



To my colleagues in Company Colleagues in Colleagues in Colleagues in Colleagues in Coll

As Woman's Senior Vice President of Patient Care and Chief Nursing Officer, I feel an enormous sense of pride in sharing with you the 2015 Nursing Annual Report. This report includes important accomplishments of Woman's nurses and patient care team, who provide exceptional care, centered on our patients, every day.

The annual report highlights our continuous journey to improve everything we do. It is presented in accordance with the five components of the Magnet model: (1) Transformational Leadership, (2) Structural Empowerment, (3) Exemplary Professional Practice, (4) New Knowledge, Innovations and Improvements, and (5) Empirical Outcomes.

Woman's has been recognized as a Magnet designated organization since 2006, and the power of Magnet continues to impact nursing at Woman's in a meaningful way. The ongoing pursuit of excellence, using the Magnet model as a guide, has resulted in numerous improvements in patient care, patient experience, and the nurse work environment. Our third Magnet designation is on the horizon in 2016, and I hope you will join me in pursuit of this prestigious designation that demonstrates Woman's nursing excellence.

Thank you for all you do to provide extraordinary experiences for our patients and families each and every day.

Sincerely, Patricia Johnson, CNO



As the nation's only freestanding nonprofit hospital dedicated to the care of women and infants, Woman's is nationally recognized as a leader in its field. Since opening its doors in 1968, Woman's has grown to become one of the largest women's specialty hospitals in the nation, offering an array of services to meet the unique needs of our patients across the lifespan. Though best known for obstetrical and neonatal services, Woman's also offers surgical and oncology services; therapy/rehabilitation; audiology services; imaging/breast care services (including community outreach); pathology services, including clinical and molecular biology/genetic research; fitness and nutrition services; bariatric and cosmetic services; metabolic health; and a variety of other programs that meet the needs of our community.



We believe

TO IMPROVE THE HEALTH OF WOMEN AND INFANTS

we believe

BY 2020, Woman's will be the national leader in women's and family-centered care, achieved through innovation, evidence-based practices, and strategic partnerships.



RESPECT

Accepting and appreciating differences

INNOVATION

Creating and embracing change to improve outcomes

COMPASSION

Showing kindness to and caring for one another

EXCELLENCE

Being the best at what we do



recognizing excellence



Recognizing Excellence and Celebrating Success

The Baton Rouge District Nurses Association (BRDNA) holds an annual "Celebrate Nursing" banquet that honors nurses who have made significant contributions to the community, healthcare, and/or the nursing profession. Six Woman's nurses were recognized with 2015 BRDNA "Celebrate Nursing" awards:

- Cheri Falgoust, BSN, RN, Labor & Delivery
- Angela Hammett, RNC-OB, ICCE, LCCE, Perinatal Education Coordinator
- Tammie Lejeune, RN, Mother/Baby
- Evelyn Lenox, BSN, RN, Imaging Services
- Karrie McCoy, BSN, RN, CCRN, Adult ICU
- Tracy Nicolosi, BSN, RNC-NICN, NICU



Tracy Nicolosi, Tammie Lejeune, Angela Hammett, Karrie McCoy and Evelyn Lenox. Not pictured: Cherie Falgoust.

Two Woman's nurses were honored at the 14th Annual Louisiana Nurses Foundation Nightingale Awards. Darcy Gann Bush, MSN, RNC-NICN, NE-BC, was named Registered Nurse Mentor of the Year and Wendy Singleton, MSN, APRN-BC, ANP, was recognized as the Clinical Nurse Researcher of the Year. Other nominees included Paula Delee, BSN, RN, OCN, for Clinical Educator of the Year, Dana Vidrine, BSN, RNC-MNN for Nursing Administrator of the Year, and Tanya Johnson, BSN, RN, for Registered Nurse of the Year.



Jena Aucoin, Mary Ann Smith, Paula Delee, Patricia Johnson, Wendy Singleton, Cheri Johnson, Staci Sullivan, Darcy Gann Bush, Karrie Delise and Cathy Griffiths. Not pictured: Dana Vidrine and Tanya Johnson.

Recognition for Community Health Efforts

Woman's, along with four area hospitals and several community organizations, received a 2015 NOVA award from the American Hospital Association. The award was given in recognition of Woman's work with the Mayor's Health City Initiative (MHCI). While one hospital can make a difference, a collaborative effort can generate a significant positive impact on the health and wellness of our city. The hospitals worked in partnership to develop a community-wide health needs assessment and action plans designed to address the city's primary health concerns: obesity, HIV and other sexually transmitted diseases, mental health and substance abuse, and overuse of emergency departments.

Woman's role in the MHCI focuses on preventing mother-to-child HIV transmission; providing dignified, professional care to female victims of sexual assault; increasing breast-feeding initiation and education; supporting a healthier community through promotion of diet, exercise and preventive healthcare; and educating women on a healthy pregnancy.



Eric McMillen, CEO, Ochsner Medical Center – Baton Rouge; Teri Fontenot, President and CEO, Woman's Hospital; Mark Slyter, CEO, Baton Rouge General Medical Center; Scott Wester, President and CEO, Our Lady of the Lake Regional Medical Center.

recognizing excellence

Press Ganey Guardian of Excellence Award

Woman's was named a 2015 Guardian of Excellence Award Winner by Press Ganey Associates, Inc. This award recognizes top-performing healthcare organizations that have consistently achieved the 95th percentile or above of performance in patient experience for 12 consecutive months. The Guardian of Excellence Award is a nationally recognized symbol of achievement from an industry leader in measuring, understanding, and improving the patient experience.

Press Ganey is a leading provider of patient experience measurement, performance analytics and strategic advisory solutions for more than 22,000 healthcare organizations across the continuum of care worldwide.

Some of the practices and initiatives that led to this achievement include patient rounding, noise reduction, education about medications, improved care team communication, food service efficiency, improved signage and wayfinding, and wait time reduction.



Other Accomplishments

- "Family Favorite Birthing Hospital" by Baton Rouge Parents magazine readers for the second consecutive year
- "Top Ranked Hospital" by Louisiana Life magazine
- "100 Hospitals With Great Women's Health Programs" by Becker's Hospital Review for the second consecutive year

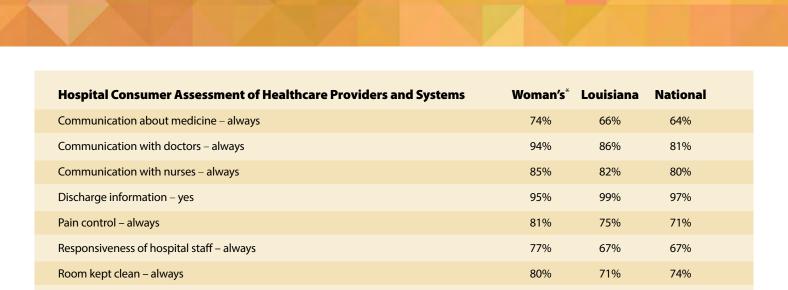
The Patient Experience

Patient and family-centered care is a core value at Woman's as indicated by our promise of exceptional care, centered on you. In the last three years, Woman's focus has shifted from patient satisfaction to patient experience as it is a more global description of patients' interactions with the organization. Woman's defines patient experience as the patient and family perception of everyone and everything encountered throughout their relationship with Woman's.

The Woman's experience is defined by quality care in a compassionate and caring environment, which was recognized when the hospital received a four-star rating in the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) patient experience survey. Woman's four-out-of-five score was the highest of all full-service hospitals in the city and exceeded state and national averages of similar facilities.



Woman's Antepartum nurses facilitated a pet visit for a high-risk OB patient who had a prolonged hospitalization.



75%

84%

91%

69%

74%

76%

61%

72%

73%

Would recommend hospital – definitely yes

Room quiet at night – always

Rate hospital – 9 or 10

^{* 2014} Q3 to 2015 Q2 (most recent available)

Quiet Time

To promote a quiet and restful environment conducive to healing, Woman's implemented "Quiet Time" for Mother/ Baby patients. The patient designates when and for how long her quiet time will be. During this period, visitors and hospital team members are discouraged from entering the room unless medically necessary.

