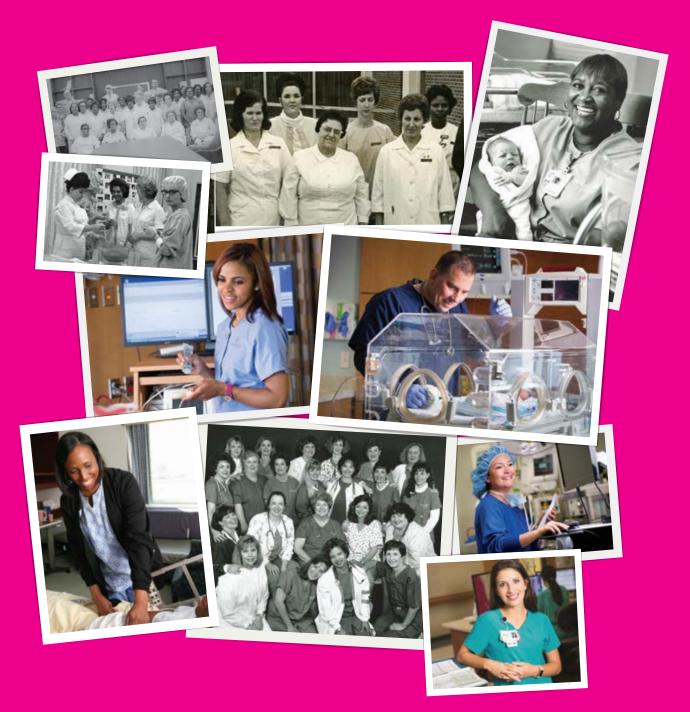
2018 Nursing Annual Report Styles may change but our commitment to nursing excellence never waivers



50 Years of Nursing



BORN 1968

About **WOMAN'S**



Woman's Hospital

is a 252-bed nonprofit hospital dedicated to the care of women and infants. 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 throughout their lives. Though best known for obstetrical and neonatal services, Woman's also offers surgery; oncology; therapy/rehabilitation; audiology; imaging/ breast care (including community outreach); pathology (including clinical and molecular biology/genetic research); fitness and nutrition; bariatric and cosmetic surgery; metabolic health; and a variety of other programs that meet our community's needs.

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

Celebrating Woman's 50th Birthday

In 1956, 21 local physicians began working to fundamentally change women's healthcare. Over the next



decade, they planned, financed and built a hospital exclusively for women. And on November 18, 1968, Woman's Hospital opened as one of the first women's specialty hospitals in the nation. This new hospital was thoughtfully named "Woman's" to convey the physicians' commitment to treating each woman's individual and unique healthcare needs over the span of her lifetime.

For the next four decades, Woman's Hospital grew tremendously. We no longer served only Baton Rouge, but a thriving region. By the end of 2005, every square inch had been expanded, rebuilt or remodeled at least once, and renovating the landlocked facility was no longer feasible. In 2008, Woman's broke ground on a new campus to allow for future growth, and on August 5, 2012, the new campus opened.

The Woman's Hospital of today was built upon trials and tribulations, endless determination and an unwavering commitment to improving the health of women and infants – a commitment that continues to this day.

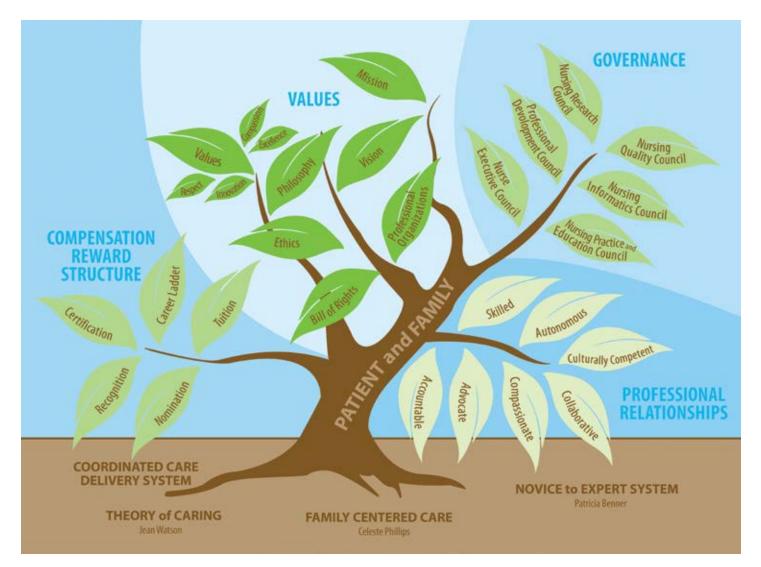


50 years of babies taking their first breaths. 50 years of cancer survivors completing treatment. 50 years of being there when needed most. 50 years of improving health. 50 years of saving lives. 50 extraordinary years.

Nursing Professional Practice Model: The Tree of Life

Woman's Professional Practice Model for Nursing illustrates the integrated scope of nursing practice and the organizational structure that supports patient care delivery. The model includes the theoretical framework, nursing care delivery system, nursing and organizational value structure, governance structure, professional relationships, and compensation and reward structure. As shown in the model, the central focus of the practice nursing is the patient and family.

The professional practice model, referred to as The Tree of Life, guides how nurses practice, collaborate, communicate and professionally develop. It depicts our core beliefs and the values that guide patient care and nursing practice. It recognizes the importance of nursing and the interdisciplinary collaboration required to provide exceptional care.



Nursing at Woman's

Woman's exceptional team includes more than 900 nurses, each of whom is dedicated to improving the health of our patients and the community. This commitment is exemplified by recognition as a Magnet[®] organization



since 2006. ANCC's Magnet Recognition Program[®] distinguishes healthcare organizations that meet rigorous standards for nursing excellence and is the highest honor an organization can receive for professional nursing practice.

Senior Nurse Leaders

- Patricia Johnson, DNP, RN, NEA-BC, Senior Vice President of Patient Care Services/Chief Nursing Officer
- Cheri Johnson, MSN, RNC-OB, Vice President of Perinatal Services
- Cathy Griffiths, DNS, RNC-OB, NEA-BC, Vice President of Quality



Nursing and Patient Care Directors

Peggy Dean, BS Pharm, MBA, Director of Pharmacy

- Laurie Schulenberg, MPA/HCA, BSN, RN, NEA-BC, Director of Educational Services
- Laurel Kitto, MSN, RNC-NIC, Director of Neonatal ICU 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
- Amye Reeves, BSN, RNC-OB, Director of Obstetrical Services & Adult ICU
- Wendy Singleton, MSN, APRN, ANP-BC, NEA-BC, Director of Nursing Administration, Clinical Informatics and Patient Experience; Magnet Program Director
- Mary Ann Smith, BSN, RN, OCN, Director of Med-Surg/Oncology
- Emily Stevens, LCSW-BACS, Director of Care Management
- Dana Vidrine, MSN, RNC-MNN, Director of Mother/Baby, Lactation & Transition Nursery



Lauren Landreneau, BSN, RN

For nearly 40 years, Lauren has shared her gift of serving women and families here at Woman's. During this time, she has cared for nearly every type of patient – postpartum mothers, high risk pregnant patients, pre- and post-op GYN surgery patients, cosmetic surgery patients, and patients in the breast center. Lauren held various charge nurse and head nurse roles through the years, but her true passion is bedside nursing. For the past 30+ years, she has lovingly prepared patients for surgery in our Day Surgery/Surgical Care Unit.

Transformational **LEADERSHIP**

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

The Breast and GYN Cancer Pavilion

After several years of planning, the Breast and GYN Cancer Pavilion opened on Woman's campus in spring 2018. Made possible through a partnership between Woman's Hospital and Mary Bird Perkins-Our Lady of the Lake Cancer Center, the Pavilion is the only one of its kind in the country and enables women to receive the highest level of breast and gynecologic cancer care. Combined resources provide patients with collaborative teams of medical and radiation oncologists, surgeons, radiologists, pathologists, research staff, nurse navigators, geneticists, nutritionists and social workers from three organizations.

The technology at the Pavilion is unparalleled; a highly advanced digital linear accelerator enhances precision, but with less radiation exposure and a shorter treatment time. Custom beam-shaping technology is used in conjunction with the accelerator to further enhance precision and spare normal, healthy tissue. New technology also includes real-time tumor tracking and alignment as well as technology that blends PET and CT images into one image for greater accuracy. This is key in detecting small tumors and in identifying tumor boundaries, allowing for more targeted and concentrated radiation to save healthy tissue.

High-Dose Rate Radiation for gynecologic cancer treatment, which allows for minimal exposure to healthy tissue using a device that delivers a high dose of radiation directly to the tumor site, is available in a dedicated suite that keeps the patient in one area for the entirety of her procedure. This design is unique to only a few facilities in the country. Planning and execution of HDR procedures requires the combined efforts of multiple departments and disciplines, including nursing, anesthesia, imaging, surgery, radiation therapy, medical physics, and sterile processing.

Bariatric Surgery Accreditation

In August 2018, Woman's became the only bariatric surgery program in Baton Rouge and one of only eight programs in Louisiana to be designated as an Optum Bariatric Center of Excellence by UnitedHealthcare. This designation is awarded to centers with superior care and outcomes, including fewer complications and readmissions, lower mortality and lower costs. To maintain this designation, centers are reviewed and recertified annually.

Woman's weight loss surgery program has also earned Blue Distinction Center Plus designation from Blue Cross Blue Shield, and accreditation from the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP) for expertise in bariatric care.



