



Woman's 2016 nursing annual report we are nurses

we are
advocates



we are
educators

we are
team players

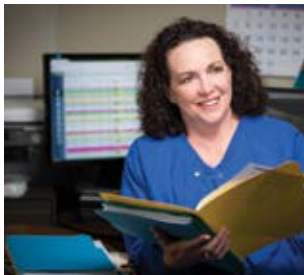


we are
leaders

we are
innovators

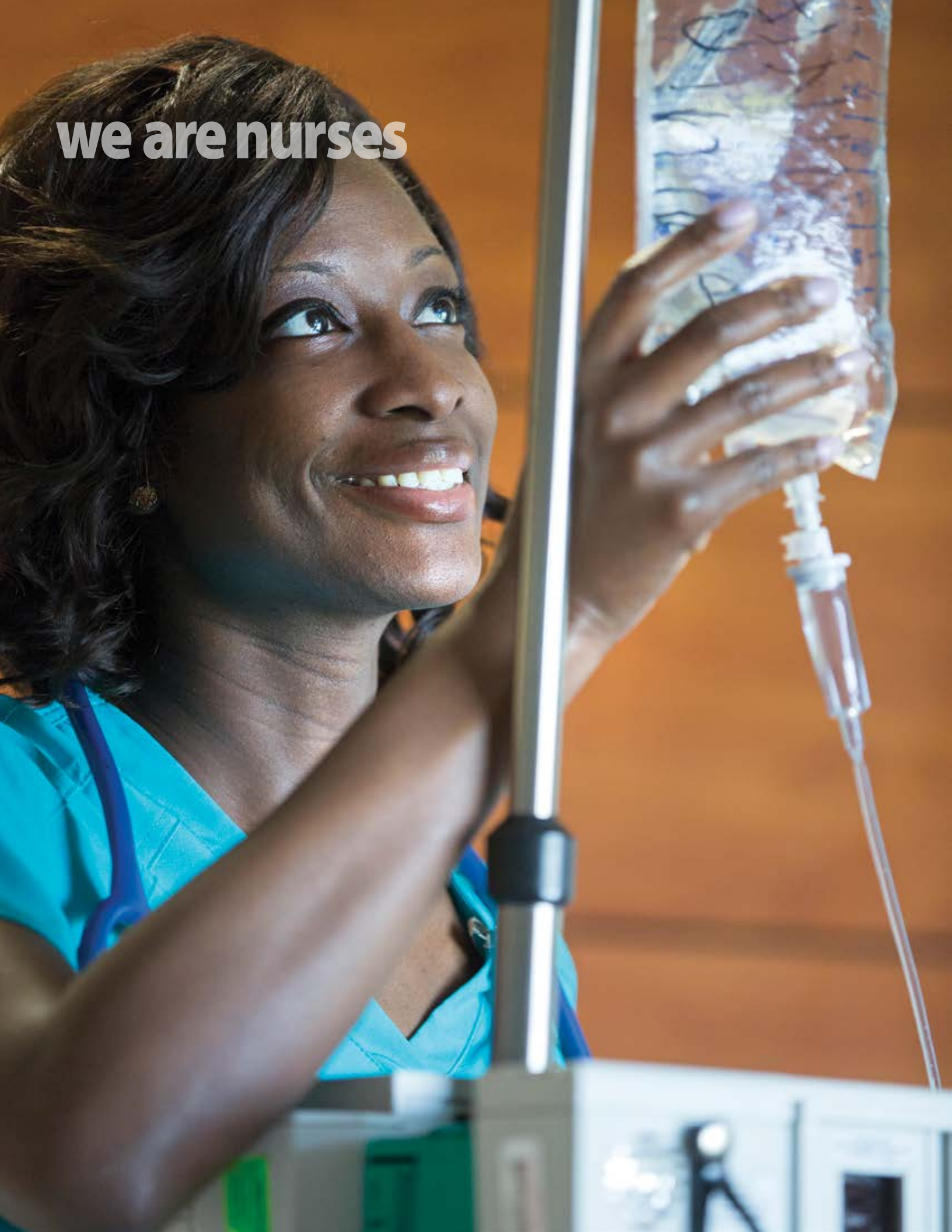


we are
listeners



we are
learners
professionals

we are nurses



to my colleagues in nursing



To My Colleagues in Nursing:

It is my great pleasure to share our 2016 Nursing Annual Report.

This report highlights the extraordinary work of Woman's nurses and patient care team, who provide exceptional care, centered on our patients, every day. The report is organized around the components of the Magnet Model, as well as the various roles of the nurse. Woman's nurses are innovators, advocates, team players, leaders, collaborators, teachers, scholars, and, most of all, compassionate caregivers.

Since 2006, Woman's has been recognized as a Magnet-designated organization, 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. Much of 2016 was spent preparing for our third Magnet redesignation, which was accomplished in 2017.

I am so proud to lead such an exceptional team of nurses. Thank you for all you do to provide extraordinary experiences for our patients and families each and every day.

*Sincerely,
Patricia Johnson, CNO*

transformational leadership

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

we are
leaders

mission

To improve the health of women and infants.

vision

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.

values

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

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

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



Bariatric Surgery Accreditation

For patients electing a surgical solution for obesity, Woman's offers a program that meets the highest standards for patient safety and quality of care. In March 2016, Woman's bariatric surgery program received national accreditation from the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP). The bariatric surgery team worked through rigorous standards in preparation for the accreditation site visit. The structure and processes required for



MBSAQIP accreditation promote patient safety and positive clinical outcomes. Maintenance of the accreditation requires ongoing review of processes and outcomes to ensure safe and competent metabolic and bariatric surgical care.

Leadership Development

In the spring of 2016, nearly 50 current and aspiring leaders of the Patient Care Division (primarily nurse leaders) participated in follow-up meetings to their 2015 inQ 360° feedback assessment and development plan meetings. These meetings allowed each leader to review his/her development plan with her immediate supervisor and document growth and progress that had occurred in the one year since development plans were created. This same group of participants are currently preparing for another full 360° assessment and a new development plan in 2017.

Likewise, in the summer of 2016, 19 additional patient care leaders (primarily charge nurses) went through the initial phase of the inQ process, receiving their first inQ 360° feedback assessment; and, each participant met with a coach to assist in building a development plan. Each development plan is comprised of activities/projects to facilitate growth in three to four selected leadership competencies (from a list of eighteen).

In addition to the inQ program, eight classes were taught in 2016 on leadership development topics, such as communication, conflict, emotional intelligence, innovation and change management. A total of 83 employees elected to attend these classes, of which approximately 70% are aspiring nursing leaders.

Clinical Resource Coordinator

Woman's RN Clinical Resource Coordinator (CRC) coordinates the evaluation and implementation of clinical systems, equipment and supplies. She leads the Product Standardization Committee, which provides organizational structure for these processes. Committee members perform detailed analyses of each new or changed product with focus on patient safety, staff safety and financial impact. In fiscal year 2016, the work of the CRC and the Product Standardization Committee resulted in an organizational savings of \$667,638.

In addition, the following initiatives were coordinated by the CRC in 2016.

- Trocar conversion in Operating Room
- Emergency Code documentation for the EMR
- Education on uterine tamponade balloons for postpartum hemorrhage management
- Midline catheter implementation and training
- Sharps container conversion across the organization
- Implementation of additional mobile vascular imaging systems
- Installation of Infant Code buttons in High-Risk Unit patient rooms
- Sequential Compression Device pump conversion
- Conversion of disinfectant product used throughout the organization
- Multiple product and equipment trials

exemplary professional practice

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

Reducing C-sections

For pregnancies when mother and baby are at low risk for complications, vaginal delivery results in improved maternal and newborn health.

Woman's continues to work

toward lowering its C-section rate by partnering with physicians as well as state and national organizations to reduce early elective inductions.

we are
collaborators

A first-time mother whose labor is induced before her body is ready is two to three times more likely to have a C-section. Over the past five years, Woman's has implemented new labor guidelines and techniques to encourage natural labor, improving medical outcomes and the patient experience.

"Wait on the Weight"

A new initiative called "Wait on the Weight" focuses on delaying non-essential procedures (such as weighing the baby, hence the name) to allow mothers to hold their baby immediately after delivery. This instant skin-to-skin contact during the first hour after birth is called "the magic hour" because it is crucial to improving health, establishing breastfeeding and creating a lifetime bond between mother and newborn.