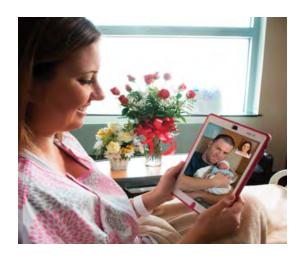
Noise is reduced in other ways as well throughout the hospital. Floors are carpeted in hallways and sound absorbers were placed in chart racks, cabinets and pneumatic tube stations. Overhead paging is strictly limited to emergency situations. Visual cues are placed in areas easily viewed by staff and visitors. Staff members are asked to speak softly in hallways and lower phone ring tones, and families are encouraged to use waiting areas when not in the patient's room.



Virtual NICU Visitation

"Joey Time" is a virtual visitation program using live video to connect mothers who are unable to visit with their babies in Woman's NICU. This program, made possible through the philanthropy of an 9-year-old boy who raised money through his nonprofit, "Joey's Jar for Change," was piloted in the fall of 2014. After a very successful pilot with several families, "Joey Time" was expanded in January 2015. This technology was used to connect 85 infants and their mothers in the first year and has helped these families to bond with their infants and to speak with the nurses caring for their infants.

Joey Time especially impacted one family in which the mother was at another hospital being treated for esophageal cancer. She was too ill to visit. Her baby's nurse, Melissa Letort, RN, collaborated with Social Services to facilitate the appropriate permissions for Joey Time. Without this technology, this mom and others would not be able to see their baby for days on end.



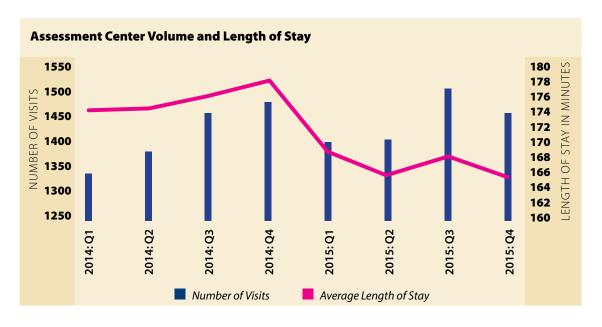
Assessment Center Visits

The Assessment Center cared for approximately 25 to 30 additional patients per month in 2015. This significant increase can be attributed in part to the closure of two local emergency rooms in the greater Baton Rouge area. A task force was created to address the increased volume, decrease the overall length of stay, reduce the number of patients leaving without being seen and improve satisfaction. The task force, led by Amye Reeves, BSN, RNC-OB, Director of Obstetrical Services, evaluated the triage process, all patient flow processes, and initiated an ongoing review of patient wait times. The specific causes that led to extended stays were also explored.

Overall, the average length of stay from the moment a patient arrives to discharge or admittance to the hospital has decreased by 5 percent. Patient satisfaction is on par with Louisiana and nationwide averages, with 85.5 percent of patients very satisfied with their care.



Assessment Center Overflow plan team: Mandy Walters, Erica Barber, Chance Fontenot, Johnathan Landor, Preston Vidrine, Amye Reeves and Stacie Knippers.



Patient & Family Advisory Council

In 2015, Woman's created the Patient & Family Advisory Council to gain perspectives on quality, safety and efficiency of care, as well as the overall hospital stay. The Council's mission is to promote an exceptional experience in which patients and family members feel respected and empowered to be partners in their care. Members include former patients, family members and Woman's staff. This year, council members participated as members of the Patient Experience Taskforce, the Breastfeeding Taskforce and the Performance Improvement Council. Members also provided input on marketing materials, hospital gowns, visitor communication and signage, service recovery and construction/renovation projects.



Woman's patient and family advisors.

Annual Celebrate Life Event for Cancer Survivors

Celebrate Life is an annual celebratory spring event hosted by the oncology staff honoring cancer survivors and caregivers. The program is planned by the oncology staff, Social Services, Marketing and Food and Nutrition Services. The 2015 Celebrate Life luncheon had a derby theme and was attended by over 60 cancer survivors and guests. The event featured inspirational speakers, a southern-themed menu and a hat contest.



Celebrate Life volunteers: Robin Maggio, Rose Bourgeois, Rose Lawson, Lauren Edwards and Mary Ann Smith.

Patient Rounding using iRound Technology

Since 2014, Woman's has conducted leader rounds using iRound for Patient Experience software. iRound is a web-based application that allows nurse leaders to document real-time, actionable feedback from patients during their hospital stay. Rounding involves meeting individually with patients in their hospital rooms to learn their opinions of their stay. Targeted patient rounding questions guide conversations between nurse leaders and patients and touch on various aspects of the patient experience, ranging from communications and pain management to room cleanliness and meal service. This valuable information is tracked and analyzed to identify positive and negative trends and key opportunities. These trends and feedback drive decisions to improve care and patient experience. In 2015, more than 9,000 patient rounds using the iRound system were conducted in the inpatient units and the Assessment Center. This feedback led to the positive recognition of nearly 1,900 employees and facilitated expedient response to 240 service concerns through the automated service recovery notification system.



transformational leadership



Transformational leadership – transformational leaders stimulate and inspire both extraordinary outcomes and leadership capacity in others.

Senior Nurse Leaders

Patricia Johnson, DNP, RN, NEA-BC, Senior Vice President, Patient Care/CNO Cheri Johnson, BSN, RNC-OB, Vice President, Perinatal Services Cathy Griffiths, DNS, RNC-OB, Vice President, Quality

Nursing & Patient Care Directors

Laurel Kitto, MSN, RNC-NICN, Director, NICU & Neonatal Transport Zinda Leblanc, MBA, BSN, RN, NE-BC, CNOR, Director, Perioperative Services & Sterile Processing Amye Reeves, BSN, RNC-OB, Director, Obstetrical Services & Adult ICU Mary Ann Smith, BSN, RN, OCN, Director, Med-Surg/Oncology & Infusion Center Dana Vidrine, BSN, RNC-MNN, Director, Mother/Baby & Lactation Wendy Singleton, MSN, APRN-BC, ANP, Director, Nursing Administration, Clinical Informatics, & Patient Experience Peggy Dean, BS Pharm, MBA, Director, Pharmacy Danette Legendre, RCP, CRT-NPS, Director, Respiratory Care Emily Stevens, LCSW-BACS, Director, Care Management

Nursing Leadership Development and Succession Planning

To facilitate ongoing professional development of its leadership team, Woman's implemented a development and succession planning program for Woman's nursing and patient care leaders. Woman's contracted with a local management consulting firm, Success Labs, and conducted 360° evaluations of 50 patient care leaders based on 18 leadership competencies that align with Woman's core values, performance evaluations and current leadership development program.

The 360° evaluations were used to assess leaders' strengths and opportunities for growth. Using a specialized software program called inQ, customized development plans were created for each leader in conjunction with her immediate supervisor and a leadership coach. Coaching sessions followed to set goals for the coming year. During this process, not only was the participant leader mentored, but the leader's direct supervisor was as well; the supervisor worked with the leadership development coach to improve feedback and coaching skills.

Lastly, alignment between the individual development process and the succession process was created. The 50 leaders' 360° feedback assessment scores filter into a 9-box, which is a common framework used in succession planning. The Success Labs consultants then facilitated succession planning sessions to identify key positions and succession candidates using further assessments of talent and mission-critical positions. This allows for creation of development plans of potential succession candidates that specifically target the gaps and growth opportunities needed to prepare them for next-level positions.

Path to Excellence

In 2015, Woman's "Path to Excellence" Leadership
Development Program was launched. The program is a
customized, performance-based curriculum that combines
evidence-based leadership principles and a variety of
interactive learning experiences to bridge the gap between
theory and practice. The goals of the program are to facilitate
organizational development and to enhance individual
professional development. The curriculum is grounded
in Woman's core values and consists of six informational
sessions focusing on visionary leadership, facilitating
employee engagement and enhancing the patient experience, navigating change, quality measures and external
influences, financial management, and professional image
management.



