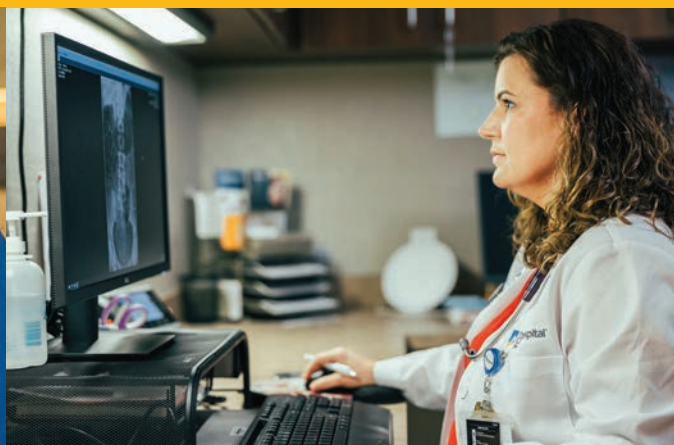




The Christ Hospital Health Network
Nursing Annual Report for Fiscal Year
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Dear Colleagues,

I hope this letter finds you all in good health and high spirits. As another eventful fiscal year comes to a close, I am immensely proud to share with you the accomplishments and successes we have achieved together as a nursing department!

This nursing annual report serves as an opportunity to reflect on our collective achievements, challenges and growth over the past year. It is a testament to the unwavering dedication, compassion, transformational leadership, exemplary professional practice, creativity and empowerment displayed by each and every one of you, as we continue to provide the highest quality care to our patients, their families and our community.

In the face of unprecedented challenges and uncertainties, our nursing team has consistently risen to the occasion, demonstrating incredible resilience, adaptability and commitment to patient-centered care. Our nurses, patient care assistants, health unit coordinators/monitor readers, radiation technologists, respiratory therapists and other healthcare professionals have been at the forefront of the battle against the ongoing pandemic, selflessly putting their own lives at risk to safeguard the health and well-being of our community.

Throughout fiscal year 2023, we have embarked on several initiatives aimed at enhancing patient outcomes, promoting health equity and advancing nursing practice. These initiatives have ranged from implementing evidence-based nursing protocols and quality improvement projects to exploring innovative technological solutions to enhance patient care delivery.

A key focus of our efforts has been the continuous enhancement of our nursing workforce. We have prioritized professional development, mentoring, and continuing education opportunities, empowering our nurses to thrive and reach their full potential. By nurturing a culture of lifelong learning and investing in our nurses' professional growth, we are not only improving patient care but also shaping the future of nursing.

It is also important to acknowledge and celebrate the numerous accolades and recognitions our nursing department has received over the past year. Our nurses have been acknowledged not only for their skill and expertise but also for their compassionate and respectful approach towards patients, their families, and their colleagues. These accolades stand as a testament to the exceptional care we provide and the positive impact we make on the lives of those we serve.

As we navigate the ever-changing landscape of healthcare, I am confident that our nursing department will continue to lead with compassion, innovation, and excellence. The challenges may be great, but so is our collective resolve to provide the highest standard of care to our patients.

I extend my utmost gratitude to each and every one of you for your relentless dedication and unwavering commitment to nursing excellence. The successes we have achieved would not have been possible without your hard work, expertise, and compassion. I am privileged to work alongside such an extraordinary team of healthcare professionals.

I invite you all to delve into this annual report, which provides a comprehensive overview of our achievements, initiatives, and future aspirations. Let us celebrate our accomplishments, recognize our growth areas, and embrace the opportunities that lie ahead as we write the next chapter of nursing excellence together.

Wishing you all continued success and a rejuvenating holiday season.

Warm regards,

Julie Holt MSN, RN, CENP
VP & Chief Nursing Officer



Nursing Workforce – Resilience & Recovery

Julie Holt RN, MSN, CENP

VP/Chief Nursing Officer

As the entire world is aware, the global COVID-19 pandemic exacerbated an already predicted Nursing shortage. The Christ Hospital Health Network, like everyone else, also experienced, and continues to experience challenges around maintaining and enhancing our Nursing Workforce.

Situation/Background

There are several factors that contribute to the current nursing shortage:

- 1. Aging population:** As the population ages, there is an increased demand for healthcare services. This, in turn, puts pressure on the nursing workforce to care for a larger number of patients with complex needs.
- 2. Aging nursing workforce:** Many nurses are nearing retirement age, leading to a significant loss of experienced nurses from the workforce. The retirement of older nurses can exacerbate the shortage as their knowledge and expertise are not easily replaceable.
- 3. Insufficient nursing education capacity:** Limited space in nursing schools and a lack of faculty members to teach

aspiring nurses can result in fewer graduates entering the profession. This contributes to a reduced supply of new nurses to fill the gaps left by retiring nurses.

4. High turnover and burnout: Nursing is a demanding profession, often characterized by long working hours, high levels of stress, and physical and emotional strain. These factors can lead to burnout and high turnover rates, further exacerbating the shortage. This has been exacerbated by the global pandemic.

5. Competition from other healthcare sectors: The demand for healthcare professionals extends to other sectors such as home healthcare, pharmaceuticals, and research, which can divert potential nurses from traditional clinical settings.

Analysis

I am happy to report that The Christ Hospital Health Network continues to lead the community in high reliability staffing, although challenges still exist. **TCHHN RN Turnover and Vacancy rates are both below the community average (Greater Cincinnati Health Collaborative, December, 2022).**

- **RN Turnover**
 - Decrease of RN Turnover to close to pre-pandemic rates (table 1)
 - Decrease of overall turnover within FY23 (table 2)
- **RN Vacancy Rates**
 - Decrease in last 6 months (table 3)
 - Some areas are still experiencing higher vacancy rates: Stepdown, Med/Surge/ & ED Base
 - Night shift has the overwhelming highest vacancy rate

Table 1

Annualized RN Turnover Five Year Snapshot

"Through a Pandemic"

Current Community Benchmark 15.8%

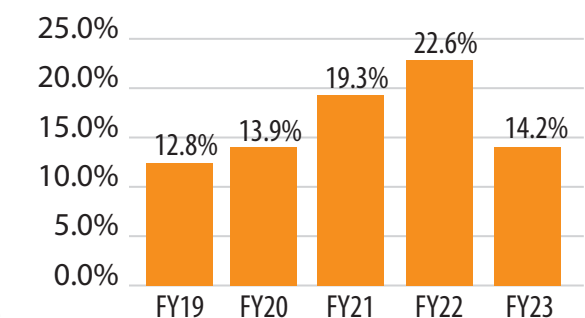


Table 2

FY22 - FY23 RN Turnover Network vs. IP, ED, OR (company1)

FY23 Network Average Annualized + 13.8% (RNs)

Company 1 Direct Care Average Annualized = 13.8% (RNs)

Community Benchmark 15.8% (6/23), National Benchmark 29.7%

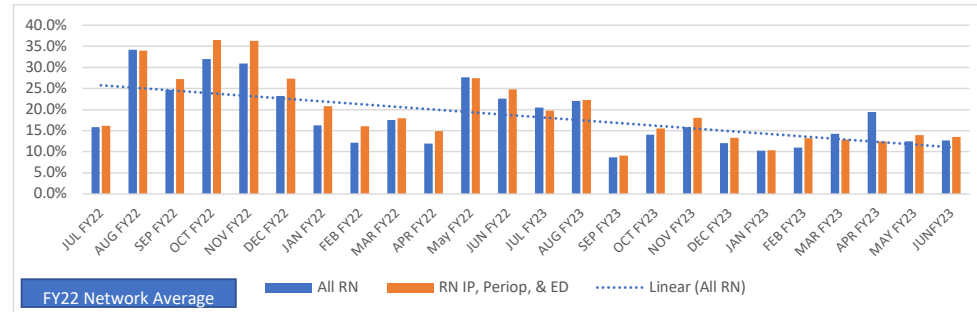


Table 3

RN Vacancy Rates & FTEs	June FY22 (CY22) Rate		June FY23 (CY23) Rate		June FY24 (CY23) Rate	
	Functional		Functional		Functional	
	Vacancy	Vacancy*	Vacancy	Vacancy*	Vacancy	Vacancy*
Critical Care	32.50%	37.60%	11.60%	23.20%	13.80%	24.50%
Stepdown	38.40%	43.80%	13.70%	32.70%	12.10%	39.00%
Women's	3.00%	19.10%	8.60%	16.10%	10.10%	20.10%
Periop	16.00%	25.30%	2.20%	13.20%	4.10%	15.60%
Med/Surg	44.00%	47.30%	27.60%	36.80%	24.70%	36.40%
ED	39.20%	43.60%	25.30%	28.10%	21.40%	35.00%
Overall	30.30%	37.10%	13.40%	25.10%	13.20%	28.00%

