session presented at St. Cloud Hospital Nurses Week, St. Cloud, MN.

Fradette, M. (2017, October). *Catheter-Acquired Urinary Tract Infection Reduction Project.* Poster session presented at International Magnet Conference, Houston, TX.

Fradette, M. (2018, April). *Journey to Zero CLABSIs.* Poster session presented at the 25th National Evidence-Based Practice Conference, Iowa City, IA.

Freund, M. (2018, April). *Optimizing Documentation for Inpatient Nurses.* Poster session presented at the 25th National Evidence-Based Practice Conference, Iowa City, IA.

- **Freund, M.** (2018, April). *Optimizing Documentation for Inpatient Nurses.* Poster session presented at St. Cloud Hospital Nurses Week, St. Cloud, MN.
- **Friebe, J.** (2018, April). *Care Transitions from Hospital to Home: IDEAL Discharge Planning.* Poster session presented at St. Cloud Hospital's Nurses Week, St. Cloud, MN.
- **Friebe, P.** (2018, April). *STOP: No Suicide Contracts.* Poster session presented at St. Cloud Hospital Nurses Week, St. Cloud, MN.
- **Gillenwaters, O.** (2018, April). *Post-Stroke Bladder Management.* Poster session presented at St. Cloud Hospital Nurses Week, St. Cloud, MN.
- **Gregory, D.** (2017, August). *Integrative Therapies.* Poster session presented to St. Cloud State University Students, St. Cloud Hospital/CentraCare Health Plaza, St. Cloud, MN.
- **Groth, A.** (2018, May). *Automated Blood Pressure Competency Checklist.* Poster session presented at American Academy of Ambulatory Care Nursing (AAACN), Orlando, FL.
- **Hoffman, S.** (2018, April). *Reducing Dialysis tunneled Catheter Blood Stream Infections.* Poster session presented at American Nephrology Nurses Association (ANNA) National Symposium, Las Vegas, NV and St. Cloud Hospital Nurses Week, St. Cloud, MN.
- **Jahn, T.** (2018, February). *Alignment of Nursing Skills & Knowledge in Patient Assignments.* Poster session presented at National Association of Clinical Nurse Specialists (NACNS) Conference, Austin, TX.
- **Jennings, M.** (2018, April). *House Wide Education.* Poster session presented at St. Cloud Hospital Nurses Week, St. Cloud, MN.
- **Jones, M.** (2017, October). *Cognitive Bias: A Blindfold.* Poster session presented at Society to Improve Diagnosis in Medicine (SIDM), Boston, MA.
- Klein, B., Skillings, K., Wilson, R., Sowada, K., Jahn, T. & Thoma, J. (2018, April). Clinical Research: Evaluation of Healing Touch's Effect on Coronary Artery Bypass Grafting Recovery: A Randomized Study. Poster session presented at St. Cloud Hospital Nurses Week, St. Cloud, MN.
- **Koenig, N.** (2018, April). *Irrisept: Redefining Irrigation.* Poster session presented at St. Cloud Hospital Nurses Week, St. Cloud, MN.