Woman's Achieves Baby-Friendly Designation

In March 2018, Woman's achieved Baby-Friendly designation from The Baby-Friendly Hospital Initiative, a global program of the World Health Organization (WHO) and United Nations Children's Fund (UNICEF). The initiative recognizes and encourages hospitals that offer optimal levels of care for infant feeding. Woman's is the largest birthing facility in Louisiana to achieve Baby-Friendly status, and has the distinction of being the 500th Baby-Friendly facility.



Laurie Hancock, Leah Terrell and Dana Vidrine celebrating Baby-Friendly designation.

This designation was several years in the making and is the result of more than 8.000 hours of staff education, policy changes and patient education, as well as a rigorous on-site survey. Documentation, patient care standards, physician orders, and operational processes were implemented to support Baby-Friendly practices. Free formula, bottles and other products promoting formula

use are no longer accepted from companies; the hospital now purchases infant formula at fair market value, and does not provide free samples or coupons to patients.

The "Magic Hour" initiative was implemented in 2015 to encourage a new mom to hold her baby immediately after delivery. Magic Hour is continuous and uninterrupted bonding time; and non-essential procedures such as weighing the baby are delayed. Skin-to-skin contact during Magic Hour is important because it facilitates the initiation of breastfeeding

Lactation support is readily available while a new mother is still in the hospital, and several resources – including a support group and phone "warmline" – are available after discharge at no cost. Mothers are educated on the benefits of breastfeeding and the importance of avoiding, artificial bottle nipples, pacifiers and supplements unless medically indicated while breastfeeding is being established. Mothers who formula-feed are educated on how to safely prepare formula and to feed their babies.

The Gift Redesignation

Woman's received The Gift (Guided Infant Feeding Techniques) redesignation to improve the health of women and infants by protecting, promoting and supporting breastfeeding. The Gift is designed to increase breastfeeding rates and hospital success by improving the quality of maternity services and enhancing patient-centered care.

The Louisiana Department of Health – Office of Public Health – Bureau of Family Health and the Louisiana Commission on Perinatal Care and the Prevention of Infant Mortality awards The Gift designation to Louisiana birthing facilities that improve hospital practices and policies that are aligned with the Ten Steps to Successful Breastfeeding, which are internationally recognized, evidence-based maternity care practices from the World Health Organization and UNICEF's Baby-Friendly Hospital Initiative that have been proven to increase breastfeeding initiation and duration. Policy development, staff education, patient education and provision of discharge resources for breastfeeding mothers are key components of the program.

Woman's was named the recipient of The Gift Above and Beyond award at the 2018 Gift Statewide Summit. The Gift Above and Beyond award was created in 2010 to recognize a Gift- designated facility each year that demonstrates a high level of breastfeeding promotion and support and also shows significant improvement in breastfeeding rates over time.



Laurie Hancock, Angela Hammett, Jessica Evins (Bureau of Family Health), Kelly Williams and Leah Terrell receiving The Gift Above and Beyond Award at the 2018 Gift Statewide Summit.

Perinatal Palliative Care Recognition

Woman's perinatal palliative care program has been in place for many years and continues to improve based on outcomes and feedback from patients and families. In 2017, the perinatal palliative care team leaders sought to earn national recognition for the program by applying for The Circle of Life Award. The Circle of Life Award, sponsored by the American Hospital Association, the Catholic Health Association, the National Hospice and Palliative Care Organization and the National Hospice Foundation, celebrates innovation in palliative and end-of-life care and recognizes programs and organizations that serve as models or inspiration for others.

In September 2017, Woman's was selected as one of only eight applicants for a site visit for The Circle of Life: Celebrating Innovation in Palliative and End-of-Life Care award. Recipients of the award and the Citations of Honor are then selected from the programs participating in the site visit phase. The site visitors were interested in identifying and validating innovation within the program, program strengths and weaknesses, and future plans.

The interdisciplinary team made up of perinatologists, neonatologists, social workers and nurses presented innovative aspects of Woman's program, which included the referral process, the follow-up call process, and the reporting system in place to capture program impact and effectiveness. The site visitors interviewed a past patient and her husband whose infant received palliative care. They spoke of the tremendous support they received while in the program and the wonderful care their baby received while here on this Earth for just 33 days.

Though Woman's program was not selected to receive the award, the site visit was an honor and a learning experience for the team. The site visitors were very encouraging and complimentary of Woman's perinatal palliative care program.

Leadership Development

Woman's Hospital nurse leaders were offered programs on a variety of topics aimed at increasing proficiency in the daily challenges of managing in the current healthcare environment. The Education department partnered with several organizations, including the Louisiana Hospital Association (LHA), the Louisiana State Board of Nursing (LSBN), and the Louisiana Action Coalition (LAC) to provide the most relevant information. Courses included Management of Aggressive Behavior (MOAB), Leading Through Uncertainty, Crucial Conversations, The Basics of Interviewing, Presentation Skills, and Use of Social Media.



April Morris, Paula Delee and Jessica Morris.

Three nurse managers, April Morris, Jessica Morris and Paula Delee, attended the Louisiana Action Coalition's Nursing Leadership Institute in January, 2018. They spent five days learning the essentials of Nurse Management, Financial Management, Human Resource Management, Performance Management, Foundational Thinking Skills, Technology Management

and Strategic Management. After their training, they felt more empowered to advance their careers.

In 2018, 55 current and aspiring nurse leaders participated in 360° feedback assessments and individual professional development planning to support strategic initiatives for the coming year as well as aid in succession planning. Each development plan is comprised of activities/projects to facilitate growth in individually selected leadership competencies. The development plan discussions between the participants and their leader provide an opportunity to benchmark growth, anticipate role changes and allow for strategic goal setting.

CNO Advisory Committee

In June 2018, Woman's Chief Nursing Officer, Patricia Johnson, implemented a CNO Advisory Committee to facilitate dialogue with clinical nurses. The committee, made up of frontline nurses from all clinical areas, meets for a monthly luncheon. The group celebrates successes and has genuine discussions about struggles in the work environment. The clinical nurses enjoy visiting with one another and hearing about the organization from the CNO's perspective. Changes have been implemented based on the information clinical nurses have shared in the meeting, and patient experience has improved as a result.



Karla Locke, BSN, RN

Karla started at Woman's in 1975 and has spent her entire career caring for patients and families in the neonatal ICU. She was one of the first nurses to be employed in Woman's NICU and was a member of our first neonatal transport team. Karla has significantly impacted the way we care for our tiniest and most vulnerable patients. Some of her accomplishments include implementing multidisciplinary rounds, discharge coordination, and follow up programs for NICU graduates; planning for the NICU expansion and the transition to single family rooms at the new hospital campus. She fosters learning among new nurses, nursing students, therapy students, social workers, and pediatric residents; and speaks to community groups about the specialized care provided in Woman's NICU.

Structural **EMPOWERMENT**

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

Best Places to Work

Woman's was recognized as one of the 2018 Best Places to Work in Healthcare by Modern Healthcare magazine. The award program includes an employee survey to identify and recognize outstanding employers in the healthcare industry. Woman's was once again the only hospital in the Baton Rouge area to receive this recognition, and the only healthcare organization to be named to the national list every year since its inception in 2007.

Woman's was named one of the 150 Top Places to Work in Healthcare by Becker's Hospital Review for the fifth consecutive year. This annual ranking recognizes hospitals, health systems and other healthcare organizations that are committed to fulfilling missions, creating outstanding cultures and offering competitive benefits to employees.

The Greater Baton Rouge Business Report named Woman's as one of the Best Places to Work in Baton Rouge in 2018. Woman's ranked 8th in the large employer category.

Recognizing Nurses and Celebrating Success

Five Woman's nurses were nominated for awards at the 17th annual Nightingale Awards gala. The prestigious Nightingale Awards, presented by the Louisiana State Nurses Association and Louisiana Nurses Foundation, recognize registered nurses who demonstrate excellence and innovation in the nursing profession. The following nurses were nominated: Lauren Holmes (Obstetrical Services), Clinical Educator of the Year; Linda Horn (Assessment Center), Nurse Mentor of the Year; Patricia Johnson (CNO), Nightingale Hall of Fame; Amanda Juban (Adult ICU), Clinical Practice Nurse of the Year; Jacey Norris (Adult ICU), Administrator of the Year; and Bridget Sutton (High-Risk Unit), Registered Nurse of the Year.

BRDNA Celebrate Nursing Awards

Eight registered nurses were honored at the annual Baton Rouge District Nurses Association (BRDNA) "Celebrate Nursing" awards banquet. The award honors nurses who have made significant contributions to the community, healthcare and the nursing profession. The following nurses received this recognition in May 2018.

Nancy Baker, RN, Med-Surg/Oncology

Rebekah Coulon, RNC-OB, Labor and Delivery

Siobhan Grady, BSN, Clinical Educator, Adult ICU and Assessment Center

Phillip Humphrey, BSN, Administrative Supervisor

Angela Loving, MSN, CIC, Infection Prevention Coordinator

Laurie Schulenberg, MPA/HCA, BSN, RN, NEA-BC, Director of Educational Services

Amanda Spencer, BSN, RNC-OB, Labor and Delivery

Allison Zeringue, BSN, RNC-OB, Administrative Supervisor



BRDNA award recipients Angela Loving, Amanda Spencer, Rebekah Coulon, Siobhan Grady, Nancy Baker, Allison Zeringue, Laurie Schulenberg and Phillip Humphrey.