Recommendation/Next Steps

Our Nursing Leaders, Clinical Managers, Human Resources Department, and the Recruitment & Retention Council have been working very hard to address our workforce shortage. Below is a summary of our multi-faceted approach, doing EVERYTHING IT TAKES to be the employer of choice:

- 1. Increasing nursing education capacity:** Expanding nursing school enrollment and investing in faculty recruitment and development can help produce more qualified nurses.
 - Collaboration with The Christ College of Nursing & Health Sciences to hire as many graduates as possible through: The Academy Program, the PCA Career Pathway Program, and through a new pilot this fall w/our graduating Accelerated BSN class.
 - We hired 70+ New Graduate RNs for our summer residencies this year.
- 2. Retaining experienced nurses:**
 - **Wellness:** Overall wellness has also been the focus of an interdisciplinary team. New benefits to support mental health and parental leave were launched as well as options for gym memberships and healthy eating. Serenity spaces are located on CVSU, JSC 4, and 4 South.
 - **Re-Launch of Shared Leadership:** An important component of ANCC's Magnet Structural Empowerment concept.
 - **Internal Agency & Premium/Incentive Pay:** We will continue with these programs until our vacancy rates drop and stay below 10%.

- **Team Member Value Proposition Pilot:** In FY23 we implemented the Team Member Value Proposition pilot including Registered Nurses within the Hospital. RNs were surveyed in October 2022, asking not only what was important to them but also how TCHHN was doing in meeting the expectation. We learned lot of great information, the two most important action items:
 - Fair competitive base pay – adjustments completed in February of 2023
 - More highly differentiated merit raises - taking into consideration high performers and those that go above and beyond each day to contribute to the work environment.
 - 3. Enhancing recruitment efforts:** Continuation of Referral (current employee) and Hiring (new employee) sign-on bonuses.
 - 4. Emphasizing workforce diversity:** Promoting diversity and inclusivity in the nursing profession can help tap into underrepresented populations and expand the pool of potential nursing candidates.
- I would like to thank each and every one of you for all you do *everyday* for our patients, the community and each other! Without you our workforce would not be as well off as it is, but our work is not over. You have my absolute commitment to continue to work to restore our staffing levels to those that are budgeted, to pre-pandemic rates. I am very confident for the future.

International Nurses join TCHHN Team!

In the Spring of FY23, The Christ Hospital Health Network welcomed ten international nurses to supplement our nursing resources.

These ten individuals attended training in Texas, completed their Advanced Cardiac Life Support certification and spent additional time at a facility acclimating to healthcare in the United States, before arriving at The Christ Hospital Health Network.

Our RN Orientation team facilitated an individualized plan to address the unique challenges of international nurses. We connected our new nurses to members of our Diversity, Equity, Inclusion and Belonging Council and helped them make community connections. Our new team members will spend the next two years working beside our nurses who will mentor them and help them further grow in our profession. We hope, after their two years, they will want to become a permanent part of our family at The Christ Hospital Health Network!

While we are investing in them as team members, we are also gaining knowledge through their unique and diverse perspectives. They have been a welcomed addition as we address the staffing challenges seen not only regionally but across the nation.

OUR VISION

To be a national leader in clinical excellence, patient experience and affordable care.



From left to right: Chioma Edebeatu, Angelica Villanueva, Mercy Kerubo-Ombati, Dolma Tamang, Adenike "Ester" Adeyera (Not pictured: Maryam Tork, Yvone Nankeng, Kelvin Odaji & Evelyn Souza)



EVERYTHING IT TAKES

TO ADVANCE CLINICAL EXCELLENCE



Advanced Heart Failure Program/ Heart Link

The Advanced Heart Failure Program was the first Joint Commission Disease-Specific Certified Program for The Christ Hospital Health Network. The Heart Link Program was established in 2007 and received our initial Joint Commission Certification in 2010. Over the past 16 years, this program has grown in volume and expertise with the care we deliver. Our mission is to improve the health of our community, ensure exceptional outcomes for our heart failure population, impact the regional community with best practices and influence heart failure care nationally and internationally through research.

An interdisciplinary approach is utilized to care for our population



of primary diagnosed heart failure patients. The interdisciplinary team guides the development of the program and ensures the quality of clinical care, patient safety and customer service provided. The team also ensures that evidence-based practice and process improvement is continually evaluated and implemented. Utilizing this approach, our heart failure readmission rate for fiscal year 2023 was 14.74%, far below the local, regional and national levels for heart failure readmissions, which are typically between 23-27%.

The Heart Link Program is designed to engage patients, their families

and community support structures to empower self-management in patients living with heart failure. The program provides support across the care continuum to positively impact health outcomes and quality of life through education, follow up, resource support, patient engagement efforts and community outreach. Heart Link organizes and presents a heart failure community education event biannually, provides education for hospital staff and post hospital care providers and organizes patient engagement events. In FY23, Heart Link organized the Heart Failure Lunch and Learn and the 7 South Patient Heart Mini Marathon. Heart Link also hosts Heart Works, a group focused on providing support to community members with heart failure and their caregivers by providing a forum for peer support with meaningful tools and information needed to manage heart failure. The support group and social media platform focuses on sharing and receiving knowledge, experience and support. Topics covered include nutrition, fluid management, activity and exercise, weight management, reduction of symptoms, medications, mental health and peer support.



Have a Heart – TCHHN launches new Heart Transplant Program

A heart transplant program has been a vision for the Heart and Vascular Service Line at The Christ Hospital Health Network for many years. In late 2021 plans were put in place to build a multidisciplinary transplant team and recruit a transplant surgeon and medical director. Shelly Deyhle, BSN, RN, was named Director of Transplant Services. Dr. Robert Dowling, Transplant Surgeon and Dr. Gheetha Bhat, Transplant Cardiologist, were recruited to lead the new transplant team. The multidisciplinary team is comprised of a transplant administrator, clinical manager, transplant coordinators, a social worker, a PharmD, an APP, a financial coordinator, palliative care, dietary and multiple heart failure physicians, and specialty physicians. The kidney

transplant program has been in place at Christ Hospital for more than 50 years and served as a foundation and shared resources for this new program. The first year of the Heart Transplant Program was spent planning, hiring staff, writing policies and procedures, developing educational tools for patient and staff, orienting departments that would be working with this population and writing the document for approval. In October 2022, The Christ Hospital Health Network received approval by The United Network for Organ Sharing (UNOS) to initiate a new heart transplant program. We did our first heart transplant in November 2022 and as of July 2023 twelve patients have received the gift of life with a new heart. To date, we have received more than 100 referrals for heart transplant evaluation. Some patients that live in the Cincinnati area, that were transplanted at other centers before we had our program,

Level III NICU Opens

The Christ Hospital Health Network recently received the designation to provide Level III neonatal intensive care at the Mount Auburn campus. To receive this designation and move from a Level II NICU to a Level III NICU certain criteria had to be met including:

- Providing sustained life support
- Providing comprehensive care for infants born <32 weeks gestation and weighing <1500 grams and infants born at all gestational ages and birth weights with critical illness;
- Providing prompt and readily available access to a full range of neonatologists, neonatal nurse practitioners, pediatric medical subspecialists, pediatric surgical specialists, pediatric anesthesiologists, and pediatric ophthalmologists;
- Providing a full range of respiratory support that may include conventional and/or high-frequency ventilation and inhaled nitric oxide;

- Performing advanced imaging, with urgent interpretation, including computed tomography, MRI, and echocardiography.