"Breast is Best"

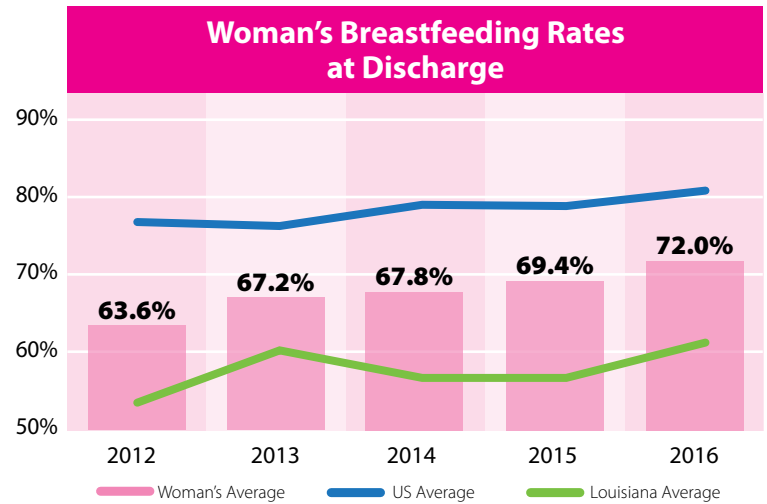
Breastfeeding provides a baby with the best nutritional foundation for beginning life and has tremendous health benefits for a new mother.

- More than 400 Woman's nurses received more than 8,000 hours of breastfeeding education in 2016.
- The hospital launched a Breastfeeding Support Group to enable moms and babies to come together in a private, comfortable setting to share their personal successes and challenges.
- Board-certified lactation consultants, lactation counselors, and staff with additional breastfeeding education begin educating and supporting new mothers throughout their hospital stay. Lactation consultants also provide specialized support to mothers of critically ill babies in our NICU.
- Following discharge, nurses continue the supportive relationship through classes, post-discharge consultations and a 24/7 "Warmline" telephone coaching service.
- To address racial disparities, a "peer-to-peer" counselor now visits new African-American mothers in the hospital to support breastfeeding.
- Overall breastfeeding rate and exclusivity rate by race were increased.

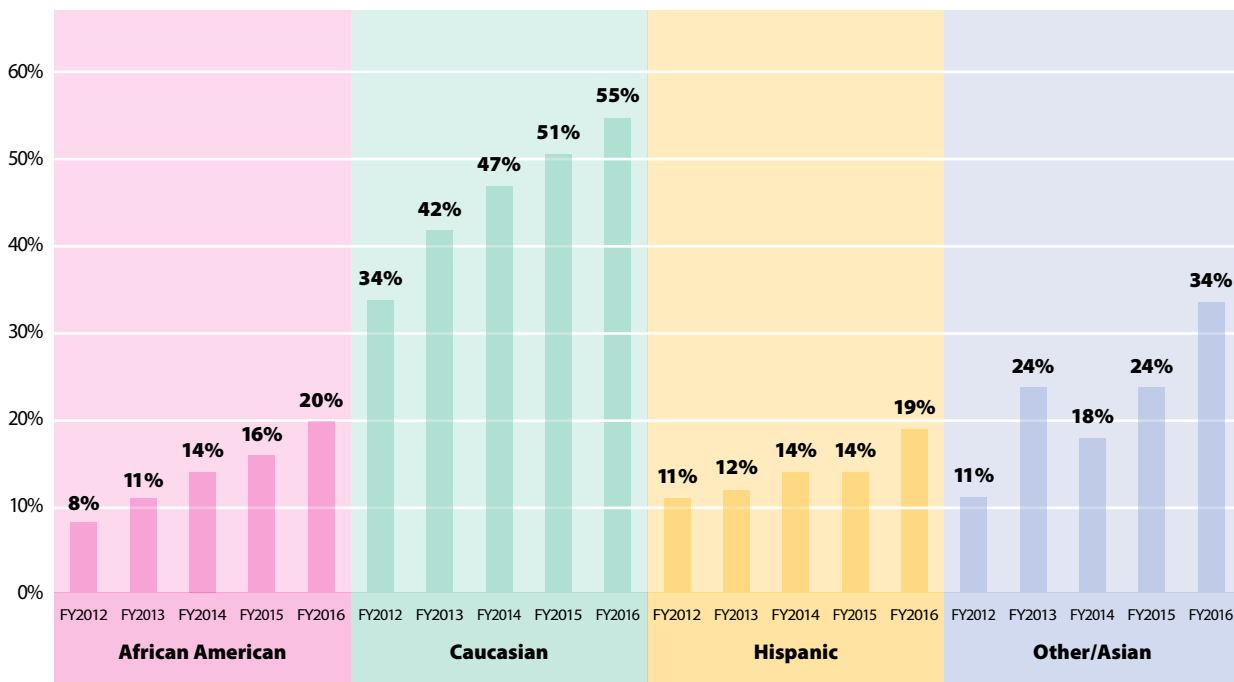


Woman's supports breastfeeding through community, state, national and global initiatives.

- Within our community, we focus on patient education and support groups;
- Statewide, Woman's received GIFT re-certification by the Louisiana Department of Health and Hospitals for protecting, promoting and supporting breastfeeding;
- Nationally, we are measured by the Centers for Disease Control and Prevention survey of Maternity Practices in Infant Nutrition and Care. Woman's scored a 92, significantly ahead of both the Louisiana average of 71 and national average of 75;
- Globally, Woman's continues its journey toward Baby-Friendly designation, an initiative of the World Health Organization and the United Nations Children's Fund. Their goal is to provide an optimal level of care that encourages infant breastfeeding and mother/baby bonding.



Exclusive Breastfeeding Rates by Race at Woman's



exemplary professional practice

Reducing Infections

Surgical site infections (SSIs) are associated with substantial morbidity and mortality, prolonged hospital stays and increased costs. According to the Institute of Healthcare Improvement (IHI), surgical site infections are largely preventable by utilizing evidence-based bundles. Elements of the surgical site infection bundle include, but are not limited to, appropriate and timely antibiotics and skin preparation.

In January 2016, three Woman's nurses attended a Lean Six Sigma Green Belt class sponsored by A-3 Healthcare through the Louisiana Hospital Association. The project team, which included Amye Reeves, Director of OB Services; Amie DeBenedetto, Clinical Business Intelligence Analyst; and Sarah Watts, Quality Analyst, focused their efforts on a project to reduce SSIs in patients undergoing cesarean deliveries. Because an SSI prevention bundle had not been published for this patient population, the team decided to apply a modified SCIP measure to create a cesarean section SSI prevention bundle.

After defining the bundle elements and parameters for each (antibiotic timing, skin prep dry time, thermoregulation and glucose management), a report was developed to analyze the past and current state of bundle compliance. The compliance rate was only 46% for scheduled cesarean cases and 51% for all cesareans.

After observation of cases, the team noted an excessive amount of steps (35 or more) in prepping the patient for cesarean. A more thorough investigation revealed barriers to compliance, including malfunctioning medication scanners, competing priorities for fluid hydration versus antibiotic administration, and necessary case supplies not being stored in the OR room. The team's next steps were to remove these barriers to compliance. Process improvements included creating a standard operating procedure for cesarean sections, moving necessary supplies into the OR rooms and working with Information Systems and Anesthesia to address other barriers. The project team also implemented timers in the ORs to improve compliance

with appropriate skin prep dry time. These improvements decreased the steps in the cesarean preparation process from 35 to 10. This gave the nurses more time in the OR, and because they could simplify the process, they had more buy-in and compliance rates improved. This fiscal year the compliance rate is 86% for scheduled cases and 81% overall.

To sustain improvements, automated charts, graphs and reports were created. Visual reminders of the standard operating procedure were posted in each Labor and Delivery room and throughout the Prep/Recovery area. A real-time dashboard was created with visual controls for bundle compliance. This dashboard is displayed in the charge nurse office and shows cases by nurse, detailing if bundle elements were met or not met. This allows the charge nurse or manager to address any pharmacy, maintenance, education or equipment issues in a timelier manner. This in turn prevents nurses from creating work-arounds and ensures process control by making sure they have the tools they need to perform their job.



Amye Reeves, Sarah Watts, and Amie DeBenedetto Davenport.



Process Improvements in Imaging Services

Nearly 44,000 breast procedures were performed at Woman’s in 2016, including 1,934 core biopsies and 425 needle localizations. Imaging RNs provide care and support to patients undergoing image-guided procedures and breast biopsies. Ongoing performance improvement initiatives in Imaging include attention to infection prevention practices such as high level disinfection of ultrasound probes and reinforcement of patient discharge instructions, focusing on personal hygiene. Care packages containing soap bars and pink washcloths are given to patients following breast core biopsy. In calendar year 2016, there were no reported or documented breast core biopsy infections. We strive to continuously evaluate our process improvement initiatives to ensure quality of care and ultimately, positive patient outcomes.



Caring for Sexual Assault Victims

Woman’s provides care and comfort following sexual assault. In 2016, 128 women were treated with dignity and respect in our Assessment Center, which includes a private waiting area and a designated sexual assault exam room. Woman’s nursing staff provides a fresh set of clothing for patients who must leave their clothes as evidence. Toiletries and a place to shower are also provided.

we are
advocates

Several changes in East Baton Rouge Parish have improved access to fast and consistent care. The East Baton Rouge Parish Coroner’s Office initiated the Sexual Assault Nurse Examiner Program, utilizing nursing staff in local emergency rooms to perform forensic medical exams. Woman’s also has a specially trained team who can respond to the immediate medical needs of a woman who has been sexually assaulted. 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 sexual assault survivors.