National Oncology Navigation Excellence Award

Ashley Marks, a gynecologic oncology nurse navigator was honored with the 2018 Oncology Navigation Excellence Award from The Academy of Oncology Nurse & Patient Navigators (AONN+). The national award recognizes an oncology navigator for his or her outstanding contributions to oncology navigation, patient care and education.



Ashley Marks

Cancer is a challenging disease to navigate alone, and many cancer patients at Woman's need additional support. Ashley is a registered nurse and is certified in oncology nursing, breast care, hospice and palliative care. She guides gynecologic oncology patients from diagnosis to survivorship, helping them understand their condition and treatments as well as manage side effects; coordinates care among medical specialists; and connects patients to available community resources to overcome barriers to care. She also helps patients manage their psychosocial needs, such as work, school and home environments; relationships; mental and emotional health; and financial concerns.

DAISY and BEE Awards

Woman's Hospital launched the DAISY and BEE employee recognition programs in June 2018. The DAISY (Diseases Attacking the Immune System) Award is an international program that honors the skillful, compassionate care nurses provide every day. The DAISY Foundation was established by the family of J. Patrick Barnes after he died from complications of an autoimmune disease in 1999. During his hospitalization, Patrick's family deeply appreciated the care and compassion shown to him and his entire family. After his death, Patrick's family felt compelled to say "thank you" to nurses in a very public way. More than 3,000 healthcare facilities and nursing schools internationally have adopted the DAISY program.

Just as the daisy cannot bloom without the support of the bee, nurses cannot do their best work without the outstanding teamwork provided by other healthcare professionals. The BEE (Being Excellent Every day) Award was established at Woman's in conjunction

with DAISY to recognize team members outside of nursing for going above and beyond to care for patients, visitors and each other.

Online and handwritten nominations are submitted by patients, visitors, employees, physicians and hospital leaders. Approximately 100 nominations are submitted each month. Eligible nominees receive a nomination pin, a copy of their nomination and a letter from hospital leadership. Anonymous, multidisciplinary peer committees review blinded nominations monthly and vote to determine the winners. Award winners receive an award pin, a certificate and a special sculpture hand carved by an artist in Africa. By purchasing these pieces, Woman's is reaching internationally to support the social, economic and environmental well-being of the artists and their families. A surprise celebration is held in the winner's department, and a congratulatory banner is posted in the unit until the next month's celebration.



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| August | Heather Kenaley, Labor and Delivery |
|-----------|-------------------------------------|
| September | Lauren Rachel, Med-Surg/Oncology |
| October | Nicole Fair, Surgical Care Unit |
| November | Katie Clark, Mother/Baby |
| December | Janelle Simmons, Labor and Delivery |
| | |



Zinda Leblanc, Mary Beth Magee and Patricia Johnson congratulating October DAISY honoree, Nicole Fair.

Golden Rule Awards

During Hospital Week, four Woman's employees were honored with "Golden Rule" awards for exemplifying Woman's values of respect, innovation, compassion and excellence.

- Karen Thomas, RN, received the Respect award for showing respect and sensitivity in all interactions. She takes time to do a complete assessment of each patient's situation and develops an individualized plan of care that will facilitate success.
- Cynthia Greene, OB Tech, Labor and Delivery, received the Innovation award for accepting challenges, never giving up, and supporting new ideas to improve care. She strives for excellence in practice and motivates others to continually improve.
- Karla Locke, RN, NICU Discharge Coordinator, received the Compassion award for 40 years of service to NICU families. She consistently goes above and beyond for each family, ensuring that they have the resources to care for their baby at home.

• Janet Brignac, RNC-OB, LSU OB-GYN Clinic, was recognized with the Excellence award for exceeding the expectations of co-workers, patients, and guests. Janet displays outstanding character and compassion, and inspires others to do their best.



Golden Rule Award winners Janet Brignac, Karen Thomas, Cynthia Green and Karla Locke.

Shared Governance Council Re-design

In the summer of 2018, Woman's shared governance council structure was updated and refreshed to support clinical nurse decision making. The membership, purpose, responsibility and scope of decision making of each council was reviewed and updated. The councils are interdisciplinary and primarily comprised of clinical nurses from each patient care area. Each council has a chair, a co-chair, and a leadership facilitator.

The Nursing Leadership Council was created to share best practices and foster collaboration among nurse managers and administrative supervisors. This council is responsible for promoting effective management and nursing satisfaction, and ensuring resources necessary to support patient care are available.

INFORMATICS COUNCIL

Promotes quality and efficiency through clinical information systems; supports implementation of new technology

NURSING

Promotes effective management of clinical nurses; provides resources necessary to meet patient care needs; and supports nurse satisfaction through shared best practices

COUNCIL

Define, approve, implement, and maintain standards of practice in which clinical excellence and optimal patient care are promoted

NURSE EXECUTIVE COUNCIL

Supports excellence in patient care through oversight of shared governance councils, coordination of projects, ind allocation of resources

RESEARCH COUNCIL

Promotes nursing care quality and fosters the spirit of inquiry; supports nurse involvement in research activities; communicates results of research

QUALITY AND SAFETY COUNCIL

Evaluates and improves quality, safety, and patient satisfaction

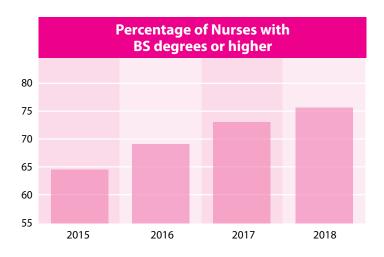
EDUCATION & PROFESSIONAL DEVELOPMENT COUNCIL

Promote educational initiatives that create a learning organization and enhance the education, professional development, and career advancement of nurses

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 FY 2018, approximately \$100,000 was paid to nurses pursuing baccalaureate and graduate nursing degrees, and over \$50,000 was awarded for nursing specialty certifications.

As we work toward achievement of 80% baccalaureate or master's-degreed nurses by 2020, we have significantly increased the percentage of Woman's nurses holding these degrees.



Fostering the Professional Development of Nurses

Woman's Nursing Education and Professional Development Council, made up of nurse educators and clinical nurses from across the organization, promotes the professional development of nurses and supports nurse retention. Committee members support the 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 (Career Ladder) and evaluates and implements other professional development activities for nurses. We would like to congratulate our 175 Career Ladder nurses and recognize the value they bring to the practice of nursing at Woman's.



Nursing Education and Professional Development Council.

Professional Organization Leadership

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

- Amber Carbo, Mother/Baby Planning Committee, Baton Rouge Chapter of Association of Women's Health, Obstetric, and Neonatal Nursing (AWHONN)
- Nancy Baker, Med-Surg/Oncology Membership Committee Chair, Baton Rouge Oncology Nursing Society (BRONS)
- Marlene Boudreaux, Med-Surg/Oncology Webmaster, BRONS
- Neva Elliott-Carter, Mother/Baby Louisiana Section Secretary/Treasurer, AWHONN
- Courtney Dencausse, O.R. Board Member, Baton Rouge Chapter of Association of Perioperative Registered Nurses (AORN)
- Chrystal Deslatte, NICU Co-chair, Baton Rouge Chapter of American Holistic Nurses Association (AHNA)
- Robin Firmin, Mother/Baby Chapter Coordinator, Baton Rouge Chapter of AWHONN
- Barbara Friscia, O.R. Secretary, Baton Rouge Chapter of AORN and Secretary, Louisiana State Council of AORN
- Heather Garrot, PACU Secretary, Louisiana Association of Peri-Anesthesia Nurses (LAPAN)
- Karen Geiger, Surgical Care Unit Governmental Affairs Chair, LAPAN
- Stephanie Hasenkampf, Med-Surg/Oncology Treasurer, BRONS
- Amanda Juban, Adult ICU Secretary, Baton Rouge Chapter of the American Association of Critical Care Nurses (AACN)

- Joelle Lemoine, Surgical Care Unit– Media Chair, LAPAN
- Karrie McCoy, PACU President, Baton Rouge Chapter of AACN
- Julie Neupert, O.R. Nominating Committee member, Baton Rouge Chapter of AORN
- Amanda Newton, PACU Media Chair, LAPAN
- Tracy Nicolosi, NICU Co-Chair, Baton Rouge Chapter of AHNA
- Christine Podnar, PACU Board Member, Baton Rouge Chapter of AORN
- Leslie Roy, PACU Education Co-Chair, LAPAN
- Annette Savoy, O.R. President-Elect, Baton Rouge Chapter of AORN
- Cindi Sanders, PACU AAPAN representative, LAPAN
- Jamie Schmolke, Mother/Baby Planning Committee, Baton Rouge Chapter of AWHONN
- Kristy Simmons, O.R. Board Member, AORN National Board of Directors; Advisor to Baton Rouge AORN Board
- Emily Stewart, O.R. Nominating Committee member, Baton Rouge Chapter of AORN
- Linda Travis, NICU Co-chair, Baton Rouge Chapter of AHNA
- Katie Wallis, NICU Chair, Baton Rouge Chapter of AHNA

Nurses Week 2018

Following the American Nurses Association theme of "Nurses Inspire, Innovate, Influence," Nurses Week 2018 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. A total of 117



AMERICAN NURSES ASSOCIATION

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 prizes.