To meet these criteria, our NICU nurses and respiratory therapists completed extensive education and training and partnered with Cincinnati Children's Hospital Medical Center (CCHMC) to provide the complex care that is required in the Level III NICU setting. Nurses completed approximately 124 hours of didactic education which included completion of the AWHONN NOEP modules and Level III specific instructor led education as well as 36 hours of shadowing Level III NICU nursing staff at Dayton Children's Hospital. 20 NICU RNs completed this training in preparation for the Level III transition. In addition to this training, a total of 10 experienced Level III or Level IV experienced RNs were hired as content experts so that their knowledge and expertise could be shared with existing NICU staff.

Respiratory therapists working in the NICU completed NRP certification



are now followed in our post-transplant clinic. We see approximately 50 patients in our post clinic. Along with the heart transplant team, the CVICU, CVSU, CVRU, Cath lab, Echo, operating room and the kidney transplant team have been instrumental in the success of our program and providing exceptional care to our patients.



Pictured in Photo from left to right: Dr. Gheetha Bhat, Dr. Robert Dowling (back) Terri Cecere, first heart transplant patient, George Cecere, Terri's Husband

and three phases of education in preparation for Level III; phase one was the completion of 12 hours of didactic training, phase two was the completion of 12 hours of training/shadowing in the NICU at either Miami Valley Hospital or Dayton Children's Hospital, and phase three was the completion of 3 hours of hands-on education that focused on airway management and mechanical ventilation. 15 RTs completed this training. The partnership with CCHMC provided the subspecialist support required for Level III including radiology, ophthalmology and geneticists. This partnership also allows for teleconnections between The Christ Hospital Health Network and CCHMC for advanced imaging needs which are completed at The Christ Hospital Health Network and interpreted by experts at CCHMC. The Christ Hospital Health Network secured in-house maternal fetal medicine specialists that anticipate high risk neonatal patients and collaborate with The Christ Hospital Health Network obstetricians and neonatologists.

A massive renovation took place to prepare for the Level III transition to meet spacing requirements. This took approximately 10 months, and the entire unit was redesigned and rebuilt. Special attention was given to providing the best in technological innovation from noise reducing flooring and cyclical lighting which promotes neurodevelopment in the extremely premature neonate.

Once the renovations, staff education, equipment procurement, policy review, and partnership with CCHMC was finalized, the Ohio Department of Health conducted a weeklong survey to approve the transition from Level II to Level III NICU status. This designation was granted on January 9th, 2023. With the designation approved, work is still underway to continue the growth of the Level III NICU.

For our patients, this designation means we no longer need to transfer pregnant moms that present to The Christ Hospital Health Network under 32 weeks gestation or babies that are critically ill to different hospitals. We can provide the best evidenced-based, safe quality care that our patients have come to expect.

Advancing Nursing Professionals: Empowering Growth and Excellence

In the ever-evolving field of healthcare, nursing professionals play a vital role in delivering quality patient care. Recognizing the importance of continuous learning and career development, our institution continues to support a Nursing Professional Advancement Program. This program aims to empower nursing professionals, foster their growth and nurture a culture of excellence within the healthcare organization. This past year, 40 RNs across our organization participated in this program.

Promoting Lifelong Learning:

At the core of our Nursing Professional Advancement Program is the belief that learning is a lifelong journey. This program provides nurses with a structured framework to enhance their knowledge, skills and expertise. Through a variety of educational resources, including workshops, seminars, online courses and conferences, nurses are encouraged to stay abreast of the latest developments in their field. By expanding their knowledge base, nurses can better meet the evolving needs of patients and contribute to the advancement of healthcare.

Career Advancement Opportunities:

The Nursing Professional Advancement Program not only focuses on knowledge enhancement but also provides clear pathways for career progression. It offers a range of opportunities for nurses to broaden their horizons and advance within their profession. From specialized certifications and advanced practice roles to leadership and management positions, the program empowers nurses to pursue their career aspirations. Through mentorship programs and career counseling, nurses receive guidance and support to navigate their professional journey successfully.

Fostering Collaboration and Interdisciplinary Relationships:

The program recognizes the importance of collaboration in delivering optimal patient outcomes. It encourages nursing professionals to build strong interdisciplinary relationships with physicians, allied health professionals and other members of the healthcare team. By fostering effective communication and teamwork, the Nursing Professional Advancement Program aims to create an environment where collaboration thrives, ultimately benefiting patient care.

Recognizing Excellence and Celebrating Achievements:

The Nursing Professional Advancement Program is committed to recognizing and celebrating the achievements of nursing professionals. Exceptional nurses who demonstrate outstanding clinical skills, leadership qualities, and a commitment to patient-centered care are acknowledged and rewarded. This recognition not only serves as a motivation for individual nurses but also inspires others to strive for excellence in their own practice.

The Nursing Professional Advancement Program represents our organization's commitment to the growth and development of nursing professionals. By providing educational resources, career advancement opportunities and fostering collaboration, we aim to cultivate a workforce of highly skilled and dedicated nursing professionals. Through this program, we strive to elevate the standard of nursing care, enhance patient outcomes, and contribute to the overall advancement of healthcare. To participate in our Nursing Professional Advancement program please reach out to your manager or Committee Co-Chairs Miles Johnson and Shannon Asbach.

The following nurses who participated in the advancement program were recognized at the November 9th, 2022 Professional Advancement & Nursing Celebration:

Level II

Jamie Jones- 4 South
Kaitlyn Fields- 6 South
Kate Brinck- 6 South
Molly Babb- 6 South
Samantha Bedel- 6 South
Kristen Berres- CVICU
Raquel Bohlin- CVICU
Aimee Bridges- CVICU
Reilly Dettmer- CVICU
Emma Doherty- CVICU
Brittany Dryden- CVICU
Lisa Flynn- EP Lab
Sydney James- CVICU
Brittany Lamping- CVICU
Brittany Morgan- CVICU
Cara Mueller- CVICU
Rebecca Nocheck- CVICU
Melinda Osborne- CVICU
Hannah Schneiber- CVICU
Jacqueline Tran- CVICU
Liz VanDyke- CVICU
Alyssa Wiedemann- CVICU

Level III

Adam Schiller- CVICU
Wilson Mitchell- CVICU

Level IV

Whitney Addison- CVICU
Karyn Clifford- CVICU
Jennifer Collier- CVICU
Jessica Draude- CVICU
Chris Friedrichs- CVICU
Emilee Hitt- CVICU
Stephanie Keane- CVICU
Sarah Lagamann- CVICU
Rochelle LaFever- CVICU
Lauren McGarr- CVICU
Norman Morales- CVICU
Alicia Olson- CVICU
Cassie Perdue- CVICU
Andrew Poling- CVICU
Kiersten Rush- CVICU
Leslie Shallop- CVICU
Jennifer Sweeterman- CVICU
Hannah Toler- CVICU
Lorrie Weiland- CVICU

Pursuing Excellence through Specialty Certification

According to the American Nurses Association (ANA), certification provides assurance of mastery of a body of knowledge and acquired skills in a particular specialty. In the relentless pursuit of excellence, The Christ Hospital Health Network nurses prepare for and obtain specialty certifications throughout their professional journeys. There is extensive value in specialty certification as it highlights individuals who meet and exceed nationally

recognized standards of proficiency, professionalism and a commitment to lifelong learning.

Emergency Department RNs at The Christ Hospital Health Network took their commitment to professional growth to the next level through participation in the Board of Certification for Emergency Nursing (BCEN) voucher program. Nurses prepared for their Certified Emergency Nurse (CEN) exam through self-study and attendance at a Christ Hospital

sponsored CEN exam review course!

Prior to the review course in 2022, the Liberty campus had an 11% CEN certification rate among their nurses. For 2023, they now have a CEN certification rate of 29% and an overall certification rate of 34%! Empowerment, improved self-confidence, career satisfaction and professional credibility are just a few of the benefits these nurses gained through their hard work and dedication to emergency nursing.