- **Lambert, M. & Major, A.** (2018, April). *Heart Failure Follow Up Phone Calls.* Poster session presented at St. Cloud Hospital Nurses Week, St. Cloud, MN.
- **Lyon, H., Maciej, S. & Stanger, A.** (2018, April). *Central Line Policy Updates.* Poster session presented at St. Cloud Hospital, St. Cloud, MN.
- Mackedanz-Johnson, J. (2018, May). Reducing Sitter Hours. Poster session presented at American Academy of Ambulatory Care Nursing (AAACN), Orlando, FL.
- **Olson, C.** (2018, April). *Orthostatic Blood Pressure Monitoring.* Poster session presented at St. Cloud Hospital Nurses Week, St. Cloud, MN.
- **Olson, J.** (2017, July). *Oral Health.* Poster session presented at St. Cloud Hospital/CentraCare Health Plaza, St. Cloud, MN.
- Omann-Bidinger, T. (2018, April). Enhancing Retention for Patient Care Assistants: Effective Strategies to Implement to Reduce Turnover. Poster session presented at University of Minnesota 2018 Nursing Research Day, Minneapolis, MN and St. Cloud Hospital Nurses Week, St. Cloud, MN.
- **Omann-Bidinger, T.** (2018, April). *Carry Your Candle...and Light the Way.* Poster session presented at St. Cloud Hospital Nurses Week. St. Cloud. MN.
- **Panek, K. & Jennings, M.** (2018, April). *Collaboration to Improve Care of Oncology Patient.* Poster session presented at St. Cloud Hospital Nurses Week, St. Cloud, MN.
- **Porwoll, C.** (2018, April). *Improving the transition of care and increasing throughput.* Poster session presented at the University of Minnesota Nursing Research Day, Minneapolis, MN.
- **Porwoll, C.** (2018, April). *I.D.E.A.L. transition plan.* Poster session presented at St. Cloud Hospital Nurses Week, St. Cloud, MN.
- **Porwoll, C.** (2018, May). *I.D.E.A.L. transition plan.* Poster session presented at the National Association of Orthopaedic Nurses (NAON) Congress, Albuquerque, NM.

- **Sandberg, C.** (2018, April). *Patient Case Series: Rapid & Comfortable Ambulatory Transitions to Buccal Buprenorphine for Chronic Pain.* Poster session presented at the American Academy of Pain Medicine Annual Meeting, Vancouver, Canada.
- **Scepaniak, S. & Patterson, K.** (2018, April). *Decreasing Unnecessary Pharmacy Cost in the Cath Lab.* Poster session presented at St. Cloud Hospital Nurses Week, St. Cloud, MN.
- **Schug, N.** (2018, April). *RN Case Manager Case Consultation.* Poster session presented at St. Cloud Hospital, St. Cloud, MN.
- **Schulz, K.** (2018, April). *Preceptor Class Evaluation and Redesign.* Poster session presented at St. Cloud Hospital Nurses Week, St. Cloud, MN.
- **Sowada, K.** (2018, April). *Beyond Chemo and Radiation: Integrative Care for those with Cancer.* Poster session presented at University of Minnesota 2018 Nursing Research Day, Minneapolis, MN.
- **Sowada, K.** (2018, April). *Integrating Holistic Care Modalities into an Inpatient Physical Rehabilitation Program.* Poster session presented at St. Cloud Hospital Nurses Week, St. Cloud, MN.

- **Sowada, K.** (2018, April). *Music Heals: Therapeutic Music to Reduce Pain and Anxiety in Adult ICU Patients.* Poster session presented at St. Cloud Hospital Nurses Week, St. Cloud, MN.
- **Summar, A.** (2018, April). *Conversion Disorder.* Poster session presented at St. Cloud Hospital Nurses Week, St. Cloud, MN.
- **Thoma, J., Blais, H. & George, M.** (2018, April). *Overcoming New Hire Obstacles with an Individualized RN Orientation in the Critical Care Area.* Poster session presented at St. Cloud Hospital Nurses Week, St. Cloud, MN.
- **Upcraft, C.,** Hoover, C., **Plamann, J.** & Oman, J. (2018, May). *COPD Management and Role of the Nurse Coach: Increasing Referrals and Participation in Pulmonary Rehabilitation.* Poster session presented at American Thoracic Society International Conference, Washington, DC.
- **Wheeler, H.** (2017, November). *New MDS Regulations for Hospice and SNFs.* Poster session presented at St. Cloud Hospital/CentraCare Health Plaza, St. Cloud, MN.

Nursing Publications Fiscal Year 2018

Eisenstadt, D., Summar, A. & Beckel, J. (2017). Development of professionalism and performance accountability for sustained FIM accuracy improvement. *Rehabilitation Nursing Journal*, 42(4), 67-74.

