Nurses Leading the Way

If your actions inspire others to dream more, learn more, do more and become more, you are a leader.

"John Quincy Adams"

2013 Nursing Annual Report
As nurses across the country celebrate 2014 Nurses Week, I’m proud to say this year’s theme, “Nurses Leading the Way,” is quite fitting for the nurses at Woman’s Hospital.

Our nurses are as quick to adapt to change as they are to enact change. On the heels of an unprecedented campus move in 2012, Woman’s nurses have participated in national collaboratives to share data and improve patient care and outcomes; developed and continually evaluated quality, safety, effectiveness and efficiency in patient care standards and evidence-based nursing practice; and integrated programs to enhance the hospital experience for patients and their families.

In 2013, Woman’s was named Specialty Hospital of the Year and our nursing team was recognized by the Louisiana State Nurses Association and Louisiana Nurses Foundation. Furthermore, many nurses were recognized for their individual accomplishments in the nursing field.

Healthcare is in constant flux, but one thing remains the same – our mission to improve the health of women and infants. I would like to thank our nurses for their incredible dedication to our mission and for continuing to build Woman’s patient-centered community of extraordinary people and exceptional care.

Sincerely,

PATRICIA R. JOHNSON, DNP, NEA-BC
Senior Vice President and Chief Nurse Officer
Woman’s Hospital
Woman’s Implements Newborn Pulse Oximetry Test

Pulse oximetry is a non-invasive method for detecting low oxygen levels in the blood – a significant indicator of heart issues in babies. Mother/Baby nursing leaders recognized the importance of early screening and implemented this screening at Woman’s in 2012 prior to it becoming a state mandate in 2013. The hospital tested 9,816 newborns between March 2012 and August 2013, during which four newborns were found to have insufficient oxygen and were transferred to the NICU. Two of these infants were later transported to New Orleans for cardiac surgery. Pulse oximetry testing and the Mother/Baby nurses’ quick reaction saved these infants’ lives.
Obstetrical Hemorrhage Risk Grant

Woman’s received a Louisiana Hospital Association Trust Funds Grant from HSLI to improve patient safety for obstetrical patients at risk for hemorrhage. The goal of this risk reduction initiative was to minimize the risk of obstetrical hemorrhage by reducing occurrences and improving patient outcomes. Obstetrical nursing leaders implemented processes to decrease mortality and morbidity from obstetrical hemorrhage.

Changes were made to the patient chalkboard used by Labor and Delivery nurses to indicate if a patient has a hemorrhage risk; low-risk patients are highlighted in green, moderate-risk patients are highlighted in yellow and high-risk patients are highlighted in red.

Nursing and medical education – including performing drill simulations – facilitated early recognition and treatment. A simulation abdomen, “Mama Natalie,” was purchased, and simulation training was done with more than 93% of the clinical staff. Interdisciplinary training was done with LSU residents as well. Clinical educators and managers structured the simulation drills and focused on postpartum hemorrhage, placenta accreta, blood administration and shock index.

Outcome measures were positive and include the following:

- Reduced blood transfusions with a non-type specific blood product by 75%.
- Reduced the number of women who gave birth that were transfused with greater than or equal to 5 units of blood.
- Reduced the percent of obstetrical hemorrhage patients whose length of stay is greater than 5 days to under 3% for vaginal delivery and 6% for cesarean section.

The success of the hemorrhage risk reduction initiative led to the Louisiana Hospital Association’s adoption of the obstetrical hemorrhage process and outcome measures for the Health Engagement Network (HEN). This is a statewide initiative that is one of the requirements for HEN participation.

Gynecologic Oncology Group

Woman’s is one of five institutions in Louisiana that participates in the Gynecologic Oncology Group (GOG), a national collaborative funded by the federal government through the National Cancer Institute. GOG is the only group in the nation that focuses its research on women with pelvic malignancies, such as cancer of the ovary, uterus or cervix. The GOG program was initiated at Woman’s in 1988 and allows patients the chance to participate in clinical trials, giving women access to the latest treatments. Ashley Marks, oncology data manager and registered nurse at Woman’s, works with the gynecologic oncologists at Woman’s and with GOG to provide the best possible treatment for patients.