Main and Liberty Campus Emergency Department team members with CEN review course instructor, Jeff Solheim

Active Nurse Residency Programs During FY23

The ideas behind our Nurse Residency Programs (NRP) and Transition to Practice (TTP) program were to build competencies and confidence in our new-graduate nurse residents that reflect The Christ Hospital Health Network, Professional Practice Model and ANA Standards of Nursing Practice and Professional Performance.

With the global health emergency COVID-19 ending, marking a four-year pandemic, nursing still experiences a never-before-seen loss of qualified staff. The many restrictions that were implemented during the pandemic impacted nursing schools' clinical experiences by reducing, and for a period, eliminating clinical and role transition rotations. Historically, these clinical experiences have been the cornerstone of nursing curriculum, helping the nursing student to further develop and implement critical thinking and clinical judgment in real-

life patient experiences.

Although the impact of reduced clinical experiences and role transition can be quantified, the true impact of COVID-19 on the nursing community will not be realized for many years. It is imperative and evident that now, more than ever, our NRP and TTP programs are vital to the success of our nurse residents. In keeping with the founding principles to build competencies and confidence, the NRP program adjusted the delivery of the curriculum to meet the new demands of the new nurse graduate. One change for our critical care residency included implementing concept-based curriculum to help develop critical thinking and clinical judgment while also allowing for increased precepted time. Another

change was in the development of simulation and laboratory experiences designed to expose the nurse resident to the specific equipment, policies, procedures, and patient population we encounter.

A nurse residency recruitment video with content about each residency program was also developed and shared via social media platforms <https://vimeo.com/758876377>.

During fiscal year 23 we trained a total of:

Residency Program	Participants
Oncology Nurse Residency Program	13
Behavioral Health Nurse Residency Program	1
Med/Surg Nurse Residency Program	27
Perinatal Nurse Residency Program	26
Operating Room Nurse Residency Program	24
Critical Care Nurse Residency Program	116

100th Monarch Robot Procedure

The Christ Hospital Health Network performed its 100th milestone case using the Monarch Robotic-assisted bronchoscopy Platform to diagnose lung cancer in patients. This cutting-edge procedure does not require any incisions and can locate and biopsy very small spots in the lung that otherwise would be unreachable. The earlier the detection of cancer, the better the outcome.

The Christ Hospital Health Network was the first healthcare system in Cincinnati to use the technology. Whenever a suspicious spot in the lung is discovered, doctors now use the Monarch's tiny scopes to immediately biopsy and confirm a diagnosis. Previously, patients would have to wait months before repeating their X-rays to determine if a spot in question was growing. Our team members celebrated the achievement in December of 2022.



Patient Experience FY23 Wrap Up

As The Christ Hospital Health Network emerged from the Covid pandemic in FY23, we found that we had staffing opportunities in our direct care nursing and PCAs positions, as well as our entry-level work force (EVS, FANS). Gaps in staffing these important roles could impact delivering a world class patient experience. With our organizational patient experience goal set at a World Class Level 85-90th percentile for inpatient HCAHPS rate the hospital 9/10, we knew we had to look through a new and innovative lens to create a World Class Patient Experience.

Our strategy was as follows:

1. Nurse leaders rounding on patients once during their stay to validate their care experience.
2. Utilizing a new Patient Representative position stationed on all inpatient units to round on every patient Monday – Friday to focus visiting patient rooms daily to ensure all needs are being met. They explain patient rights and visitor guide, assist patients with meal ordering, ensure cleanliness of room and bathroom and determine if there are any immediate complaints that can be addressed while still hospitalized.

To accomplish strategy number one, nurse leaders were trained on how to round on patients to validate care and how to document the round in our electronic rounding tool called I-Round. The electronic rounding tool is monitored by hospital and nursing leadership as well as Patient and Guest Services.

To accomplish strategy number two, seven Patient Representatives were hired and oriented to their units and reported to Patient and Guest Services. They have carts that are filled with items that patients could frequently need such as games, magazines, reading glasses, various snacks for patients and visitors (as permitted) and specially designed quiet kits to ensure patients can relax and rest.

As you can see below, we were able to fully implement both strategies by Jan. 2023. Our Inpatient HCAHPS rate the hospital 9/10 reached our threshold of 85th percentile by the end of FY23.

FY23 Patient Experience Goals						
			Threshold	Target	Max	95th%tile
Outpatient Pt. Composite	FY2023 1Q	FY2023	85th %ile	90th %ile	92nd %ile	95th%
OP Testing	96.8	96.8	95.6	95.9	96.0	96.4
Cardiac Testing	96.7	97.1	95.6	95.9	96.0	96.4
Outpatient Oncology	96.8	97.4	96.7	97.2	97.3	97.8
Amb Surg & Procedures	97.4	97.4	97.1	97.4	97.5	97.8
TCHCVA	95.3	95.5	94.6	95.0	95.2	95.5
TCHMA	94.9	95.3	94.6	95.0	95.2	95.5
TCHOA	93.7	94.0	94.6	95.0	95.2	95.5
TCHMS	94.7	95.1	94.6	95.0	95.2	95.5
Urgent Cares	90.8	90.4	93.3	93.7	93.9	94.4
ED (TCH & Liberty)	86.7	86.6	90.9	92.0	92.5	93.3
Weighted target	94.7	94.9	94.4	94.8	95.0	95.4
			Threshold	Target	Max	95th%tile
Inpatient						
IP HCAHPS Rate 9-10	77.6	79.4	79.0	81.5	82.9	85.7
			Threshold	Target	Max	95th%tile
Watching						
IP HCAHPS Responsiveness	65.4	64.4	72.0	75.2	76.8	78.9
NPS Score	77.2	75.9	80.0			

Nursing Research

The roots of nursing research date back to Florence Nightingale's efforts measuring illness and infection rates of wounded soldiers during the Crimean War (1854-1856). Her findings resulted in improved conditions for the soldiers. The process of nursing research continued and has evolved over the years since then and The Christ Hospital Health Network nurses

are among those seeking to add to the body of scientific nursing knowledge. Magnet-recognized facilities are asked to share the nursing research that has taken place during the most recent Magnet designation period when submitting for initial designation or redesignation. For The Christ Hospital Health Network, any nursing research

initiatives on-going or completed during November 2020-September 2024 will be submitted in response. The table below shows the nursing research breadth and depth and that nursing research is alive and growing at The Christ Hospital Health Network.

2023 Magnet Application Manual Research Table Instructions:

1. Complete Row 3 (insert organization name).
 2. Complete columns B - Q for all completed and ongoing nursing research studies conducted in the application organization within the 48 months prior to document submission.
- NOTE:** Applicant organization must have a minimum of two (2) completed and one (1) ongoing nursing studies at the time of document submission.