Path to Excellence graduating class.

The program is open to employees, including nurses, who serve in a leadership or supervisory role. This includes nursing directors, nurse managers, clinical educators and charge nurses as well as any nurse who serves in a process improvement or project management capacity. A total of 53 existing and emerging leaders have completed the Path to Excellence program, 23 of which were nurses.

During the program, participants were divided into interprofessional teams and asked to complete a capstone project to address an organizational need. The teams made improvements to the Magnet data collection process, Assessment Center patient throughput, new employee orientation, the perinatal palliative care follow-up process, and the process for retrieving prenatal records and consent documents from the physician offices.

structural empowerment



Structural Empowerment – Magnet nurses support organizational goals, advance the nursing profession, and enhance professional development by extending their influence to professional and community groups.

Woman's nurses are encouraged to increase their education and expertise through the pursuit of degrees in nursing and specialty nursing certifications. Educational assistance is provided through our tuition reimbursement and certification reimbursement and bonus programs. In 2015, approximately \$100,000 was paid to Woman's nurses pursuing baccalaureate and graduate nursing degrees, and \$8,000 was awarded for nursing specialty certifications.

Woman's is proud to employ a nursing staff in which 65% of direct care nurses hold a BSN degree or higher and 27% are certified in their specialty area of practice. Our nursing leadership group is made up of 100% BSN or graduate degree nurses, and 85% are certified.



Certified Nurses

Val Adamo, BSN, RN, CPAN, CAPA

Lynda Adams, RNC-NICN

Lucie Agosta, Phd, RNC, APRN, FNP

Carolyn Alexander, RN, CNOR

Dana Alleman, BSN, RNC-OB

Misty Allred, BSN, RNC-MNN

Rachael Allison, RNC-NICN

Jane Anderson, BSN, RNC-OB

Allison Andrews, BSN, RNC-MNN

Jimi Ardoin, RNC-CNM

Alainna Arena, BSN, RNC-OB

Amy Arnold, BSN, RNC-LRN

Jennifer Arnold, RNC-MNN

Jena Aucoin, RN, CPHQ

Melissa Austin, RNC-NICN

Erica Barber, RNC-NICN

Rhonda Bailey, BSN, RN, OCN

Dana Bajoie, RN, CCRN-NICN

Lydia Bazzelle, BSN, RNC-MNN, CLC

Jaime Bedell, RNC-MNN

Sandra Beninate, BSN, RNC-NICN, PEDTR

Kellie Benton, BSN, RNC-MNN

Cassie Blanchard, RNC-MNN

Rebekah Blanchard, RNC-NICN

Jana Bordelon, BSN, RNC-MNN

Ann Booth, RNC-OB

Marlene Boudreaux, BSN, RNC-MS

Norma Brewer, BSN, RNC-NICN

Kelley Bright, RNC-OB

Janet Brignac, RNC-OB

Latonya Brumfield, BSN, RN, CPAN

Sharron Buchart, BSN, RN, IBCLC

Esther Bucher, BSN, RN, IBCLC

Cherie Burns, BSN, RNC-NICN

Darcy Bush, MSN, RNC-NICN, NE-BC

Allison Cado, BSN, RNC-OB

Betty Cameron, BSN, RN, CPAN

Belinda Campbell, RNC-MNN

Louahnee Cangelosi, BSN, RN, CRN

Lani Carter, BSN, RNC-MNN

Neva Elliott-Carter, BSN, RNC-LRN

Tiffany Carter, BSN, RNC-MNN

Elizabeth Choate, BSN, RNC-OB

Shelly Cody, BSN, RNC-NICN

Cynthia Collins, RN, CCRN-NICN

Janet Connelly, BSN, RNC-NICN

Catherine Cooper, RN, ASCP

Michelle Cornett, BSN, RN, CNOR

Danielle Coursey, BSN, RNC-MNN

Tina Covington, BSN, RNC-OB

Suzanne Creel, BSN, CPHN

Amy Crochet, BSN, RN, CPHN

Rhonda Crochet, BSN, RNC-MS

Tanyl Curry, BSN, RNC-OB

Lelia Davis, RNC-OB

Mary DeBarbieris, RNC-NICN

Paula Delee, BSN, RN, OCN

Karrie Delise, BSN, RNC-MNN

Sherrie Dencausse, RNC-OB

April Denham, BSN, RNC-MNN

Tracy Dempsey, BSN, RNC-OB

Meagan Dexter, RNC-NICN

Brittany Dinino, BSN, RNC-MNN

Kelli Dixon, MN, RNC-NICN, NP-C

Amy Dowden, RNC-NICN

Beth Duff, RNC-NICN

Ramona Dumas, BSN, RN, IBCLC

Tina Dunnington, BSN, RNC-OB

Stacey Duplessis, RNC-NICN

Megan Dupont, RNC-NICN, PNCTT

Kimberly Edwards, RN, CNOR

Lauren Edwards, BSN, RN, CPHN

Pam Ellis, RN, CPUR

Cynthia Evans, RNC-MNN

Nicole Fair, RNC-MNN

Courtney Fernandez, BSN, RNC-MNN

Bianca Ferris, BSN, RNC-OB

Robin Firmin, RNC-MNN

Chance Fontenot, BSN, RN, CNOR

Suzette Fontenot, BSN, RNC-NICN

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Certified Nurses (continued)