Erickson, M.C. (2016, December 9). Babies do not come with parachutes [Blog Post]. Retrieved from http://www.centracare.com/for-the-health-of-it/childrens-health/babies-do-not-come-with-parachutes/

Gorecki, A., Schuster, K., Dumonceaux, P. & Erickson, M. (2017). Reduction of cesarean section surgical site infections: Progression and implementation of evidence-based practice. *Journal of Wound, Ostomy and Continence Nursing*, Supplement 3s: 44: S7-S7.

Graber, M. L., Rusz, D., **Jones, M. L.**, Farm-Franks, D., Jones, B., Cyr Gluck, J.,... Elchbaum, Q. (2017). The new diagnostic team. *Diagnosis*, *4*(4), 225-238. doi:10.1515/dx-2017-0022.

Hoover, C., **Upcraft, C., Plamann, J.** & Oman, J. (2017). COPD management and role of the nurse coach: Increasing referrals and participation in pulmonary rehabilitation. *American Journal of Respiratory and Critical Care Medicine*, 195: A4265.

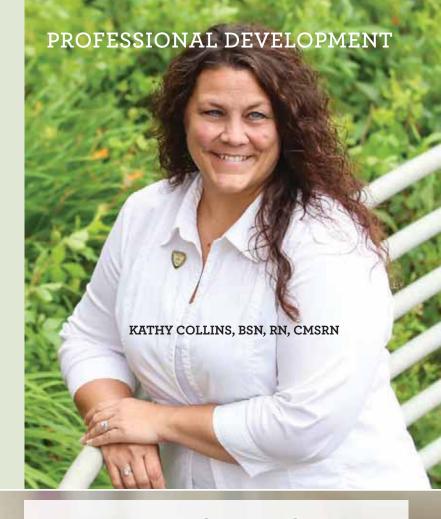
Walz, D. & Leander, S. A. (2017). Public policy and the legislative process. In S. M. Bodin (Ed.), *Contemporary nephrology nursing* (3rd ed., pp. 953-966). Pitman, NJ: American Nephrology Nurses Association.



2018 Certified Medical-Surgical Registered Nurse of Distinction

Kathy Collins, BSN, RN, CMSRN, Educator for Surgical Care, was awarded the 2018 Certified Medical-Surgical Registered Nurse (CMSRN) of Distinction, which was presented at the Academy of Medical-Surgical Nurses (AMSN) national conference.

Collins has been an educator on the Surgical Care Unit since November 2011. She is instrumental in unit and house-wide change processes, particularly those related to care models, pain and surgical nursing. Collins engages co-workers, inspires excellence and promotes national certification and clinical laddering. She presents different topics for new-hire orientation, new grad classes, preceptor classes and a variety of topics for the Surgical Care Units. She is committed to increasing professionalism, building great teams and taking care of patients and each other. She is truly a gem to have in our midst.



MELISSA LAHN, MSN, RN-C, OB

Our Best Begins With Me Award

"Our Best Begins With Me" is a CentraCare-wide effort to form our culture by focusing on particular behaviors reflective of our mission and values. The "Our Best Begins with Me" award recognizes efforts by employees who exhibit our mission and values, in particular, by intentionally working at our culture-shaping work.

Melissa Lahn, MSN, RN-C, OB, Director of the Family Birthing Center, was awarded this honor for St. Cloud Hospital. "The shadow that Melissa casts as a leader is influential and positive. Her No. I priority is providing exceptional patient care."



Nursing Education Needs Assessment

In January 2018, the St. Cloud Hospital Nursing Education Needs Assessment results showed the desire for a variety of topics and learning methods. As organization and department-specific education is planned, topics are focused on the top three educational needs for each level of nursing in all St. Cloud Hospital settings. A variety of educational opportunities pertaining to the following topics have been planned for 2018 and 2019.