Application Organization Name:	The Christ Hospital Health Network									Study Scope			Study Types			
	Nursing Research Study Title (Do not include EBP, Performance Improvement, or Quality Improvement Projects)	SOE Identifier	Review Process: Full IRB Review or Exempt Determination	IRB Review Method (If Applicable) Full Expedited or Exempt	Date Approved (mm/dd/yyyy)	Study Status: Ongoing or Completed	Date Study Completed (mm/dd/yyyy)	Name(s) of Organization's Nurse PI, Co-PI, &/or Site-PI for each study (must be employed by the organization)	Role of Organization's Nurse(s) PI, Co-PI, or Site PI	Credentials	Internal to a Single Organization	Multiple Organizations within a System	Independent Organizations Collaboratively	Replication	Qualitative	Quantitative
1	Clinical Nurse Manager Fatigue and its Personal and Professional Impact (#20-13)			Expedited	2/27/2020	Complete	8/2/2021	Amy Yarbrough	Site PI	BSN, RN			X		X	
2	Reducing Racial Implicit Bias in Healthcare Providers (#21-18)			Exempt	2/26/2021	Complete	11/2/2021	Shelby Clark	PI	DNP, RN	X				X	X
3	Retrospective Analysis of Total Bilirubin Level in Patients Admitted to the Cardiovascular Intensive Care Unit with Cardiogenic Shock (#21-28)			Expedited	6/14/2021	Ongoing		Katie Liebing	Co-PI	RN, MSN, CLN	X					X
4	Vascular Complications in Mechanical Circulatory Support Patients: A Retrospective Review (#21-12)			Expedited	6/17/2021	Ongoing	2/8/2023	Katie Liebing	Co-PI	RN, MSN, CLN	X					X
5	Back to the Basics: Using PEEP Rounding Simulations to Create a Caring Environment for Patient During COVID-19 (#21-37)			Expedited	7/8/2021	Complete	10/8/2021	Christy Miller Julie Holt Regina Shupe Shannon Asbach	PI Co-PI Co-PI Co-PI	PhD, RN MSN, RN, CENP DNP, RN MBA, BSN, RN, CPN		X				X
6	Buffering Effect of Resiliency & Compassion Satisfaction on Nurse Manager Burnout, Compassion Fatigue, and Turnover Intentions during COVID-19 Pandemic: A Quantitative Approach (#21-02)			Expedited	7/16/2021	Complete	10/8/2021	Christy Miller Julie Holt Regina Shupe Shannon Asbach	PI Co-PI Co-PI Co-PI	PhD, RN MSN, RN, CENP DNP, RN MBA, BSN, RN, CPN		X				X
7	Hospitalized Older Adult Fall Risk Perceptions Compared to Risk Assessment Scores (#22-019)			Expedited	5/24/2022	Closed	4/7/2023	Kaneesha Ogle	PI	MSN, MSW, LSW, RN	X					X
8	Impact of Restorative Break Education on Staff Registered Nurse Burnout (#22-082)			Expedited	1/18/2023	Complete	6/29/2023	Catherine Nyamayedenga	PI	BSN, RN	X				X	X
9	The Effect of Role Transition Placement on New Graduate Nurse Confidence Levels (#22-083)			Exempt	1/23/2023	Ongoing		Alicia Cole-Hammon	PI	BSN, RN	X				X	X
10	RN Team Member Value Proposition (#22-094)			Expedited	2/27/2023	Ongoing		Carol Tierney Julie Holt	Co-PI Co-PI	PhD, RN, NLA-BC MSN, RN, CENP		X			X	X
11	IN DEVELOPMENT Agitated Behavior Scale							Lisa Jarmon	Site-PI							
12	End of Life Education Communication (#23-069)							Mary Schneider	PI	MSN, RN	X					X
13	TCHN Internal Agency Retrospective Review (#23-073)							Carol Tierney Julie Holt Becky Daniels	PI Co-PI Co-PI	PhD, RN, NEA-BC MSN, RN, CENP MSN, RN, NE-BC	X					X

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EVERYTHING IT TAKES

TO CELEBRATE CLINICAL EXCELLENCE



Ryan Michelle Livingston Award FY23

The Ryan Michelle Livingston award recognizes a registered nurse who exemplifies the standards and quality of care Ryan brought each day to her patients. Any RN can nominate another RN for this award and a committee of nurses select a winner.

On September 3, 2004, Ryan tragically lost her life in a motor vehicle crash. In her memory, the Ryan Michelle Livingston Professional Nursing Award was established. Ryan was an RN for only five years, yet each day she worked as an RN, she was a true patient advocate, team member and a competent caring nurse. Juanita Schackmann, Ryan's colleague on 6 South, created this

award in her memory. It has been given annually ever since.

For a nurse to be considered for this award, they must:

- present oneself in a professional manner
- consistently provide high-quality patient care
- consistently strive to maintain high standards of care
- be a supportive team member
- be willing to learn new skills
- be willing to share knowledge and be a positive mentor and
- demonstrate pursuit of excellence in practice



Holly Ammann, Ryan Michelle Livingston Winner and Julie Holt, Chief Nursing Officer

The following were nominated for the 2022 Ryan Michelle Livingston award:

- | | |
|---|------------------------------------|
| Shelia Hickey- Cardiology | Kurt Davis- Cancer Center |
| Allison Ramke- Women's Health | Danielle Jackson- Labor & Delivery |
| Holly Ammann- Cancer Center - WINNER | Olivia Coombs, MICU |
| Kathleen Gorman- Labor and Delivery | Rachel Bohlin, CVICU |
| Liz Diener- 6 South | Laura Benton, JSC ICU |

Congratulations to each nominee!

Being nominated for this award by your colleagues is indicative of your incredible nursing care, teamwork and dedication. We are grateful to have each of you practicing at The Christ Hospital Health Network!

The Tulip Award

The Tulip Award was created here at Christ Hospital in 2016 by the 6 South Unit Council. The nurses on the council knew how much receiving a DAISY nomination and wearing a DAISY pin meant to them. They recognized that their para-professional colleagues deserved the same recognition and gratitude. After many months of debate, which got surprisingly heated at times, the council decided on the Tulip.

Like the early blooming perennial tulip, para-professionals like PCAs, HUCs, and Techs, are often the first person our patients meet- and leave a lasting impression. These paraprofessionals come back into our patients' lives throughout their visit- reliably returning when they are needed most.

Soon after 6 South created the Tulip Award, it went network-wide, with every department agreeing that their paraprofessionals deserve appreciation and recognition.



TULIP AWARD RECIPIENTS

Name	Department	Month
Mackenzie Hudson	JSC 4/5	June 2023
Stefan Burnett	2 West	May 2023
KJ Glass	5 South	April 2023
Brady Eckert	ED-Main	March 2023
Carolyn Baker	Postpartum	February 2023
Michael Vasarhelyi-Pearce	5 South	January 2023
Cidney Schlesinger	CVSU	December 2022
Megan Dunn	2 South	November 2022
Nancy Diaz	Postpartum	October 2022
Monique Chambers	5 South	September 2022
Liz Slawnyk	2 South	August 2022

Lifesavers of the Month

The Lifesaver of the Month program recognizes employees of The Christ Hospital Health Network who demonstrate Target Zero "The Journey to High Reliability" by making it a priority to deliver high-quality patient

care in a safe environment. Any employee, volunteer, or student who identifies, prevents or corrects a safety concern can be nominated. Lifesavers of the Month receive a Lifesave lapel pin, certificate of recognition and an

announcement with photo display on MyTCH and Yammer while being recognized during monthly leadership conference meetings.

Congratulations to following FY23 Lifesavers of the Month!

- **July 2022** - Hanna Schreiber, RN CVICU
- **August 2022** - Kelsey Nesbitt, Lab & Tammy Pater, Lab; Lawanda Byrd, Ultrasound
- **September 2022** - Jennifer Brown, RN, Nursing Supervisor
- **October 2022** - Patricia Spencer, TCHMA Scheduler
- **November 2022** - Julio Perez, Safety & Security
- **December 2022** - Kelsey Washburn, Social Work
- **January 2023** - Julie Myrick, Supervisor, Diagnostic Radiology; Mandy Strunk, Admitting & Registration
- **February 2023** - Bobby Daugherty, RN, 2 West/Rehab; Cancer Center team (Amber Nolan, Admitting & Registration), Emily Smith and Wendy Duesing, RN Navigators, Lori Gasperec, RN Medical Oncology, David Hopper, Jr, Manager Medical Oncology and Dr. Robert Cody, Medical Oncology
- **March 2023** - Lauren (Lola) Barlag, PCA, 4 West; Alyssa Dunn, HUC, CVSU
- **April 2023** - Brenda Martin, RN, 7 South; Taylor Siekman, RN TCHP Surgical Oncology & Ann Perkins, Authorization and Cost Est Specialist
- **May 2023** - Eddie Gorman, RN CVSU; Rayann Dethlefs, PCA Safety Operations Center
- **June 2023** - Judy Smiley, PCA Safety Operations Center; Jayme Greene, Surgical Assistant JSC OR



Bobby Daugherty RN won the January 2023 Lifesaver Award 2 West

The Daisy Award

The DAISY Award is an international program that rewards and celebrates the extraordinary compassionate and skillful care given by nurses every day.