The oncology data manager registers patients in GOG clinical trials to ensure the staff adheres to the criteria involved in the research protocol. A nurse calls each gynecologic oncology patient within seven to 10 days after chemotherapy administration. She also reviews potential side effects, offers emotional support, gives physician-approved answers to questions, continues the education program initiated during the initial chemotherapy visit and may refer the patient with complex issues to a physician, social worker or dietitian. The purpose of this follow-up contact is to minimize side effects, continue teaching and reinforce the hospital’s commitment to the patient’s well-being.
Palliative Care Program

Woman’s is a Level III Regional Referral Obstetrics and Neonatal facility. Newborn and Infant Intensive Care Unit (NICU) nurses recognized a need for a program aimed specifically for infants in the NICU as well as immediately after delivery. In response, Woman’s Palliative Care Program was developed to offer support and training for families facing difficult decisions when expecting a newborn with life-limiting conditions. Palliative care can provide comfort and a better quality of life for an ill patient, whether that life will last months, days or only hours. This approach to care includes symptom relief and pain management for the infant and supportive care for parents. Individual care is based on parents’ wishes as well as spiritual and cultural beliefs. Palliative care may be the main focus or may be combined with cure-oriented care. The palliative care team includes nurses from NICU, Nursing Informatics, Labor and Delivery and Nursing Administration. Palliative care meetings are held monthly with staff members from NICU, Labor and Delivery, Antepartum, Social Services and a Maternal-Fetal Medicine physician.

Healing Arts Program

From women on bed rest in Antepartum to babies in the NICU, many patients and their families call Woman’s home for extended periods of time. Woman’s launched a Healing Arts Program in mid-2013 to enhance the hospital experience for patients and their families through music, poetry, dance and art.

During Nurses Week (May 6-12, 2013), artistically talented nurses kicked off the program with an art show. One exhibit included a quilt made from old Woman’s t-shirts that promoted hospital events and milestones. Progressive concerts, which begin on the upper floors and end in the main lobby, are held monthly. Music is unamplified instrument or voice to reduce patient intrusion. “Voices of Woman’s Chorale,” a concert series of one or more singing groups of Woman’s employees, began performing in August, and registered nurse and flutist Betsy Hodnett performed for patients and staff. Bedside music is also available for patients seeking musical therapy. Other current projects include scrapbooking for NICU parents and art activities for cancer patients while receiving infusions.
Quality Initiatives and Measurements

Caring is the essence of nursing.

Improving Birth Outcomes

According to the American Congress of Obstetricians and Gynecologists, labor should start on its own whenever possible. Overwhelming medical research confirms that inducing labor can lead to more complications for both mother and baby, and can dramatically increase the risk for a cesarean section in some women. Always working to improve birth outcomes and give infants the best start in life, Woman’s works closely with national and international clinical collaborative teams to incorporate guidelines supported by medical research. In 2013, Woman’s supported the Choosing Wisely® campaign, aimed at drawing national attention to the overuse and misuse of labor induction and encouraging informative conversations between physicians and patients.
Reducing Elective Deliveries Less than 39 Weeks

Since 2010, Woman’s has not allowed scheduled elective, non-medically indicated inductions of labor or cesarean deliveries before 39 weeks gestation. In 2013, Woman’s took this policy a step further to reduce the risk of a cesarean by ceasing inductions between 39 weeks 0 days and 41 weeks 0 days, unless the cervix is deemed “favorable” using the Bishop Score grading system.

Perinatal nursing leadership worked closely with the Louisiana Department of Health and Hospitals to promote improved birth outcomes by not inducing labor before 39 weeks throughout the state to all hospitals who deliver babies. Multidisciplinary teams of nurses and physicians are sent to IHI conferences twice a year. At the conferences, the clinical teams have established standardized definitions for labor and established standardized admission criteria to be used at Woman’s and other birthing facilities in the state.

Furthermore, 17-alpha hydroxyprogesterone, a manmade hormone of progestin, was approved by the FDA as a drug to reduce the risk of premature birth in selected at-risk patients. This medication is given to women who are pregnant with one baby and who had a preterm delivery in the past.

Combined, the steps Woman’s has taken has helped sustain its success in reducing NICU admissions and increasing healthy births.
Breastfeeding Education and Outreach

Studies show that breast milk is the ideal nutrition for infants. Mother/Baby nursing leadership led an interdisciplinary task force to promote and support breastfeeding. The task force meets monthly to review current breastfeeding rates and brainstorm additional educational opportunities. To promote breastfeeding to new mothers, Woman’s combined changes to inhouse guidelines and educational programs along with community outreach.