Nicole Fox, BSN, RNC-MNN, IBCLC

Monica Frederic, BSN, RNC-OB

Julie Fresina, BSN, RNC-NICN

Jann Fried, BSN, RNC-OB, RNC-NPD

Barbara Friscia, RN, CNOR

Dawn Fuller, BSN, RNC-OB

Shira Gautreaux, BSN, RNC-MNN

Karen Geiger, RN, CAPA

Judy Gernand, RNC-MNN

Tammy Grant, BSN, RNC-NICN

Cathy Griffiths, DNS, MSHCM, RNC-OB

Elke Guillot, RN, CNOR

Heather Gunter, RN, CLC

Jessica Hagler, RNC-NICN

Jan Haindel, BSN, RNC-MNN

Angela Hammett, RNC-OB, ICCE, LCCE

Laurie Hancock, BSN, RNC-MNN

Stacey Harris, RNC-OB

Stephanie Hasenkampf, BSN, RN, OCN

Joleen Hays, BSN, RNC-OB

Inga Henagan, RNC-OB

Elizabeth Hodnett, BSN, RNC-OB

Jeannine Holdridge, BSN, RNC-NICN

Misty Holley, BSN, RNC-MNN

Lauren Holmes, RNC-OB

Linda Horn, BSN, RNC-MS

Brandi Iles, BSN, RN, CNOR

Vaun Dell Ingalls, MSN, RN, CNOR

Claudia Jack, BSN, RNC-NICN

Cheri Johnson, BSN, RNC-OB

Patricia Johnson, DNP, RN, NEA-BC

Diane Jones, RNC-OB

Arlene Juneau, BSN, RNC-MNN

Karen Kelone, BSN, RNC-OB

Debra Khalid-Abasi, MSN, APRN-BC, FNP

Laurel Kitto, MSN, RNC-NICN

Stacie Knippers, BSN, RNC-OB

Kelly Laborde, BSN, RNC-NICN

Nicole Lambert, BSN, RNC-MNN

Nicole Landry, BSN, RNC-MNN

Zinda Leblanc, MBA, BSN, RN, NE-BC, CNOR

Zsa Zsa Leblanc, RNC-NICN

Wendy Lee, BSN, RNC-MNN

Joelle Lemoine, RN, CAPA

Kelli Lewis, RNC-OB

Pattie Lewis, RNC-NICN

Holly Little, RNC-MNN

Angela Loving, MSN, RN, CIC

Trudy Madere, RNC-OB

Joanne Mancina, RNC-NICN

Ashley Marks, BSN, RN, OCN, CHPN

Sharon Marks, BSN, RNC-MNN

Jeri Martin, RNC-MNN

Kayla Martin, BSN, RNC-MNN

Mary Martin, BSN, RN, CBN

James Maryman, BSN, RNC-NICN

Darla Mathews, MSN, RNC-NICN

Karrie McCoy, BSN, RN, CCRN

Ashley McCrory, RNC-NICN

Katherine McGehee, MSN, APRN, NNP

Megan McNemar, MSN, RNC-OB

Tracie Meeks, RNC-MNN

Jenniffer Mitchell, RNC-NICN

Paula Modicut, MSN, RNC-OB

Nikki Moore, BSN, RNC-MNN

April Morris, BSN, RNC-NICN

Jessica Morris, BSN, RNC-OB

Ungelica Moses, BSN, RNC-OB

Jaime Mosley, BSN, RNC-MNN

Angela Musso, BSN, RNC-OB

Tori Naquin, MSN, APRN, FNP-C

Juliette Neupert, BSN, RN, CNOR

Jill Newell, BSN, RN, CCRN

Leshia Newman, RNC-NICN

Tracy Nicolosi, RNC-NICN

Karen Nunnery, RNC-NICN

Sharon Odenwald, BSN, RNC-OB

Allison Penny, RNC-NICN



Kay Pittman, BSN, RNC-MNN Alicia Plumer, BSN, RN, CPAN Christine Podnar, RNC-MS Deborah Porterfield, RN, CPAN Stephanie Powers, RNC-NICN Kahne Prestridge, BSN, RN, CNOR Kelley Puig, BSN, RNC-LRN Rachel Purgatorio, BSN, RNC-MNN Amye Reeves, BSN, RNC-OB Rebecca Robertson, RNC-MNN Shawntell Robinson, MSN, APRN, FNP-C Jessica Rodriguez, RNC-OB Michelle Rome, BSN, RNC-MNN Leslie Roy, BSN, RN, CPAN Mary Salario, BSN, RN, CRN Patricia Samrow, BSN, RN, COHN Jacqueline Seale, RNC-NICN Jennifer Silbernagel, BSN, RNC-NICN Janelle Simmons, BSN, RNC-OB Kristy Simmons, MSN, RN, CNOR Kathleen Simpson, BSN, RN, CPN Katherine Sinclair-Faulkner, BSN, RN, CCRN Wendy Singleton, MSN, APRN-BC, ANP Kristy Smith, BSN, RNC-MNN Mary Ann Smith, BSN, RN, OCN Melanie Smith, BSN, RNC-NICN Nicole Square, PhD, RNC-NICN Michelle Stears, RNC-OB Elizabeth Steddum, RN, PNP Jennifer Stockman, BSN, RN, IBCLC Vicki Strickland, RNC-OB Kimberly Tatum, BSN, RNC-OB Leah Terrell, MSN, RNC-MNN Alyzon Thames, RNC-NICN Cynthia Thomas, BSN, RN, CNOR Denise Thompson, BSN, RN, IBCLC Jonnie Triche, BSN, RNC-NICN Cheryl Varnado, RNC-NICN

Lajuana Ventrella, BSN, RNC-NICN

Kathleen Verbois, BSN, RNC-MNN
Dana Vidrine, BSN, RNC-MNN
Mary Villemez, BSN, RNC-NICN
Lydia Waite, MSN, RNC-OB, RNC-MNN
Kathryn Wallis, RNC-NICN
Mandy Walters, BSN, RNC-NICN
Sarah Watts, RNC-NICN
Michelle Whitmore, RN, CNOR
Roxanne Williams, BSN, RN, IBCLC
Janice Windham, RN, CNOR
Lakesha Woods, MSN, APRN, FNP



Professional Organization Leadership

The following nurses serve in leadership positions within their professional nursing organizations:

- Pollie Harris, Surgical Care Unit President, Baton Rouge Chapter of AORN
- Barbara Friscia, Operating Room President-elect, Baton Rouge Chapter of AORN
- Annette Savoy, Operating Room Secretary, Baton Rouge Chapter of AORN
- Carolyn Alexander, Operating Room Nominating Committee member, Baton Rouge Chapter of AORN
- Brandi Iles, Pre Surgery Center Nominating Committee chair, Baton Rouge Chapter of AORN
- Kristy Simmons, Operating Room Nominating Committee advisor, Baton Rouge Chapter of AORN
- Cynthia Thomas, Perioperative Services Committee Chair, Baton Rouge Chapter of AORN
- Elke Guillot, Operating Room Committee Chair, Baton Rouge Chapter of AORN
- Michelle Cornett, Operating Room Committee Chair, Baton Rouge Chapter of AORN
- Kahne Prestridge, Operating Room Committee Chair, Baton Rouge Chapter of AORN
- Stephanie Hasenkampf, Med-Surg/Oncology Secretary, Baton Rouge Oncology Nursing Society
- Rhonda Crochet, Med-Surg/Oncology Membership Committee Chair, Baton Rouge Oncology Nursing Society
- Marlene Boudreaux, Med-Surg/Oncology Webmaster, Baton Rouge Oncology Nursing Society
- Leslie Roy, PACU Education Committee Chair, LAPAN
- Heather Garrot, PACU Secretary, LAPAN
- Robin Firmin, Mother/Baby Chair, Baton Rouge Chapter of AWHONN
- Neva Elliott-Carter, Mother/Baby Secretary/Treasurer, Baton Rouge Chapter of AWHONN
- Jamie Schmolke, Mother/Baby Program Planning Committee, Baton Rouge Chapter of AWHONN
- Hayden Hidalgo, Labor & Delivery Program Planning Committee, Baton Rouge Chapter of AWHONN
- Mary Debarbieris, NICU- Baton Rouge Chapter Coordinator, American Holistic Nurses' Association (AHNA)
- Chyrstal Deslatte, NICU- Baton Rouge Chapter Co-chair, American Holistic Nurses' Association (AHNA)
- Linda Travis, NICU- Baton Rouge Chapter Co-chair, American Holistic Nurses' Association (AHNA)
- Katie Wallis, NICU- Baton Rouge Chapter Co-chair, American Holistic Nurses' Association (AHNA)

Employee Engagement & Wellness

As a preferred workplace for nurses in the community, Woman's values employee engagement and wellness. Connecting with employees and responding to their concerns earned Woman's local and national recognition as a top workplace in 2015. Woman's continued to earn accolades in 2015 for an outstanding work environment and promoting wellness among its employees. Those honors and awards include:

- "Best Places to Work in Healthcare" by Modern
 Healthcare magazine for the eighth consecutive year.
 Woman's is the only hospital in the Baton Rouge area
 named and the only hospital in Louisiana to be recognized in the national list every year since its inception.
- "2015 Best Places to Work" by the Baton Rouge Business Report for the second consecutive year
- "150 Great Places to Work in Healthcare" by Becker's Hospital Review for the second consecutive year
- Designation as a "WellSpot" by the Louisiana
 Department of Health and Hospitals Well-Ahead
 Louisiana campaign for implementing healthy
 initiatives, such as being tobacco-free, breastfeedingfriendly and providing healthy nutrition options
- Designation for 5th consecutive year as a Gold Fit-Friendly Worksite by the American Heart Association
- Designation as a "Working Well" employer from the Louisiana Business Group on Health



Employee Wellness Programs

- Woman's partnered with Luckett Farms to offer boxes
 of fresh seasonal fruits and vegetables to employees
 each week, along with recipes to promote healthy eating.
 More than 100 employees participated.
- For a six-week period, employees were challenged to walk 7,500 steps each day. Pedometers were provided and steps were recorded for tracking. Employees logged 12 million steps during this program.
- Woman's was the first smoke-free hospital in Baton Rouge and continues to ban smoking from the entire campus, ensuring fresh, smoke-free air for patients, families and employees.
- Woman's enhances the hospital experience for patients, visitors, and employees through the Healing Arts program. Roving concerts provide relaxation and distraction, and onsite classes are offered in making jewelry, painting and healthy meal preparation.
- Healthy food options are available in the cafeteria and vending machines.
- Woman's provides free or reduced-cost preventive healthcare.
- Woman's encourages employees to use the one-mile walking path on campus.
- A seasonal farmer's market is held on campus.
- Employee newsletters include health-related information and seasonal wellness tips.

structural empowerment

Influenza Vaccination

In both 2014 and 2015, Woman's collaborated with other local hospitals to protect healthcare workers, patients and the community from the flu by mandating influenza vaccinations for employees. Those who do not receive the flu vaccines are required to wear a mask while at work for the duration of the flu season. Staff members who received the vaccine were identified by a specialized tag that was added to their hospital identification badges. For the 2014-2015 flu season, 97% of employees were vaccinated; 98% received the vaccine for the 2015-2016 flu season.