Every Drop Counts

Obstetrical hemorrhage remains the most preventable cause of maternal death in the United States; therefore, it remains a priority area for Woman’s obstetric care team. In 2015, Woman’s was awarded a Safety Star award / grant from the Louisiana Hospital Association (LHA) in support of this work. The grant was specifically designated for our hospital-wide blood loss quantification initiative.

we are
proactive

Woman’s active participation in the Louisiana Alliance for Innovation on Maternal Health (AIM) provided evidence-based resources, including the patient safety bundle and the maternal safety needs assessment. These

exemplary professional practice

resources were used to guide the development of the unique and innovative *Every Drop Counts* program, which included a more accurate method for quantifying blood loss, estimating cumulative blood loss across care areas, creating hemorrhage carts to improve timely response at the bedside, and standardizing nurse-to-physician communication about blood loss.

As a result of these interventions, the number of delivering patients reaching the first stage of hemorrhage (blood loss of >500mL for a vaginal delivery and >1000mL for a cesarean, as defined by the California Maternal Quality Care Collaborative) fell 10% in one year. This equates to prevention of potential harm for approximately 100 patients per month.

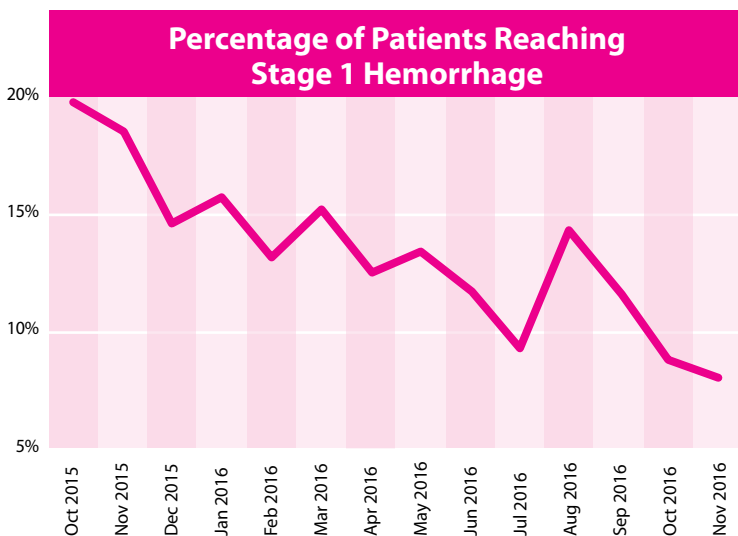
The *Every Drop Counts* program was celebrated hospital-wide in June 2016, highlighting the improvements in patient safety resulting from new products, processes, equipment, procedures and documentation.



Jill Thomas, Diana Boggs, Katie Bamber, Hailie Gremillion and Alainna Arena.



Amanda Milton and Lacey Sweezy educate peers about the hemorrhage cart.



Fighting Addiction

The rise in illegal drug use and abuse of prescription pain relievers throughout our nation has resulted in signs of drug withdrawal in approximately one infant born every hour. At Woman's, there has been a significant increase in the number of infants born addicted to opioids, a condition called Neonatal Abstinence Syndrome (NAS).

NAS occurs when a newborn is exposed to addictive

we are responsive

drugs in the womb before birth and then experiences drug withdrawal after birth. Babies with NAS are more likely to be born with low birth weight (less than 5 pounds, 8 ounces), have breathing and feeding problems and seizures, and remain in the hospital longer after birth.



The number of infants born with NAS in Louisiana quadrupled from 2003 to 2013, and Medicaid expenditures increased six-fold from \$1.3 million to \$8.7 million for inpatient-related services only.

In 2016, Woman’s formed the Perinatal/Neonatal Addiction Disorders Task Force to increase awareness of addiction and reduce its impact on our most fragile patients.

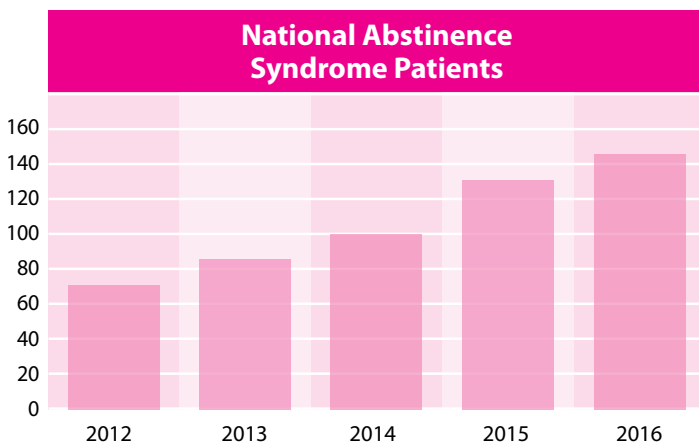
- A treatment plan was enhanced for infants who require pharmacologic intervention to help combat withdrawal symptoms.
- New nursing procedures were developed and implemented to improve care and outcomes.
- A reference guide was developed to assist physicians in discussing treatment options with new mothers.
- Partnerships were created with local substance abuse treatment programs to share information and gain community support. Collaborators include Baton Rouge Comprehensive Treatment Center, Addiction Counseling and Educational Resource and Our Lady of the Lake Mental and Behavioral Health Services.
- Cost reduction strategies and early intervention for patients were planned through collaboration with payers.
- Trending analyses were implemented to set a baseline for future improvements.
- Members of the task force participated in various state-led initiatives to better serve addicted women and infants.

Perinatal Palliative Care

Each year, more than 100 families experience a perinatal loss in Labor and Delivery. The unexpected loss of a pregnancy or a baby is devastating to patients, families and caregivers. Woman’s perinatal palliative care team works to relieve suffering and improve the patient experience during these difficult times.

Thanks to a generous donation from the Brown family, Woman’s received a CuddleCot, which is designed to ease the emotional suffering of families experiencing the loss of a baby. When every moment together counts, the CuddleCot gives families extra time to spend with their baby for bonding, taking photos and making mementos like footprints. The CuddleCot system uses a cooling pad to allow the baby to remain with his or her family after death.

Because of the incredible care they received in Woman’s NICU, the Brown family chose to give back in this unique and special way that would benefit other families. Woman’s has since obtained two additional CuddleCots with funds from the “We Are Woman’s” Employee Giving Campaign and an anonymous donor.



exemplary professional practice

Recognizing Excellence in Patient Experience

The Woman's experience is defined by quality care in a compassionate and caring environment. Woman's consistently exceeds state and national benchmarks for patient satisfaction. The Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey is a standardized, publicly reported survey that measures patients' perspectives of hospital care. Woman's 2016 scores are shown in the table below.

we are
caring



HCAHPS Survey	Woman's	Louisiana	National
Communication about medicine-always	77.6%	66.1%	64.5%
Communication about doctors-always	94.2%	85.0%	81.5%
Communication about nurses-always	86.0%	82.4%	80.4%
Discharge information-yes	94.3%	87.0%	87.5%
Pain control-always	80.7%	73.5%	71.4%
Responsiveness of hospital staff-always	78.8%	66.7%	67.6%
Room kept clean-always	81.2%	71.0%	74.5%
Room quiet at night-always	76.4%	69.5%	61.4%
Rate hospital - 9 or 10	84.0%	74.2%	73.0%
Would recommend hospital-definitely yes	94.4%	75.5%	73.3%

Guardian of Excellence

Woman's was named a Guardian of Excellence Award winner by Press Ganey Associates, Inc., for outstanding patient experience in both 2015 and 2016. This award recognizes top-performing healthcare organizations that have consistently achieved the 95th percentile or above for inpatient experience.



Women's Choice Award

Woman's received three Women's Choice Awards from *WomenCertified, Inc.*:

- America's Best Hospitals for Obstetrics
- America's Best Hospitals for Cancer Care
- America's Best Breast Centers

The Women's Choice Awards identify the nation's best hospitals based on robust criteria that consider clinical performance, patient recommendation ratings and women's preferences.

Management of Patient Feedback

In a collaborative effort between the Patient Experience, Information Systems and Data Analysis departments, an electronic survey comment management system was created and implemented to facilitate timely review

we are
listeners

and response to negative patient satisfaction survey comments. The previous process required manual review and tracking of responses or actions. The new system instills greater accountability and a mechanism for trending and tracking negative patient comments.