The week kicked off with a recognition program hosted by the CNO, Patricia Johnson. All nurses who were nominated and/or received awards or special recognitions during the year were honored at the program. All nurses received small gifts and certificates of appreciation signed by Patricia during the week. Of course, Nurses Week would not be complete without Woman's traditional "blessing of the hands" by local clergy.

Day two of Nurses Week included treat baskets for the nursing units as well as an afternoon movie and popcorn. Nurses were invited to a viewing of "The American Nurse" and to enjoy some snacks. The documentary tells the story of five fearless nurses working on the frontlines of healthcare, caring for their patients through birth, death, imprisonment, war and poverty. Attendees were inspired by the stories and reflected on the difference nurses make in the lives of others.

Days three and four included hand massages and neck/ shoulder massages for nurses in a soothing respite area, along with Woman's traditional nursing tea party. Operating room RNs Kristy Simmons, Barbara Friscia, Annette Savoy and Emily Stewart hosted "Tea and Talk" celebrations on all shifts. They dressed up as characters from Alice in Wonderland and served tea and refresments to the nurses while encouraging them to share stories and accomplishments. Nurses Week ended with Woman's 12th annual Nursing Research Day program. At this program, nurses and other staff were invited to view posters and speak to nurse researchers. Twenty nursing research and evidence-based practice posters were presented by Woman's nurses and local university graduate nursing students. The first 50 attendees received a jar of aromatherapy bath crystals made by the Nurses Week planning committee.



Kristy Simmons (AKA Alice), Emily Stewart (AKA Queen of Hearts), Barbara Friscia (AKA White Rabbit) and Annette Savoy (AKA Mad Hatter).

Nursing Continuing Education

In 2018, QR codes were added to learning event evaluations. A unique QR code was created and provided to participants of each class. By downloading a QR reader app on their phone, participants were able to quickly and easily access the evaluation document for the course and complete it prior to leaving the event. This increased the percentage of completed evaluations and provided real-time feedback for the event organizers.

Nursing CE Day was the first event to use this technology. This one-day event, which provides nurses an opportunity to learn and earn CEs, was attended by nearly 50 nurses, both employees and outside participants. The sessions included:

- The Pressure is On: A Strategic Approach in Pressure Injury Identification and Prevention by Denise Hart
- Understanding your Sexual Health by Terrie Thomas, MD
- Heart and Mind: Impact of Stress and Depression on Heart Disease in Women by Sandra Brown
- Presentation Skills: The Do's and the Don'ts by Sharon Graves
- Medication Safety and Chronic Diseases: Diabetes and Hypertension by Fancy Manton and Michael Aucoin
- Mentoring and Professional Practice by Darcy Bush

This annual event offers an opportunity for employees to present as subject matter experts on topics about which they are passionate, and provides a valuable networking opportunity.

Enhanced Resuscitation Training

The American Heart Association states that rapid delivery of high-quality CPR is the greatest determinant of survivability from cardiac arrest. Woman's Hospital is committed to providing the gold standard in CPR training for our staff. This year was an exciting time for changes and updates in resuscitation training. The Education department hired a new coordinator, Ellen Tadman, who is dedicated to supporting, tracking and reporting on the outcomes of our various programs. An interdisciplinary CPR Task Force worked all year examining resuscitation policies and processes to insure that we align with national best practices. The result of their work is policies that support our quality goals and will increase accountability and professional practice among our staff. Employees who previously were not trained in CPR will now receive Heartsaver training, and many employees were moved into a higher level of training.



Data on the results of our 2016 implementation of the Resuscitation Quality Improvement program (RQI) are now available and reflect improvements in staff proficiency. Ellen and Laurie Schulenberg, Director of Educational Services, were present at the American Heart Association's groundbreaking announcement in July 2018 that traditional, live CPR classes, in which participants receive a two-year training card, are obsolete. The AHA and its partner, Laerdal Inc., formed a new partnership and will eventually require that all organizations who currently utilize AHA training for their CPR courses implement RQI training methodology. By starting this process in 2016, we are already experiencing the benefits of this technology. We also saw the addition of a new product to our suite of training courses in 2018. The two-day Initial Pediatric Advanced Life Support (PALS) training is now available through RQI and means that our employees no longer have to go to other sites to become PALS certified.

Educating the Community

Woman's offers a large variety of classes and programs for women and their families during all stages of life. Topics range from pregnancy and parenting to wellness and nutrition and many topics in between – all focused on a healthy, fulfilling life. Two new courses were offered in 2018, both of which are taught by registered nurses, and were created based on feedback and requests from community members.

Woman's began teaching The Safe Sitter[®] class in February 2018. A total of 12 classes were held in 2018, with 169 future sitters trained. The fun, interactive course covers the following topics:

- Safety Skills: Preventing unsafe situations and providing instruction for what to do when faced with dangers such as power failures or weather emergencies.
- First Aid and Rescue Skills: Learning to assess and respond to injuries and illnesses.
- Life and Business Skills: Screening babysitting jobs, discussing fees, and communicating with employers set students up for success. They practice these skills through role play.
- Child Care Skills: Learning the ages and stages of child development and tips to safely manage behavior of children in their care. Students also learn diapering and baby care.

Grandparenting 101 was introduced in July 2018 to refresh expectant grandparents on baby care, updated childbirth practices and home safety. The idea for the class came from one of Woman's childbirth education instructors, Meghan Bardwell, who wished her parents had known all of the tips that she teaches moms and dads-to-be. Over 40 new grandparents attended in 2018, and the class has received rave reviews.



We C.A.R.E.

During National Patient Experience Week in April, updated organizational service behaviors were launched during a Patient Experience Learning Fair. The updated service standards were created by a multidisciplinary team representing patient experience touchpoints across the organization and emphasize our commitment to the things that are most important to patients and customers. The learning fair included stations where participants learned about behavioral expectations, played games, and enjoyed refreshments and door prizes. As they were educated on the updated service behavior expectations, employees were asked to sign a commitment to C.A.R.E.

We C.A.R.E.



- Courtesy, Compassion, Communication
- Attitude, Accountability, Appearance
- R Respect and Responsiveness
- E Etiquette and Excellence

С



Imaging RNs Ann Prejean and Kaelyn Leblanc at the learning fair.



Lanie Vaughn coaching coworkers on service standards.

AWHONN State Conference

Woman's had the honor of hosting the 2018 Association of Women's Health, Obstetric and Neonatal Nurses Louisiana (AWHONN LA) Section Conference, titled "This is Us: 2018" in September. Nearly 100 nurses from all over the state attended the one-day event where they learned from renowned leaders in their field and networked with other professionals. Keynote speaker Amelie Karam wowed the audience with her timely presentation on Millennials. Dr. Denise Hancock, PhD, RN, LCCE, Director, Nursing Professional Development, Ochsner Medical Center, New Orleans presented "Reviewing the Evidence on Marijuana: What You Need to Know to Talk with Childbearing Women." Jeannie Harper, PhD, RN, Assistant Professor of Nursing, Loyola University, New Orleans presented "This Is Us: Understanding the Opioid Crisis in Pregnancy." Her presentation was followed by a live webinar with Elizabeth Drake, RN-NIC, MN, NNP, Clinical Nurse Specialist at CHOC Children's Mission Hospital, Mission Viejo, California on "Developmental/ Neuroprotective Diapering with Sensory Supportive Care." Attendees then participated in break-out sessions and visited the exhibitor hall. Feedback on the event was overwhelmingly positive, and 6.5 Nursing Continuing Education credits were awarded to participants.

Louisiana Perinatal Quality Collaborative Meeting

Woman's hosted the first annual learning session for the Louisiana Perinatal Quality Collaborative's (LaPQC) Reducing Maternal Morbidity Initiative on August 29. The LaPQC is an initiative of the Louisiana Commission on Perinatal Care and Prevention of Infant Mortality and is supported by the Louisiana Department of Health (LDH) Office of Public Health (OPH) Bureau of Family Health. It is a voluntary network of perinatal care providers, public health professionals, and patient and community advocates who work to advance equity and improve perinatal outcomes.

For the LaPQC Reducing Maternal Morbidity Initiative, the LaPQC is partnering with the American College of Obstetricians and Gynecologists' (ACOG) Alliance for Innovation on Maternal Health (AIM) and the Institute for Healthcare Improvement (IHI) to reduce severe maternal morbidity among pregnant and postpartum women who experience hemorrhage or severe hypertension. The learning session followed the initiative's "all teach, all learn" philosophy and included sharing of successes, interaction with initiative faculty, learning new changes for testing, enhancing improvement skills, and team planning.

LAPAN State Conference

Woman's hosted the 35th annual state conference of the Louisiana Association of PeriAnesthesia Nurses (LAPAN) on January 27. A record 145 nurses attended. Woman's nurses from PACU, Surgery, SCU, Pre-Surgery and Med-Surg/Oncology were among attendees. The day was filled with hot topics in perianesthesia nursing, a silent auction, vendor visits, a non-perishable food drive for the Greater Baton Rouge Food Bank, and fabulous door prizes. The theme, Peri Op Parade, was accompanied by a delightful Mardi Gras feast.



LAPAN State Conference



35th Anniversary LAPAN cake



Lee Davis, RNC-OB

Lee has cared for thousands of mothers, infants, and families in her 41 years of employment at Woman's. During this time, she worked in Labor & Delivery, Postpartum, Antepartum, Day Surgery, and GYN Surgery. She also held leadership roles as an administrative supervisor, perinatal clinical educator, and nurse manager of Mother/Baby. In these roles, Lee was instrumental in the development of the Antepartum unit, now called the High Risk Unit, and in the transition from separate newborn and postpartum care to the couplet care model we now use. For the past 18 years, she has welcomed new babies into the world in her role as a Transition Nursery nurse. She serves as a preceptor and has trained many new nurses on assessment and care of newborns. She has also served as an instructor for the Neonatal Resuscitation Program (NRP) for more than 20 years.