Womans (woman Lorg Operand) my pregnancy journal







Educating Our Patients and the Community

Prenatal Community Education

A healthy baby starts with a healthy pregnancy. Woman's offers a variety of prenatal education classes to promote healthy pregnancies and prepare families for childbirth and parenting. These educational offerings are coordinated by Woman's board-certified perinatal education coordinator, Angela Hammett, RNC-OB, LCCE, ICCE. In 2015, Woman's launched the GetReady campaign to increase public awareness about the changes a woman experiences during pregnancy and how to best prepare for birth and a healthy baby. The campaign encourages women to "get ready" by educating themselves and their partners in advance, reducing the need for additional medical intervention later.

Expectant mothers also receive a pregnancy journal upon their initial obstetrician visit. The purse-sized journal contains weekly tips and illustrations. It is designed to serve as a close-at-hand resource while encouraging women to record personal memories and experiences throughout pregnancy. Topics range from morning sickness remedies to recognizing labor stages to choosing a pediatrician. GetReady is a collaborative effort among the hospital's patients, nurses and other care team members, and leadership.





Statewide Perinatal Outreach

Since 2014, Cheri Johnson, VP of Perinatal Services, has served as one of two nurses on a statewide committee to revise state licensing standards for perinatal care to ensure consistent, quality care delivery. Cheri led a subcommittee that focused on nurse staffing standards for perinatal care. The committee crafted a recommendation that could be easily measured by licensing and standards during validation surveys and easily understood by hospitals. The committee hopes to see these standards enacted in the summer of 2016.

In addition to the perinatal licensing standards, Cheri worked with the group to apply for and receive a grant through the Alliance for Innovation on Maternal Health (AIM). AIM is a national partnership funded through a cooperative agreement with the Maternal and Child Health Bureau/Health Resource Services Administration and is being coordinated locally through the Bureau of Family Health, Office of Public Health. Cheri continues to participate in this initiative as a key stakeholder to create structure for organizations across the state to implement perinatal care bundles.

Improving Nurses' Expertise in Educating Patients and Families

Woman's nurses strongly believe in educating patients to be active partners in their care. Patient education is provided in a manner that is consistent, timely and easy to understand. Patients' preferred learning style is assessed upon admission, and teaching is tailored to meet each patient's needs. Before being used with patients, patient education materials are approved by the Nursing Practice and Education Council, as well as the Medical Education Committee. Websites, electronic media applications, and educational videos are approved through this same process.

As a means of providing the nursing staff at Woman's with an overview of up-to-date, evidence-based strategies geared toward teaching the patient and family, a comprehensive, independent study module titled "Strategies for Effective Patient and Family Teaching" was designed and implemented in March 2015.

Specific topics addressed in the module included principles of adult learning theory, determining readiness for patient teaching, barriers to literacy, language and cultural considerations and potential physical and environmental barriers to learning. Additionally, the various learning styles were outlined, including best practices for working effectively with each type of learner. An extensive list of examples of teaching strategies recommended for each learning style and developmental level was also included in the content. Most importantly, involving the patient and family in the assessment and planning of his or her education was emphasized to improve the likelihood of active participation and a positive teaching encounter.

Following this training, HCAHPS scores for the question, "When I left the hospital, I had a good understanding of the things I was responsible for in managing my health," increased by more than 10 percent.

Preferred scheduling for Nurses and Patient Care Staff

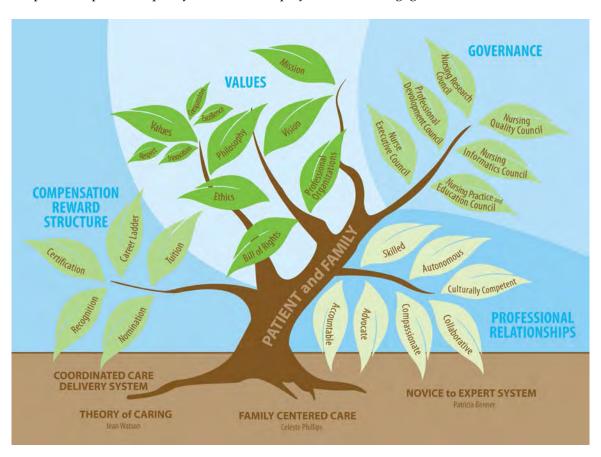
A phased implementation for employee self scheduling was implemented in 2015. A total of nine clinical departments, along with Respiratory Therapy, Nursing Administration & Nursing Informatics, are currently utilizing API's integrated staffing & scheduling solution. Employee self scheduling provides the nurse autonomy with entering preferred shifts and the ability to offer or trade a shift with another qualified employee, as well as entering in paid time off requests for vacation and requesting days off. The API portal is web based, allowing the nurse to access the employee portal to check a schedule or enter requests remotely.

exemplary professional practice

Exemplary Professional Practice

Nurses practice, collaborate, communicate, and develop professionally to provide the highest-quality care to those we serve.

Woman's Professional Practice Model, the Tree of Life, serves as a framework for all nursing care. It is grounded in nursing theory and family centered care principles, with patients and families prominently displayed as the center of everything we do. The model describes how nurses practice, collaborate, communicate and develop to achieve the highest quality care for our patients and families. Collaboration between nursing and other disciplines has resulted in multiple initiatives to improve the patient experience, quality of care and employee wellness/engagement.



Breastfeeding

"Breast is best" when it comes to infant nutrition, and in 2015, Woman's continued to reinforce that message to women. Research shows that breast milk provides health advantages beginning at birth and continuing over a lifetime. These include a stronger immune system and fewer respiratory illnesses, ear infections and gastrointestinal issues. New mothers also benefit from milk production. Weight loss occurs more rapidly, the uterus returns to normal size more quickly and stress is reduced. Breastfeeding may also reduce the incidence of certain types of cancer. Woman's patient breastfeeding rate of 69 percent continued an upward trend, surpassing the Louisiana average of 57 percent.

EMPower-ing Woman's

In June 2015, Woman's became one of the first hospitals in the nation to join the Breastfeeding: Enhancing Maternity Practices group, also called the EMPower Initiative. This hospital-based quality improvement effort focuses on best practices for breastfeeding and maternity care. As a participant, Woman's receives training and resources to support evidence-based practices for prenatal and maternity care. The program is funded by the Centers for Disease Control and Prevention. The Carolina Global Breastfeeding Institute and Population Health Improvement Partners also sponsor the project.

Top of its Class

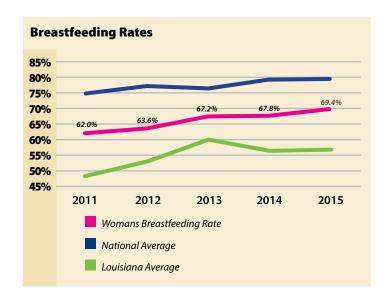
Woman's scores exceeded state and national standards for infant feeding practices in the Centers for Disease Control and Prevention's survey of Maternity Practices in Infant Nutrition and Care (mPINC). Woman's scored 92 out of 100, exceeding the state (71) and national average (75), placing our score in the nation's 90th percentile. Woman's was commended for breastfeeding education, encouraging mothers to breastfeed and practicing skin-to-skin contact.