The Christ Hospital Health Network is proud to be a DAISY Award Partner, recognizing one of our nurses with this honor monthly.

About the DAISY Foundation

The DAISY Foundation was established in 1999 by the family of J. Patrick Barnes, who died of complications of the autoimmune disease Idiopathic Thrombocytopenia Purpura (ITP) at the age of 33. During Pat's 8-week hospitalization, his family was awestruck by the care and compassion his nurses provided not only to Pat, but to everyone in their family.

"We were awed by the way the nurses touched him and spoke with him, even when he was on a ventilator and totally sedated. The way they

informed and educated us eased our minds. They truly helped us through the darkest hours of our lives, with soft voices of hope and strong loving hugs that to this day, we still feel.

By creating the DAISY Foundation, our goal was to ensure that nurses know

DAISY AWARD RECIPIENTS

Name	Department	Month
Hannah Whitford	4 West	June 2023
Daniel Beyer	MICU	May 2023
Annie Moore	6 South	April 2023
April Gravitt	Labor & Delivery	March 2023
Megan Loukinas	ED Main	February 2023
Michele Clark	Labor & Delivery	January 2023
Tara Balzhiser	Labor & Delivery	December 2022
Stephanie Mitchell	PACU	November 2022
Tiffany Embry	CVSU	October 2022
Kassey Arnett	3 South	September 2022
Deann Ragsdale	Labor & Delivery	August 2022

how deserving they are of our society's profound respect for the education, training, brainpower, and skill they put into their work, and especially for the caring with which they deliver their care."



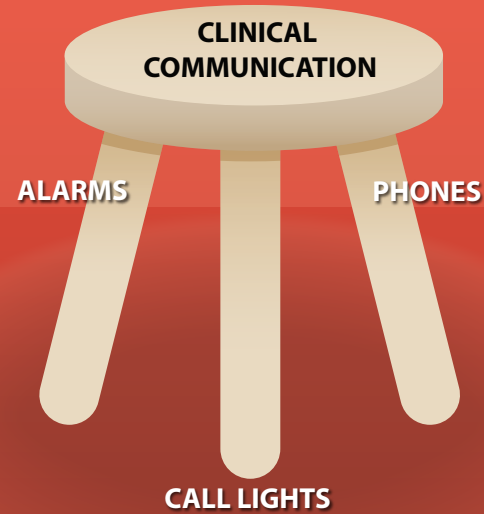
EVERYTHING IT TAKES TO ENSURE SAFETY



The Communication Strategy Three-Legged Stool Install Completes!

As we wrap up FY23, we move into a new era of updated call light systems, iPhones and Alarm Management technology across The Christ Hospital Health Network.

This vision was started in 2019 by Julie Holt, our Chief Nursing Officer, who wanted highly reliable platforms to support our clinical teams. Our vision was to have a safe effective way to communicate in real-time without the fear that no one would be alerted when the bedside clinician needed help the most. But with some equipment that was over 30 years old---the systems became unreliable!



Out with the OLD Devices:

In with the NEW Devices:

Rauland Nursecall Devices



Today we have installed approximately 1,000+ pieces of hardware and tested 27 alarms per patient room! Not only do we have reliable technology to get the right help at the right time, but we can also use data to tell our stories. Hospitalized patients have higher acuity and are more complex these days. With the data from technology, we can demonstrate the impact on our clinical teams by seeing the trends in call lights pushed, alarms dispatched and frequency of clinical communication involving the patient. We are sending more than 600,000 secure chat messages a month with more than half attached to the patient chart, which leads to faster access and improved communication.

Our next phase will be implementing clinical team member locating badges which will open a new world of improving flow of movement throughout the organization and alerting in areas that traditionally did not have the capability.

Alert and Alarm Committee Makes Positive Change

We know alarm fatigue has serious consequences for clinicians and patients. To effectively manage alerts and alarms, it is necessary to have an interdisciplinary team that will address and set standards for managing these alerts and alarms. We are fortunate to have such a team at The Christ Hospital Health Network. During FY23, this team has been meeting monthly to determine system upgrade timelines, review requests to optimize the alert/ alarm systems, prioritize new alarms and to bring the voice of the bedside clinician to the organizational-level decision-making team.

Two recent examples of positive change were related to Fall alarm dispatching behavior and alarms alerting to break and alcove areas on the nursing units. Clinical Managers Shatica English and Mary Heidemann brought

forward the request for review to the committee because of conversations with their teammates.

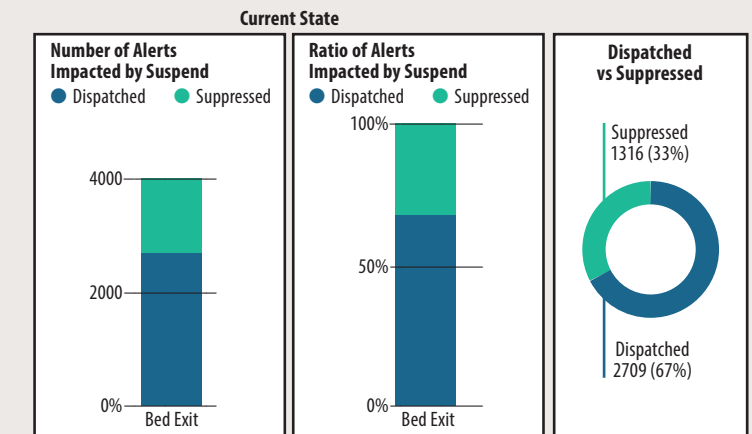
Bed exit alarms are intended to prevent falls by either redirecting the patient attempting to get out of bed or sending staff to the bedside quickly. These account for our most frequently dispatched alarms. Prior to the request made, the bed exit alarm would dispatch to nurses' mobile phones often after the bed exit alarm had self-corrected leading to alarm fatigue. Using the data and our pilot units, we were able to determine we could suppress the alarm dispatch for 10 seconds giving the bed exit the opportunity to self-correct without negatively impacting our fall rates. Shortly thereafter we rolled this suppressed behavior out to all nursing units.

Our second success was related to decreasing audible non-critical alarms from alerting in break rooms and alcoves. Mary and Shatica brought forward that blood sugar alarms were alerting in nursing units' break room... on further review-there were many more! With the average of 73,000 alarms being dispatched over a month, the amount of interruptive behavior while attempting a break became unbearable. The Alert and Alarm committee reviewed the alarms and decided to decrease the types that would alert to a break or alcove area. Since March 2023, we have suppressed 250,000+ audible alarms into the break and alcove.

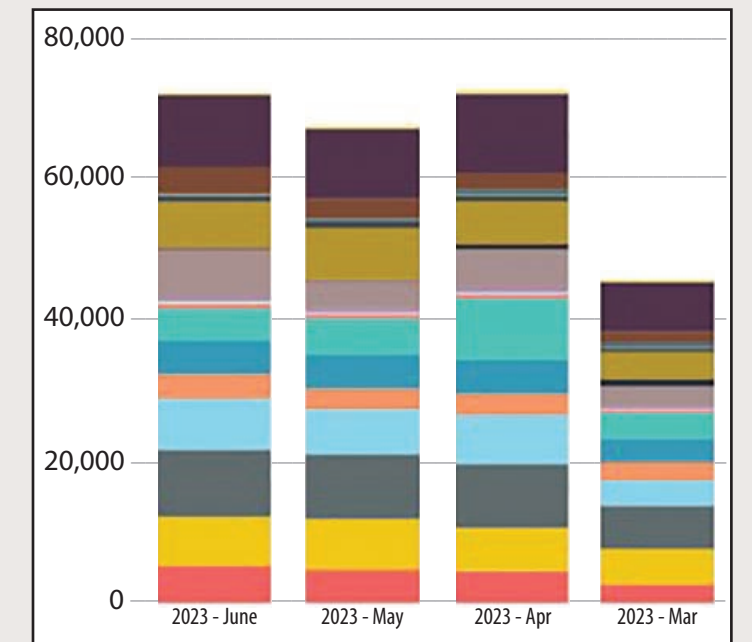
Combined 3 South & 6 South Trial

Date Range: 2/7/2022 - 3/6/2022
Hospital, Unit Name: Multiple Selections
Alarm Source: All

33% Reduction in bed exit alarms to staff



We are committed to reducing harm associated with clinical alarm systems and have made it a priority for this group. With the help of the bedside clinicians and the clinical managers who support those teams, we will continue to identify and address alarms that can be disabled or changed, monitor response to alarms and validate each alarm has the appropriate settings and operations.