Exemplary Professional **PRACTICE**

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

GRACE Program

The opioid epidemic has caused devastating consequences throughout our country, including a sharp increase in opioid-related overdoses and the rising incidence of newborns experiencing withdrawal syndrome due to opioid use and misuse during pregnancy. As both the largest delivery service and the largest NICU in Louisiana, Woman's is in a position be a part of the solution to this problem and impact Louisiana's families in a meaningful way.

Through a three-year, \$1.2 million grant from The United Health Foundation, Woman's launched a new program that will address the needs of pregnant women with opioid addiction and their affected newborns. The GRACE (Guiding Recovery and Creating Empowerment) Program supports expectant mothers by providing comprehensive care coordination services specific to their needs during and after pregnancy. The program works with physicians, social service agencies, hospitals, mental health agencies, the legal system and other community partners to identify expectant mothers affected by opioid misuse, and connects them to the appropriate resources to aid in their care and recovery.

GRACE aims to reduce stigma and bias surrounding addiction and medication-assisted treatment, provide education and training to hospital staff, and decrease the number of Newborn and Infant Intensive Care Unit (NICU) admissions and length of stay. The program focuses on care coordination and education.

Once admitted into the GRACE program, patients receive a thorough assessment to evaluate their medical needs, mental health and psychosocial history. A nurse-social worker dyad provides comprehensive care coordination services, which begin with discussing treatment options and encouraging patients to enroll in medication-assisted treatment programs and/or other behavioral health services as appropriate to the individual. Throughout the program, patients receive support and education on topics including medication-assisted treatment, what to expect in labor, breastfeeding, Neonatal Abstinence Syndrome (NAS), safe sleep, safe medication storage and more. They receive regular phone follow-ups and may receive community resource support for housing, food, transportation, education and job training. Care coordination continues throughout the pregnancy until six weeks postpartum with a warm handoff to their community provider and support system.



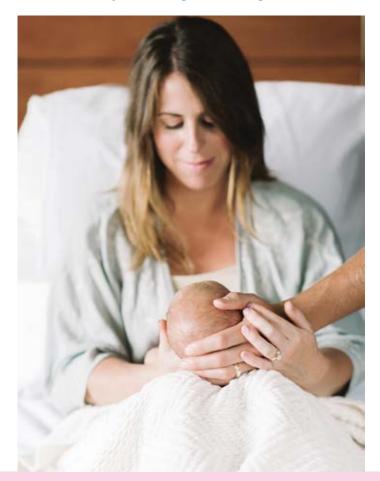
Enhanced Recovery after Cesarean

A cesarean section involves a longer recovery than typically experienced with a vaginal delivery. Patients recovering from a C-section often require opioids for pain management and remain immobile for a longer time period. Normal gastrointestinal function is also disrupted. C-section patients are now benefiting from a process called ERAS, or enhanced recovery after surgery.

As part of ERAS, non-opioid medication is used to reduce opioid-related risks or side effects. The potential for breathing difficulties in the hospital is reduced and long term opioid abuse is less likely. Maintaining normal gastrointestinal function before and after surgery is more likely with fewer opioids. Earlier ambulation after surgery enhances circulation, reducing the risk of clotting and promoting proper wound healing.

The enhanced recovery process begins in the obstetrician's office with education about proper fluid intake and discussions on pain management. The mother's nurse implements the ERAS process when they arrive at the hospital for labor and delivery. Patients receive long-acting pain medication during surgery, which provides pain relief for up to 24 hours. Ibuprofen and Tylenol begin in the recovery room along with fluids and a small amount of food. The routine non-opioid medications continue in conjunction with other ERAS interventions, which include earlier removal of the urinary catheter, ambulation as early as 12 hours after surgery, and a bowel medication regimen.

Early results show decreased narcotic use after C-section and shorter length of stay, benefiting both moms and babies. The nurses and physicians in Labor and Delivery and Mother/Baby, as well as lactation nurses and pharmacists, worked together to implement this process.



Post-Discharge Calls to Breastfeeding Moms

According to the Centers for Disease Control and Prevention, most mothers are not exclusively breastfeeding or continuing to breastfeed as long as recommended. Issues with lactation and latching are cited as major reasons why mothers stop breastfeeding early; many women face low milk supply or breast/nipple pain, and some babies have difficulty latching or maintaining latch.

The first few days after bringing a baby home from the hospital can be some of the most challenging for a breastfeeding mother. In an effort to support breastfeeding, mothers now receive follow-up phone calls from a nurse between two and four days after discharge. This proactive measure helps the nurse determine if further evaluation is needed to help a woman continue breastfeeding, and reminds her of breastfeeding resources, such as Woman's breastfeeding support group.

I'm so grateful that someone called to check on my baby's breastfeeding. I was about to call with questions and concerns.

Breastfeeding Mothe

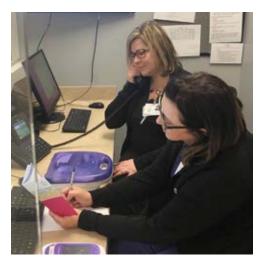
Improving Access to Community Resources for Breastfeeding Moms

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) provides nutrition benefits and breastfeeding support for low-income mothers and infants. A peer support person is now on site at Woman's to support breastfeeding WIC participants and work in tandem with Woman's lactation nurses. In her role, she provides breastfeeding assistance, encouragement and education. She is also able to certify WIC-eligible applicants at the bedside as well as refer to WIC's Breastfeeding Peer Counselor Program.

Improving Outcomes through Navigation and Care Coordination

In the fall of 2018, the LSU OB-GYN clinic implemented a nurse navigation program for high-risk diabetic mothers. Because clinic patients are seen by multiple providers throughout their pregnancy, inconsistencies in care processes and lack of care coordination was impacting outcomes for these patients. The goal of the program is to improve care and outcomes for high-risk patients with gestational diabetes mellitus (GDM). Measures of success will include decreased maternal admissions related to glucose control and decreased admission of infants to the NICU for hypoglycemia.

All patients with GDM or a history of GDM are referred to the high-risk RN navigators. The navigators facilitate timely, coordinated care, and work closely with patients and families to improve



compliance. Because these patients are at higher risk for complications, the nurses follow patients closely and collaborate with medical staff, dietitians and pharmacists to provide ongoing education and resources. They also coordinate appointments and follow up throughout the pregnancy and postpartum period.

SSI Prevention in OB Patients

Approximately 2.4% of all obstetrical patients who deliver by cesarean section at Woman's report a post-surgical infection. In 2016, a cesarean section infection prevention bundle was implemented in an effort to reduce the infection rate to less than 2%. After some difficulty impacting this rate, demographic information was analyzed and revealed a need to focus on patients most at risk. In response, our hospital identified the LSU OB-GYN clinic patients as having a significant amount of nonmodifiable risk factors that placed them at higher risk for post-surgical site infections.

In collaboration with the clinic, an evidence-based prenatal infection risk assessment/education tool was created, and a nurse navigator was dedicated to support patients identified as at risk. The nurse navigator educates highrisk patients and provides a surgical preparation kit to minimize risk of infection. Additional risk reduction strategies focused on modifiable risk factors such as diabetes control, high BMI and smoking cessation are implanted to ensure optimal health prior to a hospital stay. With the assistance of a grant from the Louisiana Hospital Association Funds for Safety, the program was implemented in November 2018. Anticipated outcomes include reduced incidence of post-cesarean infection for these high-risk patients. In addition to preventing infection, health promotion strategies implemented as a result of this program may positively impact overall health.

Pregnancy Nurse Navigator

In the fall of 2018, Woman's launched a pregnancy nurse navigator program to support expectant moms in the community. The pregnancy nurse navigator, Angela Hammett, is an experienced labor and delivery nurse, a certified Lamaze Childbirth Educator, and a mom. She has been instrumental in developing Woman's childbirth education courses and written materials, and served as a natural birth liaison for many years, focusing on helping women and families achieve the birth experience they desire.

The program supports women throughout pregnancy by answering questions via text message. It does not replace the care and support of patients' medical providers, but provides a quick response for simple pregnancyrelated questions and serves as a referral source. Since October, the pregnancy nurse navigator has held over 300 conversations with moms-to-be via text message and has helped another 100 moms find their obstetrician.

Family-to-Family Support

Woman's launched the Family-to-Family (F2F) initiative in 2017 to support the additional needs of adoption, surrogacy and other unique families. The program provides comprehensive training for staff to improve caregiver sensitivity, understanding and skills.

Training and education continued in 2018 and addressed principles of neutral compassionate care, such as recognizing personal perceptions and biases, learning about modern practices, and using updated language with patients and families. A multidisciplinary task force was created to identify and address potential barriers for patients and families, such as engaging them in developing a birth plan.

The program also focuses on policies, paperwork and workflows to meet complex needs. For example, with the

birth mother's consent, an infant can be discharged directly to the prospective adoptive parents as opposed to the attorney or adoption agency.

F2F focuses on connecting to community partners to create a network of resources for families. In November, Woman's hosted an informational and networking luncheon for key stakeholders, including Woman's nurse leaders and social workers, and community partners. The luncheon featured presentations by F2F national and local team members, as well as Woman's committee members outlining progress and announcing clinical process changes as a result of our F2F education and workgroup. Future plans include providing ongoing education to community partners and physicians about the program and associated processes.