Breastfeeding-Friendly Workplace Champion

Nearly 70 percent of mothers with children younger than three years old work outside the home. The need to return to work soon after childbirth, coupled with lack of support for breastfeeding at work, can negatively impact a new mother's decision to begin or continue breastfeeding. The Louisiana Breastfeeding Coalition and Mary Amelia Women's Health Center designated Woman's as a Breastfeeding-Friendly Workplace Champion in 2015 for providing time, space, resources and support for employees to breastfeed or pump milk.

Breastfeeding Training and Support

In 2015, 15 registered nurses completed the Certified Lactation Counselor course offered by the American National Standards Institute. In addition to achieving this designation, each received specialized training to support, promote and protect breastfeeding. These nurses represented Labor and Delivery, Mother/Baby, and NICU. In 2016, this education will be expanded to the ambulatory care nurses in Woman's Center for OB/GYN.



exemplary professional practice



and hear the heartbeat and breathing of his mom or dad. Evidence has shown that skin-to-skin babies breathe more regularly, stabilize their heart rates and body temperatures, use energy more efficiently, have better blood sugar levels and experience less stress. Furthermore, skin-to-skin fosters frequent eye contact and voice recognition and can be a special time for newborns and their parents.

In March 2014, Woman's rate of skin-to-skin contact within two hours of vaginal and C-section deliveries was 33 percent. New policies and practices, as well as enhanced patient and staff education, increased the rate to 86 percent for vaginal deliveries and 88 percent for C-section deliveries by early 2015.

Maternal Addiction and Neonatal Abstinence Syndrome

Woman's nursing and medical staff made great strides in 2015 in the care of infants exposed to drugs in utero. Neonatal abstinence syndrome (NAS) describes the problems a baby experiences when withdrawing from exposure to certain drugs taken by the mother during pregnancy. Babies with NAS are more likely to be born with low birth weight, have breathing and feeding problems and may develop seizures. They often stay in the hospital longer than babies without NAS. These are just some of the major health problems that an infant exposed to narcotics during pregnancy may experience.

Like most of the U.S., Baton Rouge and the surrounding areas have experienced a significant increase in the number of infants exposed to maternal substance abuse. In response to these infants' needs, Woman's created the Perinatal/Neonatal Addiction Disorders Task Force, which includes nurses, physicians, and other disciplines who care for both mothers and babies in an effort to offer the best outcomes for infants. Processes were developed to facilitate screening of at-risk mothers, and standardized treatment plans were implemented for both mother and baby. The task force utilized March of Dimes materials to provide education on substance abuse for families.

State and community partners were invited to join a review of available resources for pregnant women who suffer from substance abuse. Members of the task force worked with the Department of Health and Hospitals to create a standardized assessment and management program for mothers and infants on substance abuse, and developed educational materials for clinicians. This team effort continues to increase awareness of maternal addiction and reduce its impact on our most fragile children.

Role of Registered Nurses in Imaging Services

Imaging nurses provide patient care and support to patients having image-guided procedures and breast biopsies. Nurses serve as patient advocates and work to improve patient outcomes. After a breast biopsy, patients are called approximately one week post procedure to confirm that patients have received their biopsy results and to check on procedure site complications such as bleeding, hematoma, bruising and infection. This past year, performance improvement initiatives were implemented to further reduce breast core biopsy infections and complications. Initiatives included increased attention to infection prevention practices,



Imaging Services Nurses: Sarah Babin, Stephanie Shortt, Jackie Milazzo, Mary Salario, Kaelyn Leblanc, Sherry Threeton and Mandy Walters.

more effective methods to control bleeding, and revision of pre-procedural and post-procedural discharge instructions. The Agency of Healthcare Research and Quality (AHRQ) sets benchmarks for breast core biopsy complications. Through our initiatives, we were able to decrease our infection rate from 0.6% to 0.1%, thus reaching the AHRQ benchmark rate. We also were able to decrease our post-procedure complications (bleeding, hematoma, bruising) rate to below AHRQ benchmark data in all areas.

Imaging nurses provide education, navigation and follow-up to patients who have an abnormal mammogram that warrants a breast biopsy. Last year, 1,570 patients had an image-guided breast core biopsy. Through physician pathway orders, nurses set up appointments for biopsies and surgeon visits, and communicated results to providers and patients. In 2015, imaging nurses called over 1,250 patients approximately one week to 10 days post-procedure to follow up with the patient, answer any questions, assess for complications and verify that the patient received biopsy results or has an appointment with her physician to obtain results.



Imaging Services Nurses: Stacy Belgard, Diane Davis and Deanna Cole.

nal practice

Palliative Care

When a patient is facing a serious illness, Woman's staff is called upon to provide a very special touch called palliative care. The goal of palliative care is to improve the quality of life by relieving a patient's physical, emotional and spiritual distress. It does not restrict medical intervention, and is intended to manage the symptoms and side effects of an illness and its treatment. At Woman's, this unique comfort is offered to both adults and infants.



Adult Care

For a cancer patient, palliative care is often needed in addition to treatment and continues throughout a patient's experience with their disease. This year marked the beginning of a Woman's Adult Palliative Care program for oncology patients. A grant and philanthropic support enabled five employees and one physician to attend Palliative Care Leadership Training at the University of California in San Francisco. Additionally, three nurses attended an End of Life Nursing Education Consortium (ELNEC) educational meeting, and two nurses were accepted to attend the Comfort Communication for Oncology Nurses program. The palliative care team provides a woman with specialized resources to help manage her symptoms and to assist in achieving goals that are important to her.



Infant Care

Louisiana has the second highest premature birth and infant mortality rates in the nation. As a result, Woman's focuses on providing the best quality of life for a newborn with a life-limiting condition and supports parents during this difficult time.

In 2014, seven employees attended a Palliative Care Leadership Course offered through the Center to Advance Palliative Care at Children's Hospitals and Clinics of Minnesota. This was preceded by a course in Palliative Care at Harvard Medical School in 2013. This continued investment gives staff the knowledge to help families plan for and improve the quality of the time spent in the NICU and at home. Funded primarily through generous philanthropic support from individual donors and grants, the success of palliative care at Woman's is measured by the quality of time that families spend together, whether it is for a few precious moments or many days. We continue to improve the program based on feedback from families and best practice evidence.

Perinatal Palliative Care

The unexpected loss of a child or pregnancy is devastating to patients, families and caregivers. Each year, over 100 families experience a loss in Woman's Labor & Delivery (L&D) department. For some, the loss comes early in pregnancy; for others, the loss occurs later in pregnancy and may be discovered at a routine ultrasound or prenatal appointment. The palliative care provided on the L&D unit is aimed at relieving suffering and improving the patient/family experience during this unanticipated loss. All nurses in this area have received training in providing care and emotional support to these families during such a difficult time in their lives.



In January 2015, an interdisciplinary team was created to evaluate the effectiveness of the perinatal palliative care program. Specifically, they planned to develop a method for gathering patient/family feedback and satisfaction with the palliative care provided in the Labor and Delivery unit. The team, led by L&D nurse manager Jessica Morris, was made up of nurses, social workers, and support team members. The team developed and implemented a process for follow up calls to these families to assess their satisfaction with certain aspects of care and family interaction.