The Christ Hospital Health Network Implements New 2-Bin Kanban System

The Christ Hospital Health Network launched a new 2-Bin Kanban System during FY23 with support from our Chief Nursing Officer, Julie Holt RN, MSN, CENP and Paul Tallen Executive Director of Supply Chain. The Kanban inventory management system is used as a supply stock control method in many industries, not just healthcare. Having access to needed supplies to care for your patient is imperative to our nursing workforce to provide optimum patient care. Our nursing units were surveyed prior to the

implementation of the Kanban system to get an accurate report on how they rate the stock availability in their home departments. These surveys supported the need for our organization to initiate a system that would help maintain constant supplies for our nursing staff. The 2-Bin Kanban was rolled out to our first units in December of 2022 and the journey to improve our patient care by facilitating the continued supply of medical supply inventory is thriving at The Christ Hospital Health Network!

Fall Prevention Work

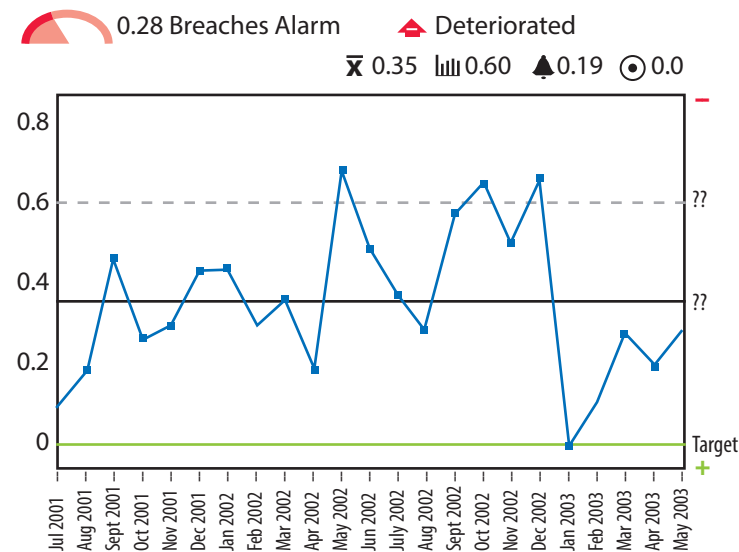
Here at The Christ Hospital Health Network, we are constantly working towards Target Zero with our fall prevention program. A large part of our fall prevention program is our predictive analytics (PA) for falls in EPIC. Every patient, at point of entry, receives a fall risk score while the PA-Fall Risk tool learns the patient for the first 12 hours. The PA-Fall Risk score updates every four hours alerting the staff to whether the patient is a low, medium or high fall risk. The fall risk score then triggers a banner in EPIC visible to all staff.

Every week, managers collaborate with Risk Management & Patient Safety to conduct fall analyses of most recent patient falls to identify any trend or opportunity for improvement. The multidisciplinary teams work through Small-Tests-Of-Change (STOC) to continue to target zero falls. One example of a STOC taking a proactive approach to prevent falls began during FY23. A team member within the Safety Operations Center (SOC) reviews patient records for those patients who have been identified as a high fall risk. The SOC team member assesses for the high fall risk patients: is the bed alarm being utilized as well as other fall

prevention interventions or is a refusal form signed? The SOC team member also assesses if there is a fall care plan added to high fall risk patient's medical record.

Our sitter camera program has grown from 10 cameras to 12 cameras in June 2023 giving us improved night vision in patient rooms. Thank you for doing everything it takes to help us achieve ZERO FALLS WITH INJURIES!

Falls with Injury Rate per 1000 Patient Days by Nursing...



Bath Basin Elimination

At The Christ Hospital Health Network, we are continuously working together on initiatives that focus on 'Zero Harm' for our patient populations. An investigation of clinical practices revealed opportunities to provide more consistent indwelling catheter care, hygiene practices, bathing, incontinence care and peri care. Ashley Quesenberry BSN, RN, 5 South, led a Transition to Practice project that further revealed bath basin contamination - an independent nurse-led study exposed 65% of The Christ Hospital patient bath basins were colonized with bacteria, and astonishingly 23% were colonized with multi-drug resistant organisms (MDROs).

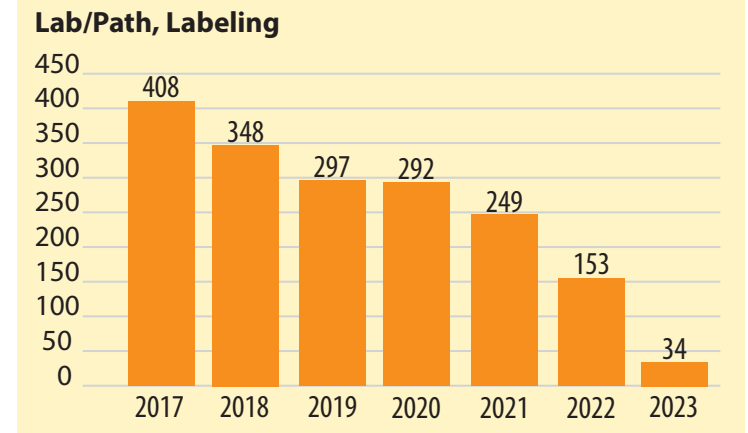
Due to this finding, we rapidly engaged our CAUTI, CLABSI and HAPI workgroups. Collaboration between these groups led to an agreement to eliminate the use of bath basins at The Christ Hospital Health Network and the development of standardized hygiene care across all inpatient units with the goal of standardizing our hygiene practices reducing the risk of both pressure injuries and infections. Our teams successfully rolled out our standardized hygiene products just before FY23 began. Nursing continues to evaluate our clinical practices as they relate to our relentless focus on key quality and safety indicators!

Lab Labeling Project

In the spirit of continuous improvement, enhanced patient safety, and overall workflow efficiency, a Christ Hospital subcommittee within the Blood, Lab, and Tissue Committee committed to decreasing lab labeling errors. This subcommittee consisted of the collaboration among nursing, lab, IT services and risk management. Through extensive analysis of network-wide lab errors, it was decided that nursing services would adopt a new technology within EPIC to require barcode scanning. This enhancement would ensure both patient and labeling accuracy.

By utilizing the failure modes and effects method to identify opportunities and workflow concerns, the committee created a lab labeling process in conjunction with new technology to drive positive results. Starting in calendar year 2021, with an identified 249 labeling errors, the implementation of lab barcode scanning decreased errors to 154 in calendar year 2022 and only 34 through August 2023.

The determination of this subcommittee and the safety focused culture of bedside care givers has allowed this project to be a tremendous success and, most importantly, decreased the risk of patient harm resulting from multiple lab draws.



Early Mobilization

For the past year, a nursing and therapy collaborative initiative took place focusing on enhancing patients' mobility while in the hospital. This initiative produced an algorithm created to show step-by-step directions on how to mobilize patients. The algorithm acts as a real time guide to encourage safe and essential mobilization of patients. The initiative encouraged increased communication between nurses, patient care assistants and therapy staff. This communication is critical to fostering these team members in their support of overall mobilization of patients.