ASSESSMENT OF EDUCATION NEEDS

	Inpatient Setting:		Outpatient Setting:	
Overall Nursing Learners	Clinical Education 1. Addiction – Opioid Epidemic 2. Code Blue 3. Sepsis	Non-Clinical/Professional Development 1. Evidence-Based Practice (EBP) — Effective Use in Daily Practice 2. Staff Retention 3. Resiliency/Self Well-Being		Non-Clinical 1. Evidence-Based Practice (EBP) Effective Use in Daily Practice 2. Staff Retention 3. Giving & Providing Feedback
Chief Nursing Officer	Clinical Education 1. Addiction — Opioid Epidemic 2. Safely Caring for Suicidal Patients 3. Skin Wound Care	Non-Clinical/Professional Devalue 1. Community Health Initiatives 2. Health Care Reform/Value-Based Purchasing 3. Population Health	velopment	
Nursing Leaders/Directors	Clinical Education 1. Communication Amongst the Health Care Team 2. Safely Caring for Suicidal Patients 3. Addiction – Opioid Epidemic	Non-Clinical/Professional De 1. Resiliency/Self Well-Being 2. Health Care Reform/ Value-Based Purchasing 3. Leadership Development	velopment	
Nursing Coordinators/ Core Charge	Clinical Education 1. Serious Illness Conversation 2. De-escalating an Aggressive Family Member 3. Sepsis	Non-Clinical/Professional Dev 1. Leadership Development 2. Staff Retention 3. Resiliency/Self Well-Being	velopment	
Educators	Clinical Education 1. Addiction – Opioid Epidemic 2. Simulation Impacting Practice Changes 3. Clinical Documentation	Non-Clinical/Professional Dev 1. Evidence-Based Practice (EBP) Effective Use in Daily Practice 2. Giving and Providing Feedback 3. Leadership Development	•	
APRNs	Clinical Education 1. Care of the Diverse Population 2. Addiction – Opioid Epidemic 3. De-escalating an Aggressive Family Member	Non-Clinical/Professional De 1. Evidence Based Practice (EBP) - Effective Use in Daily Practice 2. Health Care Reform/ Value-Based Purchasing 3. Leadership Development	•	
Clinical Nurse/ Case Managers	Clinical Education 1. Addiction – Opioid Epidemic 2. Code Blue 3. Sepsis	Non-Clinical/Professional Dev 1. Evidence Based Practice (EBP) Effective Use in Daily Practice 2. Staff Retention 3. Resiliency/Self Well-Being	•	

NURSING MAKES A DIFFERENCE

Deb McCarl M.D. Diversity Award

The Deb McCarl M.D. Diversity Award acknowledges outstanding accomplishments of physicians, staff and volunteers whose efforts foster greater appreciation, advancement and celebration of diversity and inclusiveness in the CentraCare culture and environment.

Allison Shankland, BSN, RN, Labor and Delivery, St. Cloud Hospital, was a recent recipient of the Deb McCarl M.D. Diversity Award. Shankland's nominations read, "She takes time to build relationships with patients and families of our large Somali population. She enjoys caring for the entire family.

She makes sure communication is not a barrier by ensuring interpreters are present when needed. She has learned basic Somali words to aid in relationship building.

Allison truly cares about the Somali patient population and it is evident by the wonderful nursing care she provides."







DAISY Award

The DAISY Award was established in 2000 by the Barnes Family to recognize nursing clinical skills, leadership and compassionate patient care as a means of honoring their son, Patrick, who died at the age of 33 from idiopathic thrombocytopenia purpura (ITP). The DAISY Award was created to express the profound gratitude of the Barnes Family for the care nurses provide to patients and families every day.

During May 2018 Nurses Week commemoration, St. Cloud Hospital celebrated the annual DAISY Award recognizing the nominees and the DAISY Award winners. St. Cloud Hospital established the nomination and selection criteria in alignment with organizational core values, and nurses who exemplify these values are nominated by patients, families, peers, physicians and co-workers. DAISY Award winners receive a unique, hand-carved, "Healer's Touch" statue, created by artisans from Zimbabwe that represent nursing's meaningful work.