Through the follow-up call process, Woman's obstetric and neonatal nurses actively reconnect with families who have experienced perinatal loss and give them the opportunity to provide feedback on their experience. An electronic tracking system for these calls was developed collaboratively by nursing and Information Systems. The electronic system allows for trending of the feedback obtained from patients and has helped to improve the way we care for patients during this difficult time.

exemplary professional practice

Gynecologic Cancer Care

The number of gynecologic oncology patients at Woman's increased in 2015. This growth can be explained in part by an increase in referrals to Baton Rouge's only dedicated gynecologic cancer practice and in increased community awareness of gynecologic cancer. Over the past 18 months:

- Gynecologic oncology surgeries increased by 34 percent
- Outpatient visits for chemotherapy increased by 38 percent
- Inpatient oncology days increased by nearly 300 days or 36 percent

As volume increased, so did the need for additional access to Woman's GYN Oncology Registered Nurse Navigator. The GYN Oncology Navigator assists the patient and family from diagnosis to survivorship. Guidance begins with treatment planning and continues throughout treatment to anticipate, identify and overcome any barriers to care. This includes:

- Helping patients understand their diagnosis
- Coordinating treatment plans
- Seeking assistance for appropriate services
- Communicating with the patient's treatment team, family and significant others

Sexual Assault Care

For the past three decades, Woman's has cared for and comforted women following the violent act of sexual assault. Woman's goal is to become the first choice for immediate care following sexual assault.

In 2015, 85 women were treated with dignity and respect through Woman's Care for Victims of Sexual Assault program. A survivor receives the privacy she needs in a private waiting area and a designated sexual assault exam room. A specially trained team of nurses and physicians collect forensic evidence. Woman's nursing staff provides a fresh set of clothing for patients who must leave their clothes as evidence. She does not have to wait until she gets home to shower; Woman's provides toiletries and a place to shower. She shares her account of the assault in Woman's private consultation room designed specifically for sexual assault survivors.

Woman's works with the District Attorney's office to put assailants behind bars and with the Baton Rouge Sexual Trauma Awareness and Response (STAR) Center to advocate for survivors. No sexual assault survivor is asked to pay for her exam, clothing or care. These services are paid in part by Woman's employees as part of the hospital's annual Employee Giving Campaign and other generous philanthropic support.

Surgical Quality Improvement

The Surgical Care Improvement Project (SCIP) is a national quality partnership focused on improving surgical care by significantly reducing complications. By comparing Woman's performance measures against state and national standards of care, the hospital continuously seeks to improve patient outcomes. In 2015, the hospital exceeded both state and national benchmarks.

Surgical Care Improvement Project	Woman's*	Louisiana	National
Prophylactic antibiotic received within one hour prior to surgical incision	100%	98%	99%
Prophylactic antibiotic selection appropriate	100%	99%	99%
Prophylactic antibiotic stopped within 24 hours after surgery	100%	97%	98%
Treatment to prevent blood clots received within 24 hours before or after selected surgeries	s 100%	98%	99%

^{* 2014} Q3 to 2015 Q2 (most recent available)

Weight Loss Surgery Program

In September 2015, Woman's submitted an application to become a MBSAQIP (Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program) accredited Comprehensive Center in Bariatric Surgery. MBSAQIP accreditation provides an objective and measurable means in which a center can demonstrate that it offers high-quality care in a multidisciplinary format. With the primary tenet of continual monitoring of outcomes data in a reliable, clinically rich, streamlined format, the MBSAQIP serves to improve quality of care for the bariatric surgical patients in a systematic and scientific manner. Achieving MBSAQIP accreditation allows more coverage from managed-care payors and gives Woman's Hospital recognition for the excellent service it provides.

MBSAQIP

CCREDITED

CENTER

QUALITY

The Bariatric Surgery team worked through vigorous, nationally recognized metabolic and bariatric surgical standards in preparation for a site visit in March 2016. Some of

these standards include: the development of a MBS (Metabolic and Bariatric Surgery) committee, assessment of structural needs and appropriate equipment and pathway formulation for bariatric surgical patients. The personnel and infrastructure required to attain accreditation provide pathways for high-quality operations and support efforts inherent to patient safety and excellent clinical outcomes. Maintenance of accreditation requires consistent attention to the details of the program on an ongoing basis with periodic review of outcomes, pathways, and protocols to ensure that the center is providing safe and competent metabolic and bariatric surgical care. Woman's Hospital started the data collection process in October 2015, and will continue to collect data on all bariatric surgical patients as part of the MBSAQIP Program.

new knowledge

New Knowledge, Innovations, and Improvements – nurses integrate evidence based practice and research into clinical and operational processes.

Patient Tracking in Perioperative Services

In late 2015, Perioperative Services replaced its manual patient tracking processes with an automated patient tracking system. RealView Visual Workflow Management Software is a workflow management and communications software tool that brings real-time visibility, information, and control to the perioperative area. Enabled by Real Time Location System (RTLS) technology and the hospital's OR scheduling system, RealView software combines the patient's real-time location and scheduling information to create a complete view of patient workflows for physicians, staff and families throughout the perioperative environment.

Blood Loss Reduction

A Blood Loss Quantification program was initiated in May 2015 to reduce the need for women to receive blood following childbirth and surgery. Perinatal nurses, perioperative nurses and nursing informatics specialists worked together to create documentation and an innovative visual tool to facilitate accurate blood loss estimation and to capture cumulative blood loss across the continuum of care. The visual estimation tool was developed by measuring blood amounts (in mL) and applying those amounts to standard items used in Woman's different patient care areas (gauze sponge, OB pads, blue incontinence pads, etc). Photographs were taken of these items to create the tool. The accuracy of the tool was then validated by OB and surgical clinical nurses.

The obstetrical segment of the program was made possible by a grant from the Louisiana Hospital Association (LHA) that encourages hospitals to develop innovative, safety-related programs. The LHA awarded \$300,000 to 14 hospitals in Louisiana, and Woman's was the only facility in Baton Rouge to receive a grant.



Brenda Ballard, BSN, RN, and Claire Spano, BSN, RN, using the visual estimation tool to document blood loss in the Assessment Center

Currently, about 2 percent of obstetric patients at Woman's receive blood products following delivery. The program aims to reduce that number by increasing staff communication, quantifying cumulative blood loss and improving time to recognition of hemorrhage. By 2016, Woman's expects a 20 percent decrease in blood products administered in Labor and Delivery and a 25 percent decrease in blood transfusions during recovery in Mother/Baby.

Patient Safety Huddles

Twice-daily patient safety huddles were implemented in Antepartum, where high-risk obstetrical patients receive inpatient care. The meetings, led by the obstetrical charge nurses, offer the bedside nurses the opportunity to discuss critical patient safety issues or other concerns for the day. This facilitates awareness and preparation for possible complications among the unit nurses and the charge nurses. It also gives the primary nurse an opportunity to express any concerns she may have with the patient's current plan of care and get feedback or recommendations from her charge nurse and co-workers.

In addition to the patient safety huddles held in Antepartum, Woman's obstetric and perioperative teams hold special meetings to prepare for complex cases, such as EXIT (ex-utero intrapartum treatment) procedures and patients with placenta accreta or percreta. The complexity of these cases requires participation of the entire care team to facilitate a positive outcome. In these meetings, possible complications and needed team members, equipment and supplies are reviewed. Changes are made to the plan of care as needed at this time. Debriefings are also held following the procedures. All disciplines participating in the patient's care are included in these meetings.

knowledge

Perinatal Quality Improvement

Woman's continues to participate in the Institute for Healthcare Improvement (IHI) perinatal collaborative and the DHH-led Louisiana Cohort with the goal of continued reduction in perinatal harm and c-section rate. Perinatal harm is a term used to describe adverse events related to childbirth. These events may include, but are not limited to, unanticipated operative vaginal deliveries, maternal blood transfusions, unplanned returns to surgery, and transfer to higher level of care.

Since 2013, Woman's has maintained a perinatal harm rate of 5 percent or less. This achievement reflects a collaborative effort among both nursing and medical staff to ensure safe obstetrical care and positive outcomes. All obstetrical nurses and many obstetricians have been trained in team communication and obstetrical emergency response. Monthly simulation drills covering a variety of obstetrical scenarios are conducted using Victoria, a high fidelity birth simulator.



Labor and Delivery nurses training on birth simulator, Victoria.









C-section Reduction

Woman's continues to steadily reduce C-section rates among first-time mothers by focusing on reducing elective deliveries. When labor is induced in a first-time mother who is not favorable for the procedure as indicated by an exam or a Bishop score, her chances of having a C-section double. Woman's implemented new hospital guidelines, involved nurses in techniques to labor naturally, and supported physicians who are committed to reducing elective deliveries.