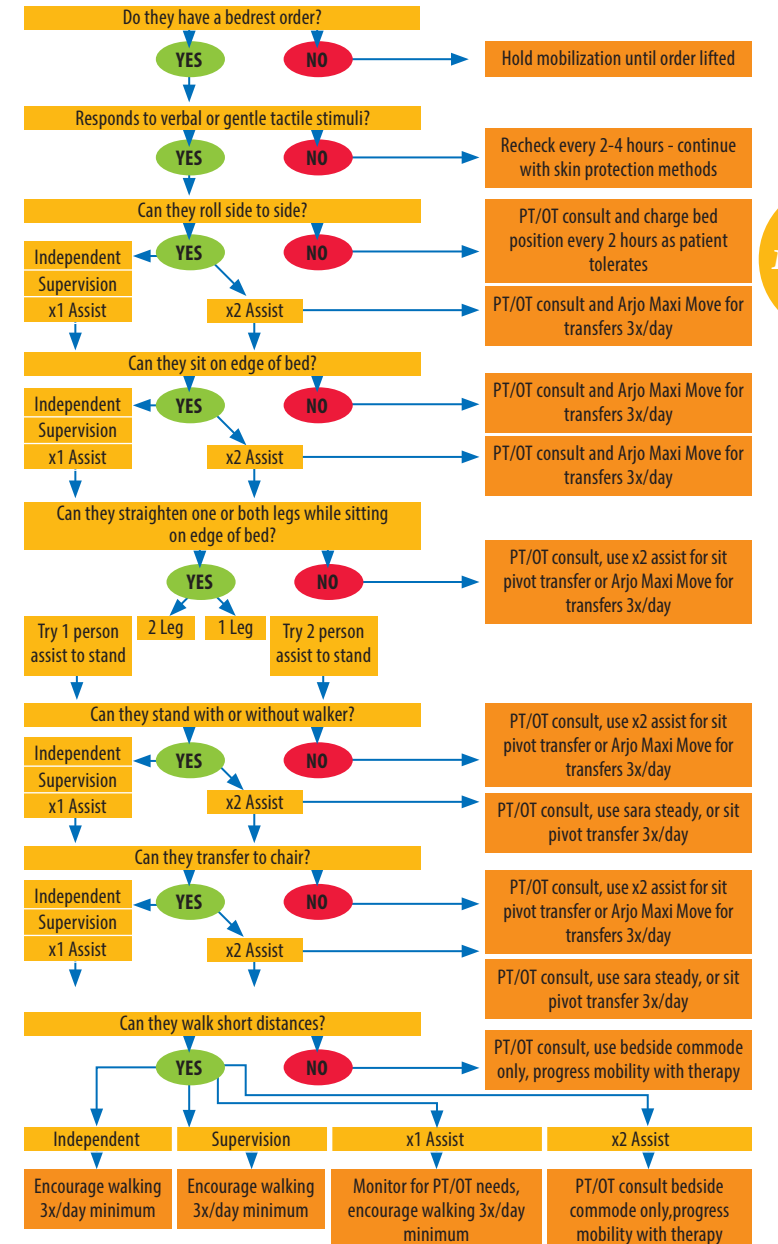
To assist in easily applying this algorithm, tools and training have been created.

TOOLS: The tools available are a badge and a wall cling. The wall cling will be posted in all nursing stations for a quick, easy reference. Making these tools readily available empowers patient care assistants and nurses to confidently facilitate mobility.

TRAINING: The therapy staff conducted training on multiple nursing units. This training focused on staff education, while providing hands-on demonstrations of transfer techniques and the screening criteria in the algorithm. This training is also provided upon request during unit specific education days. Additionally, to optimize early success, any patient care assistance new to healthcare will receive the same in-person training during onboarding.

We are pleased that all hospital staff, new and experienced, have this necessary tool in their toolbox. We are confident that this will position them for a more successful healthcare career that directly fulfills The Christ Hospital Health Network mission of providing exceptional outcomes for our patients.

Early Mobilization Assessment Algorithm





EVERYTHING IT TAKES TO CARE FOR OUR TEAM



The Lamp Storytelling Comes to TCHHN!

Each of us has a story within us to tell. During FY23, The Christ Hospital Health Network (TCHHN) brought in Nicole Ruttencutter, BSN, RN-BC, who founded The Lamp Storytelling in 2020, and Anna Lee, MSN, RN, CCRN, to show TCHHN nurses the power and inspiration stories can have on us as individuals and as an organization. The Lamp name comes from Florence Nightingale's reputation as "The Lady with the Lamp!" Nicole created a unique event combining nurses and storytelling. With Nicole and Anna's coaching, nurses attend workshops to learn more about the art of storytelling. These workshops enabled participants to stand in front of an audience to tell their stories about being on the frontline in healthcare, a memorable patient or why they got into nursing. These stories may

be funny, or poignantly sad. They cause nurses who hear these stories to remember why they were called to be a nurse! "The association between nursing and storytelling, in its simplest design, is about forming human connections to heal," Nicole said. Nicole includes science as a foundation for the need to tell our stories. Science has revealed that when we listen to a person present data and information, two parts of our brain are activated. When we hear a story with characters and a narrative, six parts of our brain respond—and, according to a 2010 study co-directed by Princeton University neuroscientist Uri Hasson, our brain waves start to synchronize with those of the storyteller, putting both parties on the same page.

Patrick Kokotek, BSN, RN, MICU, and Kristin Kaser, BSN, RN, CRRN, from the Acute Rehab Unit, went through The Lamp storytelling workshops and told their stories during a celebration of nursing event in the auditorium at TCHHN on November 9. A second storytelling event was held May 8 during Nurses Week. Cameron Meeks, RN, SICU, Charla Payne, BSN, RNC-MNN, IBCLC, Manager Liberty Birthing Center, Tiff Schmitz, MSM, BSN, RN, Liberty ED, Gina Witko, MS, BSN, RN, Associate Chief Nursing Officer and Carol Tierney, PhD, RN, NEA-BC, Associate Chief Nursing Officer attended the workshops and told their stories during a Nurses Week celebration.

Each TCHHN Storyteller was proud to have the opportunity to stand in front of colleagues and tell 'their story'!

18 Enhanced Recovery Opioid Sparing Initiative

As part of our outpatient Total Joint program, a multi-disciplinary team, including a group of nurses, anesthesia and surgeons, established a goal that focuses on opioid sparing initiatives in Perioperative. The objective is to enhance patient experience, reduce costs and reduce the use of opioids.

The Perioperative nursing staff play a key role in driving this initiative. We have been focused on a couple of surgeons as the Small Test of Change (STOC) and will continue to roll out as a standardized approach for any patient undergoing Total Joint Replacement in the future. The pre-op nurses provide standardized education to patients undergoing total knee and hip replacements. The education is to reiterate what the patient was taught in their pre-operative consultation. The nurses then discuss the plan and establish a reasonable goal, individualized for each patient and document that information in the pre-operative navigator. The Acute Pain Management team then

assumes pre-op care for the patient and provides thorough education on the type of peripheral nerve block the patient will be getting and what to expect before, during and after the procedure. They make sure to answer any questions and set clear post-operative expectations. They obtain procedural consent and then assist the anesthesiologist with the ultrasound guided block and spinal anesthesia (if applicable). These steps are critical to the success of helping patients achieve a tolerable post-operative pain level. Although the primary focus was orthopedics, the team has continued to work along anesthesia to grow and evolve this program amongst all different surgical specialties. This small group of seven nurses had a record-breaking FY23. They assisted with 9,966 blocks (this includes all types of regional blocks, not just peripheral), which is no small feat. To put the volume growth into perspective, in FY22, they assisted with 8,031 blocks. In the Post Anesthesia Care Unit

(PACU), most patients who have received a peripheral nerve block, along with a spinal, report more tolerable or minimal to no pain, in the immediate post-op phase. The PACU staff report that they are administering significantly less and often no opioid narcotics. In phase two recovery, our previous education focused on staying "ahead" of the pain with the opioid prescription. We would educate patients to go ahead and use one of their prescribed opioid pills about one-two hours prior to the regional block wearing off. Our education now is centered around a multi-modal approach that includes ambulation, ice, elevation and non-opioid pain relievers. Our instructions are to only use the prescribed opioids sparingly and only if the pain is not tolerable with the other treatments. We do believe that this has improved patient experience and played a role in the Joint and Spine center outpatient Press Ganey exceeding our target at the 90th percentile.



Tiff Schmitz, Gina Witko, Anna Lee, Charla Payne, Julie Holt, Cameron Meeks and Carol Tierney



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