My husband and I traveled from out of state to adopt our son, who was born at Woman's. His birth mother, and our new dear friend, was treated with the utmost care and respect. Our first Labor and Delivery nurse broke the ice many times with her wonderful humor, and even visited two nights later when she was back on duty. The baby nurses were just wonderful! They took great care of our son and respected the uniqueness of our open adoption. We were given a Mother/Baby room right next to our birth mom, which was an incredible blessing. Our first night nurse helped us through the awkwardness of 'sharing' time. This is our first adoption, and the staff was such an answer to our prayers. We're so grateful for their care and for treating us so wonderfully as guests.

- New Mother Adopting a Baby

Improving the Patient Experience in Imaging

In 2017 and 2018, nurses in the Imaging department worked to improve the experience of oncology patients by decreasing unnecessary IV starts. For patients with existing vascular access devices (VAD), the nurses worked toward accessing these devices for IV contrast rather than starting a peripheral IV. They set a goal of 80% usage of vascular access device for CT exams with contrast.

The nurses collaborated with Woman's gynecologic oncology clinic to initiate the project. They also solicited the assistance of the organizational Product Standardization Committee to purchase universal vascular access devices compatible with CT power injectors. The oncology surgeons began using the universal vascular access devices to promote a better experience throughout patients' course of care. Imaging RNs were trained by the unit manager and clinical educator of the inpatient Med-Surg/Oncology department to access, flush and de-access vascular ports. They also assisted in developing pre-printed physician orders to support the process. Their goals were met and exceeded with 87% of ports successfully accessed in 2017 and 89% in 2018.

Care for Sexual Assault Survivors

Woman's Assessment Center provides compassionate care and comfort to approximately 100 sexual assault survivors annually. At Woman's, a board certified OB-GYN and a certified Sexual Assault Nurse Examiner (SANE) work together to perform a forensic exam and provide treatment for sexual assault survivors. Woman's team works collaboratively with law enforcement and provides a private consultation room designed specifically for survivors to

meet with them and share their account of the assault. As an added measure of comfort, Woman's provides survivors with a fresh set of clothing, toiletries and a place to shower.



Removing Barriers for Sexual Assault Survivors

Assessment Center nurses identified a significant barrier to care for sexual assault survivors in our care. Postexposure prophylaxis medications are not only difficult to obtain, but are also very costly. Some drug companies provide financial assistance, but the process for obtaining this benefit is time consuming and tedious. Because these medications protect the patient from sexually transmitted infections, it is important that they are taken as directed for 30 days.

Woman's nurse leaders spent a great deal of time working with community partners to streamline this process and remove barriers to care for this fragile patient population. Woman's hospital pharmacy supplies a three-day starter pack of the medication to cover the patient until she is able to obtain her 30-day supply. This has been invaluable because most patients come in on weekends and/or nights. Employee Giving Campaign grant funds help to offset these costs for our pharmacy and survivors.

Nursing, Pharmacy and Social Services worked together to develop a process to support patients in obtaining the 30-day supply of post-exposure prophylaxis medication. Woman's Retail Pharmacy team members complete the financial assistance forms, fill the prescriptions, and call the patient to pick the medication. This process may take several hours to accomplish for just one patient, but it is worth it to ease the burden for these patients.

Woman's continues to improve care processes for sexual assault survivors based on feedback received from community partners and the survivors themselves. The local Sexual Assault Regional Team (SART) continues to commend our work and uses Woman's care delivery model as an example to other hospitals caring for sexual assault survivors.

Adult Palliative Care

Palliative care focuses on providing relief from the stress and discomfort of a serious illness, with the goal of improving quality of life for both the patient and the family. In 2017, the adult inpatient palliative care service for oncology patients was expanded to include a team of palliative care specialists. The expanded palliative care team, includes physicians, nurse practitioners, an RN palliative care coordinator, social workers, and other specialists working together to fulfill physical, emotional, spiritual and psychosocial needs of patients with prolonged and life-limiting conditions.

Timely access to palliative care can provide relief of symptoms and decrease suffering for patients with cancer. The oncology team, led by LaToya Sampson, BSN, RN, OCN, palliative care nurse coordinator, implemented processes to decrease barriers for timely referrals. The mean time from admit to a palliative care referral decreased from 4.0 days to 2.4 days. The percent of patients seen by palliative care physician or nurse practitioner within three days of admit was increased from 67% to 80%. This support improves the quality of life for the patient and her family.

Individualizing Palliative Care in the NICU

Once an NICU patient transitions to palliative care, in many circumstances, we have the ability to transform the NICU patient room into a home-like atmosphere for the family. Thanks to the support of Cullen's Babyland, we are able to remove the traditional hospital bed and bring in an actual baby bed. We ask the family to bring bedding and other accessories they planned to use at home in the baby's room. We play soft music, dim the lights and allow the family unlimited time with their baby.



Transforming our tiny patient's room into a home like atmosphere supports our family-centered model of care. It gives the gift of an experience that is not so sterile or clinical. If the baby is at the end of his or her life, it may be the only opportunity the family has to experience their baby in a regular crib with the items they planned to surround him or her with. It is a small gesture in our larger goal to make this devastating life event as beautiful as possible for our palliative care patients and their families.

Improving Care for our Tiniest Patients

Micropremature infants are born at less than 26 weeks gestation and are the most fragile patients cared for in Woman's NICU. Realizing that these babies have care needs that differ from that of other babies, a team of NICU nurses, respiratory therapists, neonatologists, and physical/occupational therapists developed specialized standards for the care of micropremature infants. To meet these neonates' developmental need for limited stimulation, standard changes related to lighting, sound management, and the frequency of hands-on assessments were implemented. These specialized care standards are aimed at reducing long-term morbidities and promoting neurodevelopment.

Infant-Driven Feeding in the NICU

Infant-Driven Feeding is a concept used in NICUs to nipple-feed infants using the cues they demonstrate. This differs from the traditional method in which the physician determines when a premature infant is physiologically ready to coordinate suck, swallow and breathe patterns, which are necessary for nipple feeding. Infant-driven feeding was piloted in Woman's NICU beginning in 2017, and fully implemented in 2018.

Infant-driven feeding is a multi-step process. Nurses assess infant readiness cues using a scoring tool. Once readiness cues are demonstrated consistently for 24 hours, the first nipple feeding is attempted. During the feeding, infants are assessed and scored for feeding tolerance (ability to feed without breathing difficulty). Parents are encouraged to participate in the process, which prepares them to feed baby at home. This method of feeding results in improved developmental outcomes and a lower risk of feeding difficulties post-discharge.

Medication Education for NICU Parents

Parents often struggle to understand the complex care being provided to their infants in the NICU. In the fall, the NICU implemented a new process to increase parents' understanding of the medications their baby is receiving. Following the model used by adult inpatient units, the NICU nurses worked with pharmacists to develop and implement medication education cards for NICU parents. The cards include the name of the medication and information on why the medication is being given, common side effects and the option to further discuss with the physician or a pharmacist. It is written in parent-friendly language and is available in English and Spanish. When a new medication is ordered, the NICU nurse provides the card to the parent(s) and reviews the information. Understanding the medications and treatment plan helps parents to be more informed and engaged in their baby's care.

"Words Matter" Campaign in the NICU

Caring for critically ill babies can be stressful for caregivers. Even though positive outcomes are rewarding for NICU nurses, these same nurses see their share of grief, family strife and shattered family dreams. These nurses not only possess highly technical clinical skills, but also serve as a source of emotional support for families, an advocate for babies, and a coordinator of complex care. This combination of responsibilities increases the risk for nurse burnout and compassion fatigue.

Woman's NICU leaders recognize the potential for burnout and place great emphasis on self-care and resilience. An annual theme is selected that reflects a positive affirmation or a goal for the coming year. Examples of past themes include "Gratitude" and "One person can make



Celeste Fenley, Morgan McCrory and Mallory Sotile.

a difference." The theme selected for 2018 was "Words Matter." "Words Matter" was an inspirational theme that encouraged thoughtful reflection on the words we use with patients and families, visitors, and each other, and the impact those words have.

At the end of each year, a poster is placed in the staff space for any NICU staff member or employee from other departments visiting the unit to jot down either a few words of gratitude, or in the case of this past year, a few words that had a positive impact on them.

Collaborating for Best Practice in the NICU

Woman's collaborates with hospitals worldwide through the Vermont Oxford Network (VON) quality collaborative to improve outcomes in the NICU. VON includes the world's largest database of high-risk infants from 1,200+ centers across 30+ countries to benchmark practices and outcomes, as well as identify areas for improvement.

Woman's NICU Quality team was recognized by VON for its performance improvement work in reducing morbidities in the very fragile micropremature population. Neonatologist Dr. Cindy Voelker and Neonatal Nurse Practitioner Penny Blanchard represented the team with a podium presentation at the annual VON collaborative meeting. The invitational presentation focused on the team's performance improvement strategies in the area of chronic lung disease and intraventricular hemorrhage in the tiniest babies in Woman's NICU. Poster presentations were also done on this work by the full team, in addition to presentations by our two parent representatives, Leigh Townsend and Wendy French.



NICU Quality Core Team members Dr. Cindy Voelker, Wendy French, Laurel Kitto, Leigh Townsend, Penny Blanchard, Tracy Nicolosi, April Morris, Mark Schorr and Stephanie Powers.