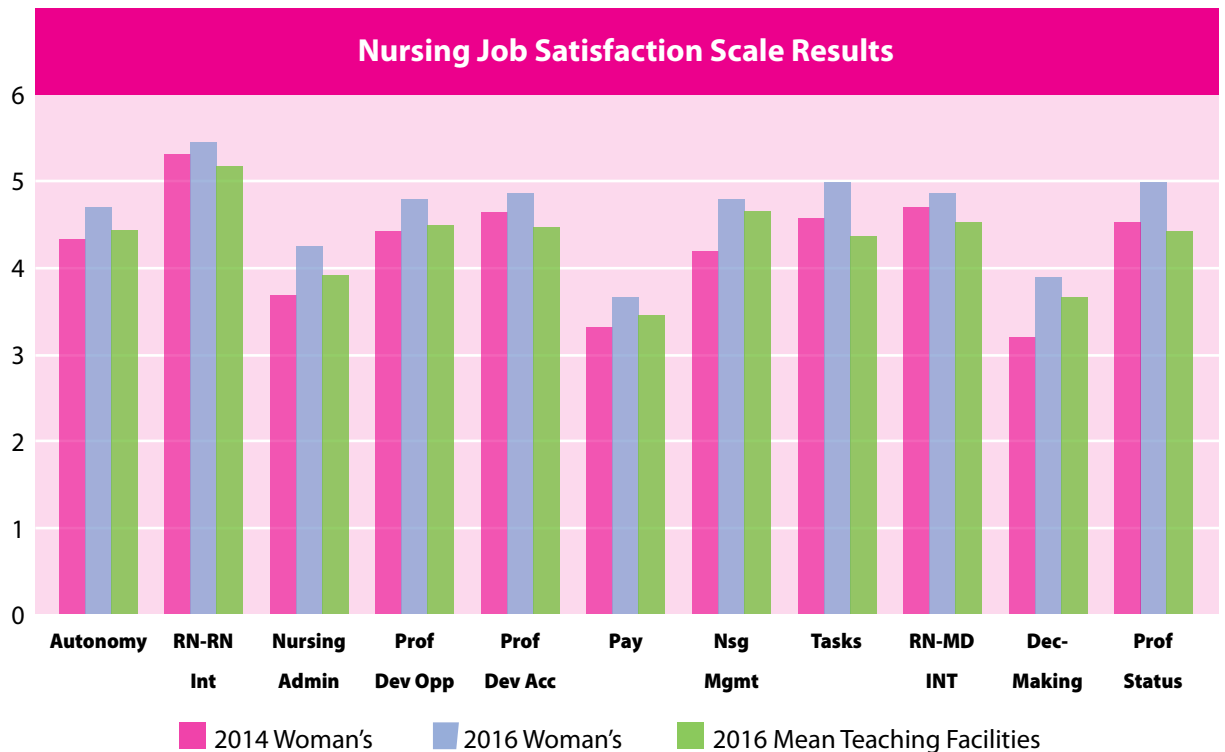
Patient Rounds using iRound Technology

Since 2014, Woman's nurse leaders have conducted standardized patient rounds using iRound for Patient Experience (IRPE) software. IRPE is a web-based application that facilitates collection of real-time feedback from patients during their hospital stay. Patient feedback in targeted areas is tracked and analyzed to identify trends and opportunities for improvement. In 2016, approximately 7,000 patient rounds were conducted in the inpatient units and the Assessment Center. These rounds led to the positive recognition of 1,230 employees and facilitated quick response to 112 patient/family concerns using the automated service recovery notification system. In late 2016, the system was expanded to outpatient Respiratory Care.

Nursing Satisfaction

Every two years, Woman's participates in the National Database for Nursing Quality Indicators (NDNQI) survey, a nationally benchmarked nursing satisfaction survey. In June 2016, eighty percent of Woman's eligible nurses participated (549 nurses) in the survey, exceeding the national participation average. Woman's nursing satisfaction was better than the national teaching facilities benchmark for all 11 survey categories and outperformed 2014 results in all categories. Organizational results are displayed below.

we are
team players



new knowledge, innovations and improvements

Nurses integrate evidence-based practice and research into clinical and operational processes

Fighting Sepsis

According to the National Institutes of Health (2017), every year, severe sepsis strikes more than one million Americans. The number of sepsis cases per year has been on the rise in the United States. (https://www.nigms.nih.gov/Education/pages/factsheet_sepsis.aspx). Sepsis is a life-threatening illness that can lead to tissue damage, organ failure and even death. In 2015, the Centers for Medicare and Medicaid Services (CMS) added its most comprehensive core measure to date to improve outcomes related to sepsis.

Woman's sepsis task force has taken several steps to reduce sepsis infections, starting with evaluating the hospital's performance and identifying opportunities for improvement. The team has rolled out several process improvements, including educating staff, standardizing order sets, and implementing a sepsis screening tool in the Assessment Center to detect sepsis in early stages. This screening tool was expanded to all nursing care areas in early 2017. These process improvements have increased Woman's compliance with the elements of the sepsis bundle. The sepsis task force will continue to evaluate performance and work toward the goal of early identification and intervention.

we are
innovators

Improving Patient Safety through Discharge Lab Follow Up

Delayed or insufficient treatment of patients during emergency department visits in which they are discharged with pending results is well documented. The Joint Commission maintains that delays in diagnosis can be a factor in sentinel events and describes that risk reduction strategies must be in place to allow for communication of any abnormal test results. Following an unexpected patient outcome associated with a positive urine culture that resulted after discharge and not addressed or treated, Assessment Center and Quality leaders gathered a

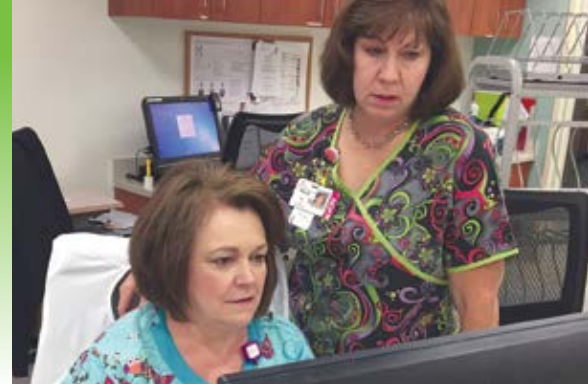
multidisciplinary team to develop a process to improve the identified patient safety gap.

The team worked with Information Systems to create a report that captures labs resulted after discharge. Nurses review the report daily and collaborate with physicians to ensure that notification was given and that appropriate treatment was initiated. After the report was developed and implemented, nursing and Information Systems worked together to further improve the process. A web-based page was created that lists all patients with resulted labs. From this page, the nurse reviews and documents interventions. This documentation becomes part of the patient's EMR. This new electronic process allows for a quick visualization of each patient's status. This initiative decreased the potential for harm from untreated abnormal lab results, thus improving patient safety and outcomes.

Obstetrical Triage Pilot

In January 2016, Obstetrical Services was invited to participate in a pilot for the implementation of the Association for Women's Health, Obstetric, and Neonatal Nursing's (AWHONN) new Maternal-Fetal Triage Index (MFTI). Historically in obstetric triage, the initial assessment of the maternal dyad has been done on a first come, first served basis, which left room for error in identifying the need for urgent or emergent care. Realizing this need, AWHONN developed the MFTI tool to standardize obstetrical triage. The MFTI provides five-levels of obstetric acuity that are used to determine the priority for the woman's urgency for provider evaluation.

Woman's recognized the need for a more effective obstetric triage process and agreed to participate in the pilot. Nurses and other clinicians were educated, documentation in the EMR was built, and the MFTI was implemented in August 2016. The MFTI-defined priority level is documented in the EMR and appears on the Assessment Center patient tracker as an indicator for nurses and physicians in prioritizing care. This new tool has been instrumental in streamlining and standardizing obstetrical care in the Assessment Center.



Cancer Rehabilitation Program

In 2016, Oncology RNs collaborated with the GYN oncologists and therapy staff to launch an oncology rehabilitation program. Implementation consisted of 30 hours of staff education, development of functional screening guidelines, patient education and outcome measurement. The team works with each patient on a personalized plan to increase strength and energy, alleviate pain, improve physical function, achieve emotional balance and boost the immune system. This new program is open to women and men in any stage of cancer and has demonstrated benefits during treatment and survivorship.

we are
goal-directed

Oncology nurses began the functional screening in March 2016 for GYN Oncology patients receiving chemotherapy with a goal of patients with four or more impairments being referred to the rehab program. From March to December 2016, 56 of the 73 patients (77%) who met criteria were referred. Patient surveys revealed that 90% agreed or strongly agreed that their ability to function had improved, and 100% strongly agreed that they would recommend the program to others.