- Many obstetricians stopped performing elective inductions.
- New guidelines were established to assess the progression of labor and assist in predetermining potential success of a vaginal delivery.

Peanut Balls

In addition to the strategies mentioned above, nursing staff also began utilizing a new positioning device, the peanut ball, to aid in labor progression by promoting dilation and opening the pelvis for delivery. Maternal positioning is an important nursing intervention during both the first and second stage of labor. Nurses who care for laboring women have a major influence on birth experience and outcomes by educating patients about the importance of position changes and by selecting the positions that are most likely to facilitate labor progression.

Peanut balls are inflatable balls shaped like a peanut shell. Research findings suggest that the peanut ball is an effective, nurse-driven intervention in reducing pushing time and decreasing risk of cesarean delivery. Patients may use the peanut balls in various positions, which allows for frequent position changes (at least every hour) while still maintaining the benefits of the peanut ball in facilitating widening of the pelvic outlet and fetal descent.





Sarah Cappo, Labor & Delivery RN, explaining the peanut ball to Lauren Hood, Woman's RN and obstetrical patient.

Centering Pregnancy

In August 2015, Woman's and LSU launched the Centering Pregnancy program at the Health Center for OB/GYN. This prenatal care program supports at-risk women and reinforces healthy behaviors during and after pregnancy. Program goals include encouraging women to attend prenatal visits, promoting breastfeeding, reducing preterm births, increasing vaginal deliveries, and increasing infant birth weights. To promote peer support, a welcoming, private space for hosting group sessions was built adjacent to the clinic. An advanced practice RN facilitator discusses prenatal care, nutrition, common discomforts and exercise. The classes also incorporate healthy initiatives such as safe sleep practices, breastfeeding and interconception planning following delivery. More than 250 women participated in the Centering Pregnancy initiative in the program's first four months.

Post-Discharge Follow Up for High Risk Obstetrical Patients

Two of the most common causes of postpartum readmission are surgical site infection and hypertension. Targeting these two complications, nurses in the Mother/Baby department perform follow-up phone calls to patients identified as at risk for these postpartum complications. Patients with elevated blood pressures in the intrapartum or postpartum period are discussed at Mother/Baby huddles and identified as candidates for post-discharge follow up. A tracking tool is used to capture pertinent data, and the patients are provided with specific discharge teaching geared toward monitoring blood pressure at home. If the patient does not have means to check blood pressure at home, a blood pressure monitor is provided for her. At approximately one week post-discharge, a registered nurse calls to check on the patient. She reiterates discharge instructions and refers the patient to her physician's office if she reports any signs or symptoms of elevated blood pressure. Based on analysis of data collected on these at-risk patients, two physician groups were targeted for a pilot study of an order set to trial on patients at risk for postpartum hypertension. A clinical pathway is currently being developed for use by all obstetricians treating patients at risk for postpartum hypertension.

Follow-up phone calls to patients at risk for surgical site infection are provided with additional discharge instructions and 20 bars of soap for hygiene and incision care at home. Patients are instructed to take their temperature daily and observe for signs and symptoms of wound infection. If the patient does not have a thermometer at home, one is given to her. A registered nurse calls to check on the patient approximately one week post-discharge. Any reported concerns or signs of infection are referred to the physician.

new knowledge

NICU Quality Improvement

Woman's NICU has been a member of the Vermont Oxford Network (VON) since 1996 and has participated in its quality collaborative since 1998. VON is a nonprofit, voluntary collaboration of healthcare professionals dedicated to improving the quality and safety of medical care for newborn infants and their families through a coordinated program of research, education and quality improvement projects. Nearly 1,000 hospitals in 29 countries worldwide are members of VON. VON maintains a database of clinical information that is used by member hospitals for benchmarking and identification of potential areas for improvement. Participation in this collaborative has led to many improvements in NICU quality outcomes, including a decrease in central-line associated bloodstream infections, oxygen therapy guideline changes leading to a decrease in retinopathy of prematurity, and decreased chronic lung disease.

In January 2014, the NICU Quality Council began participating in the VON NICQ Next collaborative: Micropremature Infant Care Homeroom. This homeroom is comprised of 11 centers nationwide and its goal is to increase the proportion of micropremature infants (< 26 weeks gestational age) surviving without morbidity. Based on their work through this collaborative, Woman's NICU was invited to host a national VON webinar focusing on reduction of chronic lung disease in micro-preemies. The webinar was presented by Woman's interprofessional VON Core Team, which includes the following members:

- Laurel Kitto, MSN, RNC-NICN, NICU Director
- April Morris, BSN, RNC-NICN, NICU Quality Manager
- Tracy Nicolosi, BSN, RNC-NICN, NICU Bedside RN
- Dr. Cynthia Voelker, Neonatologist
- Mark Schorr, Respiratory Therapist
- Wendi French, NICU Parent Advisor

Adult Critical Care Quality Improvement

In 2015, Woman's Adult ICU focused on improving care of ventilated patients and revised the protocol for prevention of ventilator associated pneumonia. The ICU nurses assisted in educating nurses throughout the organization on topics such as sepsis, chest tube care, and care of oncology patients, and participated in mock Rapid Response Team (RRT) and Code drills. They also adopted a new process for evaluating, documenting and performing care of wounds.

Also in 2015, Adult ICU leaders initiated the application for the Beacon Award, a national award for excellence in intensive care nursing. This recognition is awarded by the American Association of Critical Care Nurses (AACN).



Evidence-Based Practice Resources

In 2015, Woman's Nursing Practice and Education Council began the process of migrating our nursing procedures to an electronic, web-based version that allows for real-time, evidence based and best practice updates. This process facilitated expedited review of existing nursing procedures to determine if they remained necessary in the rapidly changing healthcare environment. Over the past year, 98 nursing procedures were reviewed and either eliminated or migrated to the Lippincott Procedures and Skills platform.

In addition to providing nurses with evidence-based resources that are available at the point of care, Woman's provides ongoing continuing education at no cost to the nurse. As an approved provider of nursing and continuing education, 45 nursing educational programs were offered in 2015, totaling 120 contact hours.

Safe Administration of Blood Products

In November 2015, the electronic Transfusion Administration Record (TAR) was implemented to improve the safety of blood product administration. Previously documented through a manual, handwritten process, the TAR uses barcode technology to positively identify patients for blood transfusions as well as verify product, blood type and expiration date/time. System alerts are setup to ensure that the product is given in a timely manner. The TAR provides a consistent process for recording and monitoring vital signs during the transfusion, recording reactions (if any) and documenting interim and total blood intake.



Clinical Resource Coordinator

Woman's Clinical Resource Coordinator (CRC) is a registered nurse who coordinates hospital-wide the evaluation and implementation of clinical systems, equipment and supplies. The CRC leads interdisciplinary teams in the implementation of projects through literature review, knowledge of standards of care, evidence-based practice and data management. The following initiatives were coordinated by the CRC in 2015:

- BBraun Epidural pump implementation
- Installation of Code Blue Infant buttons in Assessment Center to improve timeliness of infant code response
- BBraun IV infusion pump implementation
- Addition of Bed Ready feature to nurse call system in Labor and Delivery and Antepartum to improve timeliness of room turnover
- Coordinated purchase and distribution of 36 new wheelchairs
- Product Standardization
- Conducted over 52 product and equipment trials hospital-wide
- Estimated annual savings resulting from product standardization: \$94,026
- Annual savings resulting from reprocessing: \$149,970 (6,676 lbs of waste diverted)

The clinical resource coordinator also collaborated with Woman's Assessment Center nurses to develop a pediatric emergency cart, which uses the colors on the pediatric Broselow tape to label different drawers according to weight and age of the pediatric patient. All supplies needed for each age/weight category are stocked in drawers with corresponding colors. This project ensures ready availability of appropriate equipment and supplies for pediatric emergency response.



The pediatric emergency cart in the Assessment Center.