Recognizing Excellence in Patient Experience

Often referred to as the "Woman's Touch," Woman's strives to provide exceptional care and experiences for patients and families. 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 inpatients' perspectives of hospital care.

| HCAHPS Domain | Woman's | Louisiana | National |
|--|---------|-----------|----------|
| Rate Hospital – 9 or 10 | 83.8% | 74.1% | 72.4% |
| Recommend Hospital – definitely yes | 89.5% | 74.5% | 72.3% |
| Communication with Nurses – always | 85.7% | 82.6% | 80.4% |
| Communication with Doctors – always | 92.6% | 85.3% | 81.2% |
| Communication about Medicine – always | 75.9% | 66.5% | 64.7% |
| Communication about Pain – always | 77.5% | 65.5% | 66.2% |
| Responsiveness of Staff – always | 81.1% | 68.4% | 67.9% |
| Cleanliness (room kept clean) – always | 77.5% | 71.8% | 74.3% |
| Quietness (room quiet) – always | 77.6% | 69.0% | 60.7% |
| Discharge Information – yes | 93.4% | 86.9% | 87.3% |
| Care Transitions – strongly agree | 71.9% | 57.5% | 53.6% |

* Fiscal Year 2018 scores

Woman's seeks patient feedback from all areas in which care is provided. Patient satisfaction with Ambulatory Surgery, NICU and outpatient services also exceeds state and national benchmarks.

| Woman's Service | Woman's | Louisiana | National |
|--|---------|-----------|----------|
| Ambulatory Surgery – overall satisfaction | 97.2 | 94.5 | 94.0 |
| Assessment Center – overall satisfaction | 87.8 | 87.3 | 87.0 |
| NICU – overall satisfaction | 93.9 | 88.6 | 89.2 |
| Outpatient – overall satisfaction | 95.3 | 94.1 | 93.3 |
| Outpatient Oncology – overall satisfaction | 95.2 | 92.7 | 92.8 |

* Fiscal Year 2018 scores

Nurse Retention

After experiencing an increase in new nurse turnover, Mother/Baby implemented a program that supports new nurses through the first year of employment. Using The Advisory Board's First Year Nurse Retention Toolkit, approaches targeted skill development and loyalty, as well as emotional and social support for new nurses. The strategies included retreats for newly hired nurses to facilitate social networking and sharing of challenges and victories. Retreats occur at 30, 60, and 90 days of employment, and one-year check-ins with a nurse manager fostered open dialogue. Retreats are facilitated by the Mother/Baby Quality Manager and experienced clinical nurses Lani Carter and Erica Keller. Lani and Erica serve as ongoing resources and mentors for the new nurses. As a result of this program, first year turnover for new nurses decreased from 44% to 4.5%.



Mother/Baby nurses Sarah Sims, Samantha Mulina, Lauren Lombardino, Jana Latuso and Shelby Johnson receiving certificates at a retreat acknowledging one year of employment with Laurie Hancock, Lani Carter, Erica Keller and Tina Englade.

Guardian of Excellence Award

For the 4th consecutive year, Woman's was named a Guardian of Excellence Award winner by Pres Ganey Associates, Inc. This award recognizes top-performing healthcare organizations that have consistently achieved the 95th percentile or above for patient experience. The 2018 Guardian of Excellence Award recognized achievements in both inpatient care and ambulatory surgery care.





Arlene Juneau, BSN, RNC-MNN

Arlene began her nursing career at Woman's in the summer of 1982. During her 36+ years of service, she has cared for post-surgical GYN patients, expectant moms with high risk pregnancies, and new moms and babies. In 1998, she transitioned from caring for new moms in the postpartum unit to providing couplet care to both new moms and babies in the Mother/Baby department. Arlene is a recognized leader in the Mother/Baby unit and shares responsibility for creating schedules for the large department. In 2014, she was instrumental in supporting the conversion of scheduling software systems. Arlene is a charge nurse, serves as a preceptor to new nurses, and continues to mentor others.

New Knowledge, Innovation and IMPROVEMENTS

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

Enhancing Communication in the Assessment Center

With the support of Woman's Operational Excellence team, the Assessment Center piloted the use of a huddle board to enhance communication. The goal of the pilot was to involve the clinical team in performance improvement activities, facilitate transparency, increase engagement and promote real-time communication. The board is standardized to include information addressed during unit huddles and is in a location that is accessible to clinical staff, physicians, leaders and patients/visitors.

The huddle board displays unit statistics, quality metrics, PI goals, staff kudos and general information. The whiteboard also has sections for each of the following topics: plan of the day, PICK charts (which include staff suggestions and improvements), a recognition area, a problem-solving area, and a communication area for new policies, memos and procedures. The project began with staff training on the concept of huddles and how to perform huddles. Once the board was installed, the huddles began twice daily on each shift. Huddles are typically led by the unit charge nurses but can be performed by any team member. Huddles last 5-7 minutes and involve all available clinical staff and providers. Environmental Services team members and administrative staff also often attend.

The huddle board and associated processes were well received by Assessment Center staff. It has helped everyone to feel connected on a real-time basis and has improved morale and fostered inclusivity for the entire team. The success of the pilot program led to the permanent adoption of this process in the Assessment Center.



Assessment Center team members during huddle.

Virtual Lactation Consultations

To make breastfeeding consultations more convenient for busy mothers, Woman's introduced virtual lactation consultations in April 2018. The service, called "Breast-Time," allows women to video chat with certified lactation nurses through mobile devices in the convenience of their own homes. During a one-hour BreastTime consultation, a certified lactation nurse provides guidance for breastfeeding concerns and challenges. Though some healthcare organizations across the country are providing telehealth services, Woman's is one of the few hospitals in the country providing telehealth specifically for at-home breastfeeding consultations.



Technology for Improving the Patient Experience

Noise in hospitals not only causes dissatisfaction for patients and families, but also interferes with rest and healing. Based on patient feedback, nursing, environmental services, and patient experience leaders identified a need to decrease noise in patient care areas. In the summer of 2018, sound masking devices were installed in patient rooms and nurses' stations in Labor and Delivery, High-Risk Unit, Adult ICU and Mother/Baby. These devices were already in use in the Assessment Center and had proven effectiveness.

The sound masking devices work by producing an ambient sound, similar to the sound of airflow, that is specifically engineered to the frequency of human speech and reduces sound associated with conversation. Sound masking does not cancel sound or eliminate all speech noise in an environment; it simply reduces the level at which conversations and unwanted sounds can be heard.

Since full implementation in July, inpatient satisfaction with quietness has increased dramatically. Woman's finished 2018 in the 99th percentile nationally for patients' perception of the quietness of the hospital environment.

Simulation Training

Active learning through simulation improves staff competence, confidence and communication when managing complex patient situations. Team building, effective team communication and collaboration are key components of simulation training. Simulation training is an evidence-based learning technique for all members of the healthcare team and can be used for both task-related competency training and clinical judgment. It fosters confidence and competency while improving patient safety.

- Simulation Training in the NICU

Through the generosity of donors, NICU was able to purchase new specialized micropremature simulation equipment and replace older failing components. Micropremature infants are those born at less than 26 weeks gestation and who typically weigh one and a half to two pounds. The simulation mannequin's lifelike size, look and feel allows the micropremature team of nurses, respiratory therapists and physicians to run rescue drills and procedures that can improve the health and outcomes of our most fragile intensive care population. The software and wireless components direct the baby mannequin to respond to whatever interventions the clinicians perform with audible heartbeats, color changes and breathing patterns. It even cries.

- Simulation Training for the Obstetrical Team

Simulation training begins in orientation, encouraging critical thinking, staff engagement and self-directed learning. Case scenarios are chosen based on the experience of the learner and build in complexity with training and experience. Physicians, residents, nurses from all perinatal departments, and support staff all participate in training, both individually and as a team.

In May, a generous grant from the William Edwin Montan Trust and grant funds from Woman's Employee Giving campaign were used to purchase a labor simulator, a birthing simulator, an IM injection simulator, a catheter trainer and a postpartum hemorrhage education module. This equipment, which supports the simulating training program for obstetrical nurses and other team members, is housed and used for training in dedicated simulation rooms.



Danielle Cazenave, Linda Horn and Lil White simulating resuscitation.



Amniotic Fluid Embolism (AFE) simulation training with Nicole Martin, Sarah Baillie and Allison Thompson.

EMR Platform Update

On November 1, 2018, Woman's transitioned from the Client Server EMR platform to Meditech's latest and greatest web based platform, EXPANSE. The EXPANSE platform affords interoperability for seamless data exchange from an office visit to the acute care setting and a revamped perioperative module. It also supports a mobile point-of-care solution for nursing that will be implemented in the first quarter of 2019.

In preparation for the update, nurses and other care team members participated in countless hours of systemintegrated testing and participated in a week-long parallel test to validate data and review system functionality. Following testing and several system updates, Nursing Informatics nurses trained team members in September and October. During the five-week training period, a total of 84 classes were offered with an overall attendance of 703 nurses.



Using Technology to Support NICU Families

A \$10,000 grant was generously provided by the Unum/ Starmount Corporation to fund NICU parent support programs. One of these initiatives is to foster communication by providing iPad technology for the neonatal transport team in the field when they are at referral hospitals stabilizing infants who will be transferred to Woman's NICU. The iPads will allow families to communicate with the doctors and nurses who will care for their transferred baby in real time with more than a voice on the phone – a face on a screen. It is an extension of an already established program in the hospital called "Joey Time." IPads will also be housed in a few of the centers with our most frequent referrals for families to utilize while mom and baby remain inpatients at two different hospitals.