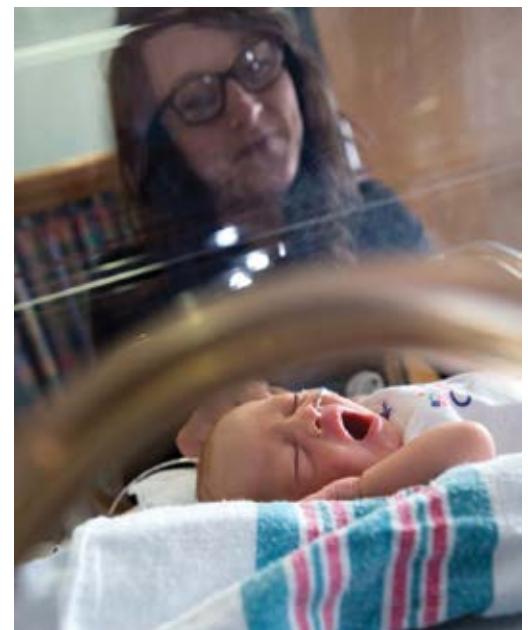


Reducing Chronic Lung Disease

Woman’s collaborates with hospitals worldwide through the Vermont Oxford Network Quality Collaborative to improve outcomes in the NICU. An initiative called NICQ NEXT focused on caring for the micro-premature infant and reducing long-term complications in this fragile population.

This two-year project increased the survival rate for these tiny babies due to evidence-based interventions such as specialized delivery room protocols during the first “golden hour” of life and reducing the time spent on a ventilator. Woman’s NICU team continues to work on reducing chronic lung disease. They are also focused on neuro-protective strategies in very small infants involving parents and staff caregivers. Over the next two years, they will concentrate on developing evidence-based specialized care for the micro-premature infant and developing a resource team to deliver that care.

we are
intentional



new knowledge, innovations and improvements

Innovative Competency-Based Approach to CPR Training

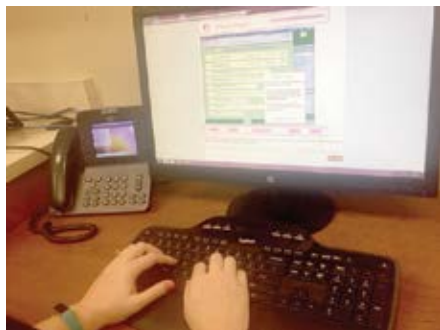
In November 2016, Woman's became the first hospital in Louisiana to adopt the American Heart Association Resuscitation Quality Improvement program. The RQI program uses realistic patient cases and a mobile simulation station for quarterly skills assessment. This portable, 24/7 "low dose, high frequency" method of training maintains life-saving CPR skills in a more efficient, convenient and meaningful way for staff.

we are
innovative



Interactive EMR Training

An interactive training system designed to facilitate training nurses and clinicians to Woman's EMR platform (Meditech) was implemented in late 2016. The Nursing Informatics team worked with a third party vendor to create seven individual training modules that provide an overview of Meditech's key functionality. The training modules provide baseline knowledge for new nurses, nursing students, medical students and residents before they begin working in a clinical setting.



Improving Operating Room Workflow

RealView Visual Workflow Management software is a workflow management and communications software tool that brings real-time visibility, information, calm and control to an otherwise chaotic surgical environment. 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. This system was fully implemented in 2016.

The Command Center is located at the OR control desk. The RealView command center provides the surgical team with continuous patient visibility and communication to physicians, management, staff and patient families, with the latest real-time updates for every surgical patient, optimizing clinical staffing, patient throughput, predictability and control, while eliminating hundreds of phone calls each day. It also provides continuous patient visibility and updates to physicians and staff via large format displays located in Pre/Post Op Areas, OR Control Desk and Staff Lounges. The system has electronic staffing boards to eliminate the need for "grease" boards. Staffing assignments are quickly and conveniently posted for OR rooms, breaks and relief. Surgeons stay continuously informed and updated of their daily OR schedule, patient workflows, exceptions and delays, including automatic notifications with the RealView Physician Mobile App for iPhones and Androids.

Interpreter on Wheels

In the summer of 2016, Woman's implemented an innovative tool to improve communication with patients needing translation services. LanguageLine Insight Video Interpretation, also known as the "Interpreter on Wheels," provides access to visual interpreting services for American Sign Language and 35 languages. Audio





interpretation is available in 240 languages. A grant was obtained from the LHA Trust Funds-HSLI Safety Grant Program to purchase 14 devices. The goals were to improve patient safety by providing access to visual interpreting services, increase utilization of the interpreter services due to increase in staff and patient satisfaction with the visual service, and to provide ready access to a sign language interpreter. Prior to implementation of the video technology, staff had to call a contracted sign language interpreter and wait for her to arrive at the hospital. The 14 devices were strategically placed throughout the hospital in inpatient and outpatient locations for ease of access.

Video interpretation provides a better experience for the patients and increases their understanding by being able to see the interpreter’s body language and gestures. It has also increased the ease of interpretation for staff. Comments from nurses include:

“I really like the interpreter on wheels because it is easy to access and patients seem to respond better seeing someone face-to-face.”

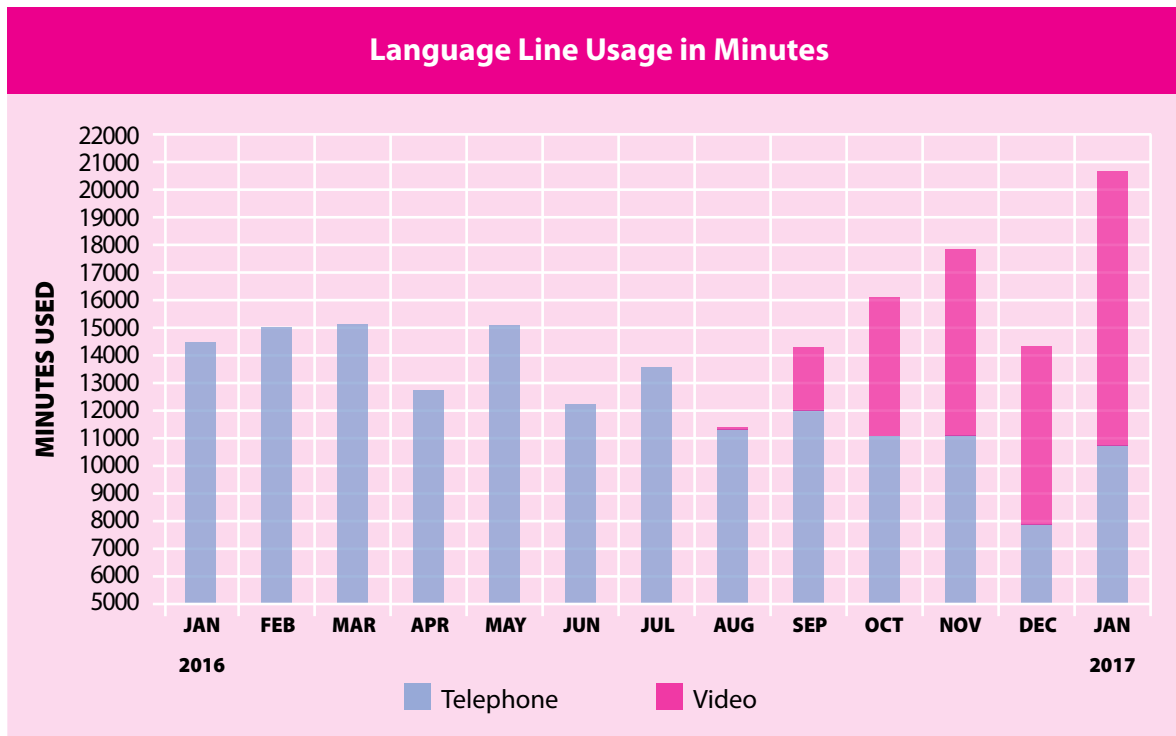
“I used it during a delivery. The patient said it was a better experience than a phone interpreter. The interpreter was able to use gestures to explain and clarify things.”

Since implementation, there has been a steady increase in usage of video services and an overall upward trend in total minutes of visual and phone interpretation services combined. This increase is shown in the graph below.

Jo-E Reader: Bedside Reading Program in the NICU

In summer 2016, Woman’s Neonatal and Infant ICU (NICU) began offering the use of bedside e-Readers to NICU families. Thanks to a generous donation, the NICU has six iPads with rolling stands that are loaded with over 20 children’s e-books and educational apps for NICU families. We encourage families to read to their babies, as well as to older siblings, to promote bonding and to encourage early language and literacy development. While being in the NICU is stressful and often unexpected, being able to read children’s books to even the smallest babies helps the family be involved in the infant’s care and development.

Language Line Usage in Minutes



structural empowerment

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

Recognizing Nurses and Celebrating Success

Five registered nurses were honored at the annual Baton Rouge District Nurses Association (BRDNA) “Celebrate Nursing” awards banquet. The “Celebrate Nursing” award honors nurses who have made a significant contribution to the community, healthcare, and the nursing profession. The following nurses received this recognition in May 2016.

- Jena Aucoin, RN, CPHQ, Quality
- Elizabeth Choate, BSN, RNC-OB, Nursing Administration
- Jessica Morris, BSN, RNC-OB, Labor & Delivery
- Jill Newell, BSN, RN, CCRN, Adult ICU
- Jacey Norris, BSN, RN, Adult ICU & High Risk Unit

we are
exceptional



Jena Aucoin, Jill Newell, Jacey Norris, Elizabeth Choate and Jessica Morris.