DAISY Award Winners for 2018

Heather Blais, RN (CCU)

Paula Czech, BSN, BA, RN, PHN (Care Management)

Kallyne Harren, BSN, RNC-OB (FBC)

Amy Hennen, RN (PCS Float Pool)

Mary Hodgins, BS, RN (Adolescent Mental Health)

Damas Knese, BSN, RN, CMSRN (Bone & Joint Center)

Jennifer Lahren, ADN, RN (SUR1)

Angie Paschke, APRN, CNP (Clinical Cardiology)

Anne Pogatchnik, BSN, RN (Observation Unit)

Deb Reece, RN (Pediatric Unit)

Amanda Zierden, BSN, RN, OCN (Plaza-Medical & Oncology Clinic)

Kristin Zimmer, RN (FBC)

NURSING MAKES A DIFFERENCE

Nursing Membership on National/State Offices

Academy of Medical-Surgical Nursing (AMSN)

 Katie Schulz, MSN, RN-BC, PRISM Award Committee April 2018-April 2020.

American Association of Critical Care Nurses (ACCN)

- Rachel Appel, BSN, RN, CCRN, is a member of the AACN Beacon Award Review Panel October 2017-Present.
- Melissa Fradette, MSN, RN, CCRN, is a member of the AACN Beacon Award Review Panel July 2016-June 2018; Ambassador 2016-Present; 2019 NTI Planning Committee April 2018–May 2019; Chapter Awards Panel August 2017-November 2017.
- Teresa Jahn, APRN, CCRN, CCNS, has been appointed to serve a three-year term on AACN's Certification Corporation Board of Directors beginning July 2016.

American Nephrology Nurses Association (ANNA)

 David Walz, MBA, BSN, RN, CNN, FACHE, National Treasurer May 2017-June 2019.

American Society of PeriAnesthesia Nurses (ASPAN)

• Deborah Moengen, BSN, RN, CPAN MNDAKSPAN, Past President May 2018-June 2019.

Association for Professionals in Infection Control (APIC) – Minnesota

- Ellen Simonson, RN, MPH, CIC, President January 2018-December 2018.
- Ellen Simonson, RN, MPH, CIC, President Elect January 2017-December 2017.

Association of periOperative Registered Nurses (AORN)

 Larry Asplin, MSN, RN, CNOR, CSSM, was elected to the AORN Foundation Board of Trustees (BOT) July 2017-June 2018; member of Global Surgical Conference Education Advisory Committee July 2017-June 2018.

National Certification Organization (NCC)

• Jeanne Friebe, BSN, RNC-LRN, IBCLC, was appointed to be a content writer for the LRN (Low Risk Newborn) exam in June 2017.



St. Cloud Hospital Units Selected for American Association of Critical Care Nurses Beacon Awards

American Association of Critical Care Nurses Beacon Awards (Gold, Silver and Bronze) are given to honor individual units that distinguish themselves by improving every facet of patient care. The Telemetry, Surgical 2 and the Cardiac Care Units submitted applications for the Beacon award. Each unit group of leaders and staff nurses provided information on Leadership Structures and Systems; Appropriate Staffing

and Staff Engagement; Effective Communication, Knowledge Management and Best Practices; Evidence-Based Practices and Process and Patient Outcomes. The Telemetry Unit was recognized with the Beacon Gold Award. Surgical 2 and the Cardiac Care Unit received the Beacon Silver. Congratulations on this honor and visible commitment to patients!



Nursing Through the Years

My decision to pursue nursing started in the early 1970s while my older sister was attending St. Cloud Hospital School of Nursing. Initially I resisted the idea, not wanting to copy my sister's career choice. Now, after spending 45 years in nursing, it was one of the best decisions I've ever made.

I had no exposure to nursing prior to attending the nursing program. On the first day, when someone asked about learning how to take "vital signs," I didn't even know what she was talking about. It occurred to me, I had a lot to learn and hard work ahead.