Innovative New Program in the NICU

NICU babies often are not well enough or lack the developmental maturity to breastfeed initially. Until they can, a mom will pump her breast milk and store it in special bottles provided by the hospital. Each container of breast milk is marked with special labels to identify the milk belonging to her specific baby. Until the baby is able to nipple feed, milk is given to the baby through a tiny feeding tube.

The gold standard for patient safety when administering expressed breast milk to NICU infants is to utilize a barcode scanning process to match the correct milk with the correct baby and to have the least number of clinicians handling the milk to ensure consistent mixing, storage practices and dis-



tribution. Woman's NICU has utilized barcoding of breast milk for many years, but took an extra step of creating a milk tech team in 2018 to further improve safety.

Woman's evidence-based milk tech program was designed from the ground up by NICU clinical nurses and nurse leaders, lactation nurses and neonatologists. A job description for the milk tech role was created, policies and procedures were developed, an intensive orientation process was implemented, and a workflow was established with input from the four new full-time milk techs. This program ensures safe practice in getting the milk from mom to baby with seamless efficiency. It has reduced the number of staff members handling the milk from more than 175 down to four on most days. The milk tech program relieves burden on the clinical nurses and has made delivery of what we refer to as "liquid gold" to the babies in the NICU a much safer practice.

NICU Kangaroo-a-thons

Holding a newborn skin-to-skin on a parent's bare chest is a best practice for newborn care that promotes breast-

feeding. Skin-to-skin holding, also referred to as kangaroo care, has many benefits to the newborn, including stabilization of body temperature, heart rate, and breathing; weight gain; encouraging deeper sleep for baby, which facilitates bonding and promotes breast milk production. When a baby requires care in the NICU, mom and



baby are separated for much of mom's hospital stay and recovery. In some cases, the baby's condition is too unstable for him to be held at all for some time.

All of the benefits of skin-to-skin holding are even more important when a baby is born prematurely or is sick, so Woman's NICU encourages kangaroo care as early and as often as possible. Twice per year, the NICU hosts a weeklong "Kangaroo-a-thon" to promote skin-to-skin holding. During the event, the NICU lactation nurses host educational sessions for parents, and educational materials are placed in every patient room. The nurses and support staff encourage parents to document every skin-to-skin holding, and both parents and NICU staff are entered into prizes for every documented session. It is fun for everyone and generates a lot of excitement around the importance of skin-to-skin.

Fetal Surgery

As the region's only fetal surgery specialist, Dr. Cliff Moore is skilled in highly complex surgeries performed to correct a pregnancy-related or fetal complication while a baby is still in utero. The fetal surgery team is a group of highly skilled nurses and surgical technicians who specialize in care to improve the prognosis of these life-threatening fetal complications. The nurses have special training and have participated in fetal surgery simulation, as well as training specific to the laser used in these procedures. The nurses not only provide care during the procedure, but are also responsible for the care of the mother prior to and following surgery, and closely monitoring the mother and the fetus for signs of complications. Dr. Moore and the fetal surgery team perform surgeries to correct conditions such as twinto-twin transfusion syndrome, congenital pulmonary airway malformation and more. In fiscal year 2018, 30 fetal surgery cases were performed at Woman's.



Enhancing Patient Safety in the Operating Room

Standard surgical procedure nationwide involves manually counting and recording all cotton disposables going into and coming out of a patient. Though it is rare for gauze, sponges or towels to be left in the body after surgery, mistakes can occur and result in severe medical complications such as infections, adhesions and obstructions. Sponges that are used to soak up blood and other fluids are the most common objects that are left behind.

Woman's was the first hospital in Baton Rouge to use disposable cotton sponges, gauze and towels that are embedded with a tiny radiofrequency tag that can be detected before surgery is complete with a wand using low-frequency, non-ionizing radio waves. If a sponge is left in the body, it will transmit a signal back to the device, alerting staff of the item's exact location. This technology, which was implemented in spring 2018, lowers the risk of leaving surgical items in patients.



OR nurses: Kim Edwards, Courtney Dencausse, Amy xxxx, Andree Inhern, Jeanne Fellows (back row), Cindy Thomas, Stephanie Powers and Vaun Dell Ingalls (front row)

Improving Handoff Communication in the Operating Room

The standardization of hand-off is known to decrease errors and improve patient safety. After forming a team of RNs and surgical technologists, guidelines and best practices related to team communication in the operating room were reviewed and the "SWITCH" tool was developed and implemented. The tool provides a checklist that alleviates the need to give hand-off by memory and contains important, essential elements of surgical hand-off. SWITCH is an acronym for the following: **S**urgical Procedure, **W**et Items, **I**nstruments, **T**issue, **C**ounts, **H**ave any Questions/Comments. The SWITCH tool is used to guide handoff between surgical team members during a surgical procedure.

Capnography

End tidal carbon dioxide (CO2) monitoring, also referred to as capnography, measures the amount of carbon dioxide in exhaled respiratory gases. Higher-than-normal carbon dioxide in exhaled air can be a sign of inadequate respiratory effort resulting from sedation. In March, Woman's implemented end tidal C02 monitoring as an extra layer of protection for patients experiencing sedation after anesthesia. Patients with a patient-controlled analgesia (PCA) pump and those receiving intravenous opioids following general anesthesia are placed on continuous capnography monitoring.

Capnography monitoring has also been expanded to include adults and neonates on

ventilators, patients in the adult intensive care unit, and all patients recovering in the post-anesthesia care unit. This enhanced level of monitoring facilitates quicker identification and intervention for patients experiencing respiratory depression related to sedation. This initiative was coordinated by a multidisciplinary team including nurses, respiratory therapists, anesthesia personnel, Biomed, Information Systems and Materials Management.

Malignant Hyperthermia Readiness

Malignant Hyperthermia (MH) is a potentially fatal, inherited disorder that presents as a hypermetabolic state after exposure to volatile inhalation anesthetic agents and/or depolarizing muscle relaxants. Perioperative care facilities must be prepared for this rare but life-threatening complication.

In fall 2017, an interdisciplinary team made up of anesthesiologists, pharmacists and perioperative nurses began reviewing the most up-to-date evidence and recommendations for malignant hyperthermia readiness. An analysis of Woman's MH response processes was completed and the team identified areas for improvement. Guidelines and assessments from the Malignant Hyperthermia Association of the United States (MHAUS) were used as resources. A physician specialist from MHAUS was consulted and visited Woman's in November. She toured the facility, educated staff, conducted a readiness assessment and reviewed annual drill findings. Action steps were implemented based on her recommendations and MHAUS guidelines. A learning fair was held in February to educate staff across the organization on MH risk factors, identification and management.





Pollie Harris educating colleagues Angela Brady and Christina White.

POSS Scale in PACU

Adverse drug events (ADEs) account for an estimated 1 in 3 of all hospital adverse events, affecting about 2 million hospital stays each year. Reducing ADEs results in safer and higher quality healthcare, lower healthcare costs, and improved health outcomes. Four of Woman's team members obtained Lean Six Sigma Green Belt certification in September 2018. Their improvement project focused on improving performance related to adverse drug events (ADEs), specifically opioid usage.

The team's assessment revealed no use of an evidencebased tool for post-anesthesia sedation assessment and that PACU pain management pathway orders were left open to the nurses' interpretation for opioid dosing. Their project goal was to increase the percentage of appropriate administration of opioid therapy to robotic hysterectomy patients in the post-anesthesia care unit (PACU) by implementing use of the Pasero-Opioid Sedation Scale (POSS). When used in conjunction with pain assessment, POSS standardizes sedation assessment to streamline opioid dosing, potentially reducing over-sedation and overall length of stay.

The LSS team collaborated with Anesthesia to revise opioid dosing orders, developed a pain-sedation assessment/ dosing tool to incorporate POSS, implemented a PACU POSS procedure, and collaborated with Informatics nurses to incorporate documentation of POSS in the EMR. Education was provided for PACU nurses on the new procedure, use of the assessment tool, and dosing adjustments. After just one month, results yielded a statistically significant 17% increase in percentage of appropriate therapy.

4S Process

A major safety risk associated with surgical procedures is the introduction of pathogens into sterile tissues or mucus membranes, which can lead to infections. Ensuring proper cleaning and sterilization of surgical instruments is essential to preventing infections.

In summer 2018, Woman's adopted the 4S process (SORT, STRING, SQUIRT, SPRAY) for point-of-care instrument cleaning prior to returning items to the sterile processing department (SPD) for sterilization. To improve instrument safety, surgical team members sort, string, squirt and spray surgical instruments at the point of use prior to transport in an approved container. First, instruments are SORTed by type, and then a STRINGer mechanism is used to ensure the instruments are in the open position. If instruments have lumens, they are flushed by SQUIRTing sterile water through the lumen. Finally, instruments are SPRAYed with a hospital-approved enzymatic cleaner. The enzymatic cleaner keeps instruments moist to prevent drying of blood and to soften or remove blood from the instruments. This best practice promotes proper decontamination of surgical instruments and prevents infection.



Emily Stevens, Mary Beth Magee, Alicia Plumer and Heather Garrot have successfully achieved their Lean Six Sigma Green Belt certification from A3 Healthcare and the Louisiana Hospital Association.



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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.