Additional nurses were nominated for Louisiana Nurses Foundation Nightingale Awards. This statewide award honors professional nurses who strive for quality and excellence in their service to the healthcare industry. Laurel Kitto, MSN, RNC-NIC, NICU director, was nominated for Nursing Administrator of the Year, and the following nurses were nominated for Rookie of the Year: Lauren LeBourgeois, BSN, RN, Med-Surg/Oncology; Macy Ott, BSN, RN, Labor and Delivery; and Crystal Martin, BSN, RN, Adult ICU.



Jessica Morris, Jacey Norris, Crystal Martin, Lauren LeBourgeois, Macy Ott, Laurel Kitto, Cheri Johnson, Amye Reeves and Mary Ann Smith.

During Hospital Week, four employees (including two nurses) were honored with “Golden Rule” awards for exemplifying Woman’s values of respect, innovation, compassion and excellence. Numerous employees were nominated by their peers for this honor.

- Amanda Milton, Labor and Delivery RN, received the *Innovation* award in acknowledgement of her contributions as a change agent and clinical resource in Labor and Delivery. She was instrumental in the development of an emergency hemorrhage cart for the L&D operating rooms and assisted in training OB staff to use a visual tool for quantifying blood loss.
- Debbie Dunn, Environmental Services, received the *Excellence* award for her consistent demonstration of passion for her work. Debbie is also known for her kindness and warmth, greeting everyone with a smile and a kind word.
- Kathleen Bosch, Patient Relations Coordinator, received the *Compassion* award for her tireless patient advocacy efforts to ensure that patients, families and visitors have the best possible experience at Woman’s.
- Laurie Legrange, Mother/Baby RN, received the *Respect* award for going the extra mile to make everyone feel welcome and help in any way possible to make patients and co-workers feel at ease.



Amanda Milton, Debbie Dunn, Kathleen Bosch and Laurie Legrange.

structural empowerment



Nurses Week 2016

Following the American Nurses Association theme of *Culture of Safety: It Starts With You*, Nurses Week 2016 was filled with activities and programs that celebrated the contributions of Woman's extraordinary nurses.

In the weeks leading up to the Nurses Week celebration, all hospital staff was given the opportunity to honor nurse colleagues through the "Recognize a Nurse" program. More than 100 nurses were recognized for providing exceptional patient care and demonstrating commitment to Woman's mission, vision and values. All nominated nurses received copies of the recognition forms, were recognized during Nurses Week, and were eligible for special prize drawings.

The week kicked off with Woman's tradition of the "blessing of the hands" by local clergy, followed by hand massages and neck/shoulder massages. All nurses who were nominated and/or received awards or special recognitions during the year were honored at a nursing recognition reception hosted by Patricia Johnson, Chief Nursing Officer. Operating room RNs Kristy Simmons and Barbara Friscia hosted "Tea and Talk" celebrations on all shifts. The two dressed up as Florence Nightingale and Clara Barton and served tea and refreshments to the nurses in a beautifully-decorated setting, while encouraging them to share stories and accomplishments. This event was incredibly popular, drawing about 400 nurses. Snacks and prizes were distributed to nursing staff throughout the week.

The week wrapped up with Woman's 10th annual Nursing Research Day program. At this program, nurses and other staff were invited to walk through, view posters, speak to nurse researchers, and learn about the resources available at Woman's for potential researchers. Twenty-two posters depicting studies conducted by Woman's nurses and local university graduate nursing students were included in the program. More than 80 nurses attended.

Nurses Week "Tea & Talk" Photos



Dana Vidrine, Lisa Lee, Kristy Simmons and Barbara Friscia.



Kelly Sasser and Laurel Kitto.



Pam Romero, Vaun Dell Ingalls and Kim Edwards.



Kristy Simmons, Patricia Johnson and Barbara Friscia.



Barbara Friscia, Kelley Puig, Meredith Gaudet, Lani Carter, Karrie Delise and Kristy Simmons.



Mandy Walters and Diane Davis.



Laurel Kitto, April Morris, Kim Centanni and Kelly Sasser.

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AWHONN State Convention

The Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN) is a professional nursing organization that promotes the health of women and newborns and sets forth standards that guide nursing care of obstetric and neonatal patients. In October 2016, Woman's hosted and co-sponsored the Louisiana State AWHONN conference. The conference featured a nationally renowned keynote speaker on the topic of perinatal quality and safety initiatives. Other topics included neonatal abstinence syndrome (NAS), infectious diseases during pregnancy, obstetric hemorrhage, reducing severe maternal morbidity and mortality, and natural delivery trends. It was a full-day conference featuring an exhibit hall. Many of the nurses attending were Woman's nurses, but more than 45 attendees came from more than 30 other cities and towns all over the state.

Nursing Orientation

In the fall of 2016, a team began an initiative to expand and enrich the nursing orientation experience, as well as to standardize common content across nursing units.

The expansion changed the program from a half-day of lecture to three days that incorporate both classroom content and skills stations that introduce/review key skills common among most of the nursing units. The revised program was piloted for nursing leadership in November 2016 and was formally initiated for all new nurses in January 2017.

we are
educators

Raising Awareness

Every year, children die from being left in hot vehicles. In an effort to raise awareness, Woman's began distributing free backseat reminder tags to families, physicians' offices and day care centers in 2016. The idea for the awareness tags came from Christy Cage, a Mother/Baby nurse. More than 7,000 tags have been distributed so far.



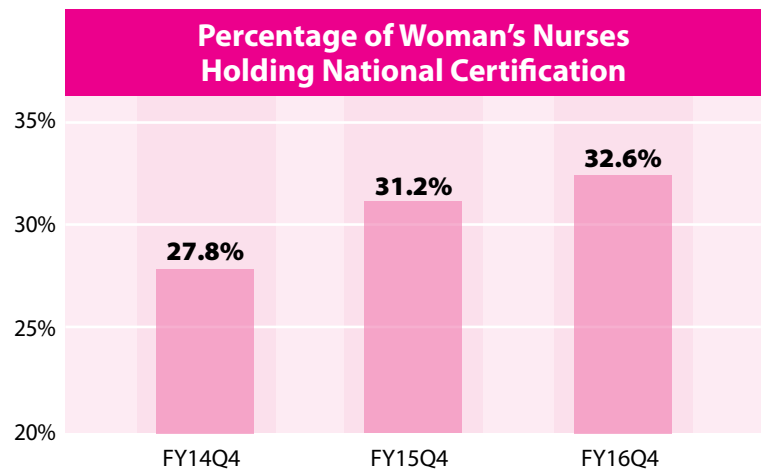
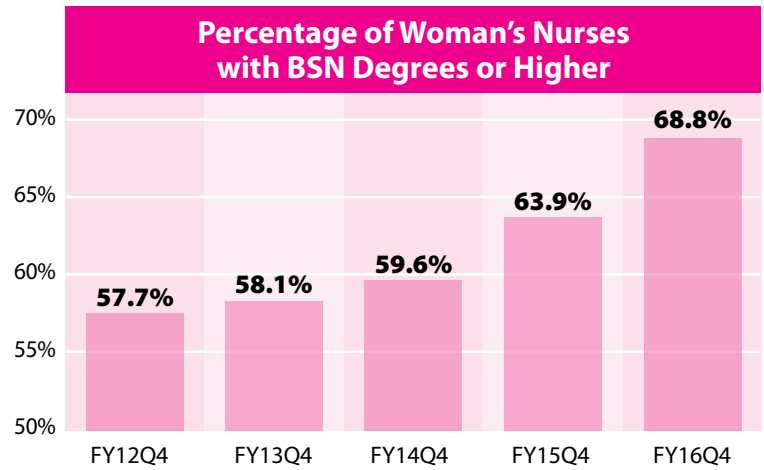


Advancing Nursing Education and Certification

Woman's nurses are encouraged to increase their knowledge and expertise through the pursuit of increased education and certification in their area of practice. Support for these endeavors is offered through the Educational Assistance program, which provides certification and tuition reimbursement, as well as certification bonuses. In 2016, \$115,348 was paid to nurses pursuing baccalaureate and graduate nursing degrees, and \$22,876 was awarded for nursing specialty certifications.

we are
scholars

As we work toward achievement of 80% baccalaureate or master's prepared nurses by 2020, we have increased the percentage of Woman's nurses holding these degrees by more than 10% in four years. We have also increased the percentage of nationally certified nurses by more than 4% since 2014.