Fast forward to 1975, the year of graduation. Nursing positions were few and far between. I was hired on the Rehab unit which turned out to be a great opportunity. Rehab is the art of helping patients reach their highest potential. I applied those skills to the rest of my nursing career.

Eventually, I transferred to a medical unit and later into the Float Pool. IV pumps were introduced instead of placing a tape on the IV bag to note hourly times. Med carts replaced med trays. Charting was done with colored pens using black on days, green for evenings and red for nights. There were no glucometers, just a "test-tape" which was dipped in urine to determine the level of sugar. Infection control measures heightened. I recall feeling clumsy starting IVs with gloves on. There were no hospitalists. On-call doctors received many late evening/night calls.

When the "head nurse" of the Float Pool left her position, one of my co-workers suggested I apply. My response was, "Are you kidding, management isn't for me." Then I thought more about it, realizing I could make a difference by supporting others to reach their highest potential. Hence, my first management position started in 1979 as Coordinator of the Float Pool. The journey has been very rewarding, working with such dedicated professionals at every level within the organization. My ultimate goal was to retire on the crest of my wave — what a ride!



Fiscal Year 2018 St. Cloud Hospital Awards

- > St. Cloud Hospital achieved Magnet designation for the fourth time!
- > St. Cloud Hospital has been named to Healthgrades' annual "America's 100 Best Hospitals" list.
- U.S. News and World Report has ranked St. Cloud Hospital as one of hospitals in the strong ratings in the handling of nine surgical procedures and chronic conditions. The annual rankings evaluated more than 4,500 hospitals for how they handled nine surgicals procedures and chronic conditions:
 - Colon cancer surgery
 - Lung cancer surgery
 - COPD
 - Heart failure
 - Heart bypass surgery

- Aortic valve surgery
- Abdominal aortic aneurysm repair
- Knee replacement
- Hip replacement

NURSING MAKES A DIFFERENCE

St. Cloud Hospital finalists for the 2017 March of Dimes Nurse of the Year Awards

Cam Atkinson, BSN, RN
Ann Backes, MSN, RN, OCN
Jennifer Burris, MA, APRN, ACNS-BC
Jenna Czech, BSN, RN, CNRN
Melissa Fradette, MSN, RN, CCRN
Kristin Gaarder, BSN, RN, CMSRN
Pat Hart, APRN, CNP
Daren Hendrickson, RN-BC, LSW
Judy Jensen, BSN, RN, OCN
Melanie Odden, BSN, RN, RNC-NIC
Diane Pelant, MSN, RN, CCRN-K
Sherri Reischl, RN, CEN
Nancy Schug, BSN, RN-BC
Kim Welvaert, BSN, RNC-MNN, CLC, IBCLC, RLC



Winners by Category:

Distinguished Nurse of the Year

Melissa Fradette (ICU)

Leadership

Diane Pelant (NICU)

Oncology

Judy Jensen (Plaza-Chemo Infusion)

Staff Nurse - General Care

Jenna Czech (Neuroscience/Spine Unit)



Magnet Steering Committee

Jennifer Burris, APRN, ACNS-BC (not pictured)
Beth Honkomp, MSN, MBA, RN, NEA-BC
Stacy Kuechle, BSN, RN, RNC-NIC
Joy Plamann, DNP, MBA, RN-BC
Vickie Ruegemer, BS
Barb Scheiber, BSN, RN, NE-BC
Jennifer Seifert, BSN, RN (not pictured)
Sherry Sonsalla, MSN, RN, RN-BC
Darla Stellmach
Jane Vortherms, MHA, BAN, RN, OCN
Roxanne Wilson, PhD, RN

Nursing Annual Report Contributors:

Ann Backes, MSN, RN, OCN
Melinda Bemis, MHA
Kristin Brandt, BSN, RN
Craig Broman, MHA, FACHE
Jennifer Burris, APRN, ACNS-BC
Kathy Collins, BSN, RN, CMSRN
Curt DeVos, BSN, RN, CNRN
Patricia Dumonceaux,
MSN, RN, PHN, CIC
Lori Eiynck
Melissa Fradette, MSN, RN, CCRN
Sharon Hoffman, BSN, RN, CNN
Beth Honkomp,
MBA, MSN, RN, NEA-BC
Melinda Jennings, BSN, RN, OCN

Sue Laudenbach, BS Tanya Mazzone, MSN, RN, CNML Erin Merdan, BSN, RN Kara Panek, BSN, RN, OCN Nathan Peterson, BA Joy Plamann, DNP, MBA, RN, BC Aleen Roehl, BSN, RN Vickie Ruegemer, BS Barb Scheiber, BSN, RN, NE-C Susan Schleper, MLIS, BA Paul Schoenberg, MBA, BSN, RN, CEN Jennifer Seifert, BSN, RN Darla Stellmach Brenda Swendra-Henry, BSN, RN, CCRN, BC

Melissa Lahn, MSN, RN-C, OB

Jane Vor therms, MHA, RN, OCN
David Waage, BS
Debbie Weber
Katherine Weber
Ann Weismann, MA
Tim Wensman
Mike Wenzel, MHA, CPXP
Roxanne Wilson, PhD, RN
Traci Zenner, BSN, RN

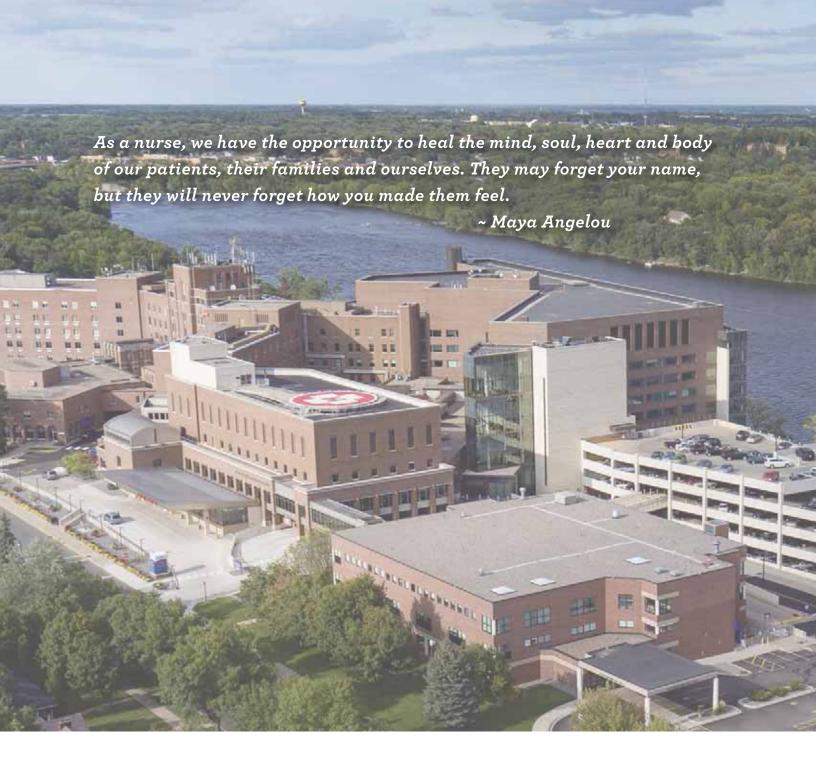
Communications Staff:

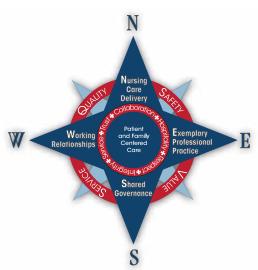
Jennifer Gracey Andra Johnson - Photographer Chris Nelson

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Jane Keppers

Jane Kluge, BSN, RN





CENTRACARE ★ St. Cloud Hospital