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Certified Nurses

Lisa Abad, BSN, RNC-NICN

Val Adamo, BSN, RN, CPAN, CAPA

Lynda Adams, RNC-NICN

Marilyn Adams, BSN, RN, CNOR

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

Alainna Arena, BSN, RNC-OB

Amy Arnold, BSN, RNC-LRN

Jennifer Arnold, RNC-MNN

Jena Aucoin, RN, CPHQ

Laura Aucoin, BSN, IBCLC

Melissa Austin, RNC-NICN

Rhonda Bailey, BSN, RN, OCN

Collette Baker, BSN, RNC-LRN

Erica Barber, RNC-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

Ann Booth, RNC-OB

Jana Bordelon, BSN, RNC-MNN

Marlene Boudreaux, BSN, RNC-MS

Norma Brewer, BSN, RNC-NICN

Kelley Bright, RNC-OB

Amanda Brignac, BSN, RNC-MNN

Janet Brignac, RNC-OB

Latonya Brumfield, MSN, RN, CPAN

Sharron Buchart, BSN, RN, IBCLC

Esther Bucher, BSN, RN, IBCLC

Kayla Bueche, BSN, RNC-OB

Cherie Burns, BSN, RNC-NICN

Darcy Bush, MSN, RNC-NICN

Diane Buzard, RNC-OB

Shelisa Cager, RN, OCN

Lacey Callegan, MSN, APRN, FNP-C

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

Catherine Chachere, RN, CLS(ASCP)CM, CIC

Elizabeth Choate, BSN, RNC-OB

Linda Clouatre, RN, CNOR

Shelly Cody, BSN, RNC-NICN

Cynthia Collins, RN, CCRN-NICN

Janet Connolly, BSN, RNC-NICN

Michelle Cornett, BSN, RN, CNOR

Rebekah Coulon, RNC-OB

Danielle Coursey, BSN, RNC-MNN

Tina Covington, BSN, RNC-OB

Amy Crochet, BSN, RN, CPHN

Rhonda Crochet, BSN, RNC-MS

Tanyl Curry, BSN, RNC-OB

Lindsey Dalier, BSN, RNC-MNN

Lelia Davis, RNC-OB

Mary DeBarbieris, RNC-NICN

Paula Delee, BSN, RN, OCN

Karrie Delise, BSN, RNC-MNN

Tracy Maureen Dempsey, BSN, RNC-OB

Courtney Dencausse, RN, CNOR

Sherrie Dencausse, RNC-OB

April Denham, BSN, RNC-MNN

Meagan Dexter, RNC-NICN

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

Laura Dixon, BSN, RN, CPAN

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, MSN, APRN, AGPCNP-C



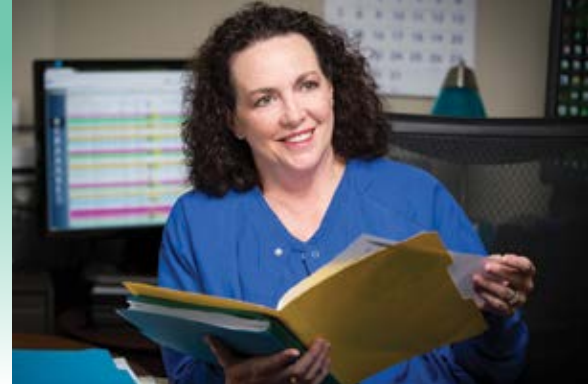
Pam Ellis, RN, CPUR
Tina Englade, MSN, RNC-LRN
Cynthia Evans, RNC-MNN
Nicole Fair, RNC-MNN
Cherie Falgoust, BSN, RNC-OB
Erin Felton, RN, CNOR
Courtney Fernandez, BSN, RNC-MNN
Bianca Ferris, BSN, RNC-OB
Robin Firmin, RNC-MNN
Chance Fontenot, BSN, RN, CNOR
Suzette Fontenot, BSN, RNC-NICN
Nicole Fox, BSN, RNC-MNN, IBCLC
Monica Frederic, BSN, RNC-OB
Julie Fresina, BSN, RNC-NICN
Barbara Friscia, RN, CNOR
Dawn Fuller, BSN, RNC-OB
Heather Garrot, BSN, RN, CPAN
Shira Gautreaux, BSN, RNC-MNN
Karen Geiger, RN, CAPA
Judy Gernand, RNC-MNN
Gillian Gick, BSN, RN, OCN
Tammy Grant, BSN, RNC-NICN
Cathy Griffiths, DNS, MSHCM, RNC-OB
Jessica Hagler, RNC-NICN
Jan Haindel, BSN, RNC-MNN
Megan Haley, BSN, RNC-OB
Angela Hammett, RNC-OB, ICCE, LCCE
Laurie Hancock, MSN, CPNP-PC, RNC-MNN
Stacey Harris, RNC-OB
Stephanie Hasenkampf, BSN, RN, OCN
Joleen Hays, BSN, RNC-OB
Inga Henagan, RNC-OB
Michelle Hill, BSN, RNC-NICN
Suzanne Hodges, BSN, CPHN
Elizabeth Hodnett, BSN, RNC-OB
Jeannine Holdridge, BSN, RNC-NICN
Misty Holley, BSN, RNC-MNN
Christa Hollowell, RNC-OB
Lauren Holmes, BSN, RNC-OB
Linda Horn, BSN, RNC-MS
Brandi Iles, BSN, RN, CNOR

Vaun Dell Ingalls, BSN, RN, CNOR
Claudia Jack, BSN, RNC-NICN
Cheri Johnson, BSN, RNC-OB
Patricia Johnson, DNP, RN, NEA-BC
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
Kristy Macklin, BSN, CMSRN
Trudy Madere, RNC-OB
Mary Beth Magee, BSN, RN, CNML
Lori Marcotte, RNC-OB
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
Michelle Stears McClung, RNC-OB
Karrie McCoy, BSN, RN, CCRN
Ashley McCrory, RNC-NICN
Megan McNemar, MSN, RNC-OB
Tiffany Medine, BSN, RNC-LRN
Tracie Meeks, RNC-MNN
Raymie Mejia, RNC-LRN
Amanda Milton, BSN, RNC-OB
Cachet Mitchell, RN, CPAN
Jenniffer Mitchell, RNC-NICN

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Nikki Moore, BSN, RNC-MNN
April Morris, BSN, RNC-NICN
Jessica Morris, 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-NIC
Amanda Newton, BSN, RN, CPAN
Tracy Nicolosi, RNC-NICN
Sharon Odenwald, BSN, RNC-OB
Paula Modicut O'Neill, MSN, RNC-OB
Lauren O'Quin, BSN, RNC-MNN
Allison Penny, RNC-NICN
Carrie Perry, MSN, AGNP-C
Heidi Picard, BSN, RNC-LRN
Callie Pitchford, BSN, RNC-MNN
Alicia Plumer, BSN, RN, CPAN
Debbra Pogue, APRN, ACNS, CCRN, TNCC
Christine Podnar, RNC-MS
Deborah Porterfield, RN, CPAN
Stephanie Powers, RNC-NICN
Kimberly Preston, BSN, RNC-OB
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
Michelle Rome, BSN, RNC-MNN
Leslie Roy, BSN, RN, CPAN
Mary Salaro, BSN, RN, CRN
Patricia Samrow, BSN, RN, COHN
Jacqueline Seale, RNC-NICN
Misty Shannon, BSN, RN, PNCB
Jennifer Silbernagel, BSN, RNC-NICN
Janelle Simmons, BSN, RNC-OB
Kristy Simmons, MSN, RN, CNOR
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
Claire Spano, BSN, RNC-OB
Nicole Square, PhD, RNC-NICN
Elizabeth Steddum, RN, PNP
Emily Stewart, RN, CNOR
Jennifer Stockman, BSN, RN, IBCLC
Vicki Strickland, RNC-OB
Samantha Taylor, BSN, RNC-MS
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
Allison Zeringue, BSN, RNC-OB



Fostering the Professional Development of Nurses

Woman's Nursing Professional Development Council, made up of nurses from all clinical areas, encourages and promotes the professional development of nurses and promotes nurse retention. Committee members promote growth and development of nurses from novice to expert through mentoring and promote the professional practice of nursing throughout the organization. The committee also oversees and manages the Nursing Professional Development Program (also known as Career Ladder) and evaluates and implements other professional development activities for nurses.

we are
professionals

We would like to congratulate our career ladder nurses and recognize the value they bring to the practice of nursing at Woman's. The nurses that have achieved or maintained RNII status are as follows.

Lisa Abad.....	NICU
Lynda Adams.....	NICU
Misty Allred	Mother/Baby
Kim Anderson.....	Presurgery Center
Angela Andrus	Labor and Delivery
Emily Andrus.....	Labor and Delivery
Ashley Armstead.....	Mother/Baby
Amy Arnold.....	Mother/Baby
Melissa Austin	NICU
Irene Bacon.....	NICU
Nancy Baker.....	Med-Surg/Oncology
Kathryn Bamber	Labor and Delivery
Erica Barber.....	NICU
Insa Becnel.....	Presurgery Center
Kellie Benton.....	Mother/Baby
Cassie Blanchard	Mother/Baby
Joye Blank.....	Mother/Baby
Julie Boise	NICU
Cindy Bonfanti	Presurgery Center
Cari Bradley-Waid.....	NICU
Amanda Brignac.....	Mother/Baby
Cherie Burns	NICU
Lacey Callegan.....	Mother/Baby
Belinda Campbell.....	Mother/Baby
Amber Carbo	Mother/Baby
Lani Carter	Mother/Baby
Tiffany Carter.....	Mother/Baby
Barbara Caruso.....	Surgical Care Unit
Amanda Cashio.....	Labor and Delivery
Kim Centanni.....	NICU
Monica Chanet.....	Mother/Baby
Karen Clark.....	Mother/Baby
Linda Clouatre.....	Surgery
Lindsay Cordell	Mother/Baby
Rebekah Coulon	Labor and Delivery
Danielle Coursey	Mother/Baby
Amy Crochet.....	NICU
Rhonda Crochet.....	Med-Surg/Oncology
Ashlyn Crosby	PACU
Lindsey Dalier	Mother/Baby

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Lelia Davis.....	Mother/Baby	Tammie LeJeune	Mother/Baby
Sherrie Dencausse	Surgical Care Unit	Pattie Lewis.....	NICU
Elizabeth Diaz	Presurgery Center	Elizabeth Lowrance	NICU
Beth Duff	NICU	Melanie Lupo.....	Mother/Baby
Mary Duffy.....	Assessment Center	Lori Marcotte	Assessment Center
Leslie Durr.....	NICU	Sharon Marks.....	Mother/Baby
Tasha Elbert.....	Labor and Delivery	Courtney Martin.....	Surgery
Megan Faucheux	Labor and Delivery	Crystal Martin.....	AICU
Erin Felton.....	Surgery	Kayla Martin	Mother/Baby
Erin Ferguson.....	Labor and Delivery	Carrie Mayo	NICU
Courtney Fernandez	Mother/Baby	Michelle McClung	High-Risk
Robin Firmin.....	Mother/Baby	Amy McCurdy.....	Mother/Baby
Julie Fresina.....	NICU	Nicole McGraw	Mother/Baby
Kishi Gauthreaux	Labor and Delivery	Angelina Metz	Mother/Baby
Shira Gautreaux.....	Mother/Baby	Cachet Mitchell.....	Mother/Baby
Karen Geiger	Surgical Care Unit	Brandy Mizell	NICU
Tammy Grant.....	NICU	Jessica Montague.....	Surgery
Betty Gray-Cameron.....	Presurgery Center	Stephanie Moothart	NICU
Hailie Gremillion.....	Labor and Delivery	Jaime Mosley.....	Mother/Baby
Natalie Gros	NICU	Jaci Mouch.....	Mother/Baby
Erin Watson Grunditz.....	NICU	Tracy Nicolosi	NICU
Megan Guitreau.....	Mother/Baby	Allison Penny.....	NICU
Megan Haley.....	Labor and Delivery	Melanie Perkins.....	NICU
Laurie Hancock	Mother/Baby	Heidi Picard	Mother/Baby
Joynita Harris.....	Mother/Baby	Stephanie C. Powers	NICU
Pollie Harris	Surgical Care Unit	Stephanie K. Powers	Surgery
Stacey Harris.....	Labor and Delivery	Julie Prejean.....	Surgical Care Unit
Halley Hayward	Mother/Baby	Kelly Puig.....	Mother/Baby
Allyson Hingle.....	Labor and Delivery	Rachel Purgatorio.....	Mother/Baby
Kim Hunt.....	NICU	Dana Randolph.....	Mother/Baby
Monica Hunt	Assessment Center	Malory Reynolds	Labor and Delivery
Stephanie Jobe	Labor and Delivery	Selina Reynolds	NICU
Mary Johnson.....	NICU	Emily Richard	NICU
Amanda Juban.....	PACU	Kristen Richard.....	Mother/Baby
Maryellen Kelly	PACU	Megan Riley	Labor and Delivery
Nicole Lambert.....	Mother/Baby	Adrienne Robichaux.....	Mother/Baby
Lauren Landreneau.....	Surgical Care Unit	Helen Robins.....	Mother/Baby
Nicole Landry	Mother/Baby	Shawntell Robinson	Mother/Baby
Sarah Laporte.....	NICU	Janet Roselli.....	Assessment Center
Laurie LeGrange	Mother/Baby	Gina "Lynn" Rumfola.....	NICU



Annette Savoy..... Surgery
 Jaime Schmolke Mother/Baby
 Marian Schopp Mother/Baby
 Melanie Schopp..... Mother/Baby
 Danielle Schwartzenburg..... Labor and Delivery
 Kristin Scroggins Labor and Delivery
 Ginger Sehon Assessment Center
 Lauren Shea..... Labor and Delivery
 Jenny Silbernagel..... NICU
 Kristy Smith Mother/Baby
 Claire Spano Labor and Delivery
 Emily Stewart Surgery
 Kim Taylor..... Surgery
 Callie Tranchina..... Mother/Baby
 Jessica Troxclair Mother/Baby
 Emillee Tunnard Labor and Delivery
 April Turner Mother/Baby
 Cheryl Varnado NICU
 Kathleen Verbois Mother/Baby
 Brooke Verzwylvelt..... Labor and Delivery
 Kathryn “Katie” Wallis..... NICU
 Lauren Watts..... Labor and Delivery
 Ashton Weatherspoon Labor and Delivery
 Paige Weber..... Labor and Delivery
 Lillia White..... Assessment Center
 Paula Zumo..... Surgical Care Unit

The nurses who have achieved or maintained RN III status in 2016 are listed below.

Val Adamo..... Presurgery Center
 Carolyn Alexander..... Surgery
 Ann Booth Labor and Delivery
 Marlene Boudreaux Med-Surg/Oncology
 Janet Connolly NICU
 Michelle Cornett..... Surgery
 Tina Covington..... Labor and Delivery
 April Denham Mother/Baby
 Kim Edwards Surgery
 Neva Elliott-Carter..... Mother/Baby
 Cherie Falgoust..... Labor and Delivery
 Bianca Ferris..... Labor and Delivery
 Nicole Fox..... NICU
 Barbara Friscia Surgery
 Jan Haindel..... Mother/Baby
 Joleen Hays Surgical Care Unit
 Linda Horn..... Assessment Center
 Brandy Iles Surgery
 Claudia Jack..... NICU
 Arlene Juneau Mother/Baby
 Karen Kelone Labor and Delivery
 Kelly Laborde NICU
 Kelli Lewis..... Labor and Delivery
 Karrie McCoy..... AICU
 Megan McNemar Assessment Center
 Angela Musso Labor and Delivery
 Chris Podnar PACU
 Kahne Prestridge..... Surgery
 Leslie Roy PACU
 Kristy Simmons Surgery
 Janice Windham Surgery

structural empowerment

Professional Organization Leadership

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

- Stephanie Hasenkampf, Med-Surg/Oncology – Secretary, Baton Rouge Oncology Nursing Society (BRONS)
- Rhonda Crochet, Med-Surg/Oncology – Membership Committee Chair, BRONS
- Marlene Boudreaux, Med-Surg/Oncology – Webmaster, BRONS
- Robin Firmin, Mother/Baby – AWHONN Baton Rouge Chapter Coordinator
- Jamie Schmolke, Mother/Baby – Program Planning Committee, AWHONN BR Chapter
- Amber Carbo, Mother/Baby – Program Planning Committee, AWHONN BR Chapter
- Neva Elliott-Carter, Mother/Baby- Louisiana Section Secretary/Treasurer, AWHONN
- Leslie Roy, PACU – Education Committee Chair, LAPAN
- Heather Garrot, PACU – Secretary, LAPAN
- Chris Podnar, PACU – Education Committee Member, LAPAN
- Alicia Plumer, PACU – Education Committee Member, LAPAN
- Barbara Friscia, O.R. – President, AORN BR Chapter
- Kristy Simmons, O.R. – Vice President, AORN BR Chapter
- Pollie Harris, Surgical Care – Board Member, AORN BR Chapter
- Marilyn Adams, O.R. – Board Member, AORN BR Chapter
- Cynthia Thomas, Perioperative Services – Board Member, AORN BR Chapter
- Carolyn Alexander, O.R. – Development Committee Member, AORN BR Chapter
- Stephanie K. Powers, O.R. – Nominating/ Leadership Development Committee, AORN BR Chapter
- Annette Savoy, O.R. – Secretary and Nominating/ Leadership Development Committee Member, AORN BR Chapter
- Chrystal Deslatte, NICU, BR Chapter Co-Chair, American Holistic Nurses Association (AHNA)
- Mary Debarbieris, NICU, Baton Rouge Chapter Co-Chair, AHNA
- Linda Travis, NICU, Baton Rouge Chapter Co-Chair, AHNA
- Katie Wallis, NICU, Baton Rouge Chapter Co-Chair, AHNA



we are nurses

100 Woman's Way
Baton Rouge, LA 70817
225-927-1300
womans.org



Woman's exceptional care, centered on you

Founded in 1968, Woman's is a nonprofit organization, governed by a board of community volunteers, providing medical care and services in order to improve the health of women and infants, including community education, research and outreach.