Efforts included implementing breastfeeding assistance on the 11:00 PM to 7:00 AM shift two to three nights each week. Woman’s also discontinued the practice of giving complimentary, company-sponsored formula bags to mothers to take home after their baby is born so that breastfeeding is further encouraged. The Louisiana Department of Health and Hospitals’ Breastfeeding Coalition recognized Woman’s as a “Bag Free” hospital as part of its “Ban the Bags, Louisiana!” campaign. Furthermore, formula companies are not allowed to participate in hospital events.

Mother/Baby nurses also participate in the HealthyBR initiative to promote healthy nutrition and active living across Baton Rouge. Nurses are promoting a healthy start by providing breastfeeding materials and education.

A woman’s decision to breastfeed is strongly influenced by her beliefs and encouragement from her family and friends. When a mother is thinking about how to feed her baby, she values the support of her partner the most, followed by the advice of her mother, family and friends. Educating the community to support mothers’ decisions to breastfeed is key.

Breastfeeding has many benefits for mothers and babies. According to the Centers for Disease Control and Prevention, a baby’s risk of becoming an overweight child is reduced with each month of breastfeeding. Other health benefits for babies include fewer instances of ear and respiratory infections as well as a lowered risk of SIDS, or the sudden death of a healthy baby without warning. Breastfeeding also provides health benefits for the mother, such as a lowered risk of developing breast cancer, ovarian cancer and diabetes.

Dedication to the success of this project has led to an improvement in Woman’s overall breastfeeding average rate at discharge from 63.6% in FY 2012 to 67.2% in FY 2013, which exceeds the state average of 60.69% based on the 2013 CDC Breastfeeding Report Card.
Reducing Total Harm
In 2011, Woman’s joined nearly 1,500 hospitals and 31 state hospital associations across the U.S. to improve quality, clinical outcomes and patient safety. This project is called the Hospital Engagement Network (HEN) and it is part of a $75 million Health Research and Educational Trust grant. Over the past two years, participating hospitals have been sharing data and best practices to reduce patient harm by 40 percent and readmissions by 20 percent.

Tracked measures include adverse drug effects, falls with injury, pressure ulcers, catheter-associated urinary tract infections, central line-associated bloodstream infections and surgical site infections. In the past 18 months, Woman’s has made significant improvements in these areas as well. To date, 300 potential harms have been prevented for a savings to patients and payors of $2.7 million.

CWISH at Woman’s
The national Council of Women’s and Infants Specialty Hospitals (CWISH) got an up-close view of the new Woman’s campus this past year when Woman’s served as the host site for the organization’s annual meeting. CWISH is a membership organization of nonprofit, non-competing hospitals that are leaders in providing services to women and infants. Its goal is to share financial and operational data to assist each organization in better serving patients. CWISH currently has 13 member hospitals, representing more than 113,000 deliveries annually.

VON at Woman’s
In April, Woman’s was proud to host the Vermont Oxford Network (VON) NICQ Respiratory Care ONSITE meeting. VON is a nonprofit voluntary collaboration of more than 900 neonatal intensive care units from around the world.
Joint Commission Names Woman’s a Top Performer on Key Quality Measures
Woman’s strives to continuously improve patient care by achieving and surpassing industry goals and measuring against national and international outcomes. The Joint Commission recognized Woman’s for its exemplary performance in surgery using evidence-based clinical processes that are shown to improve care. The hospital’s achievement was noted in the Surgical Care Improvement Project (SCIP) measures.

Each accountability measure represents an evidence-based practice, such as giving antibiotics one hour before surgery. The SCIP taskforce is chaired by Vaun Dell Ingalls, Operating Room Clinical Nurse Educator, and meets monthly to review statistics and propose changes in process to improve outcomes. Woman’s composite rate for the 2012 SCIP measures was 99 percent, meaning the hospital provided evidence-based practice in 99 of 100 opportunities.

Woman’s is one of 1,099 hospitals across the country earning this distinction for attaining and sustaining excellence. This accomplishment was supported through a co-management agreement with Health Systems Improvement, LLC to improve surgical outcomes and provide more efficient care.

Public’s Right to Know
On womans.org, publicly reported measures on exceptional clinical performance and patient satisfaction such as the Surgical Care Improvement Project (SCIP) and Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) are provided. Links to the Medicare Hospital Compare site are provided as well.

Surgical Care Improvement Project (SCIP)
Compliance with SCIP measures has been proven to result in better outcomes for patients. Woman’s scores met or exceeded state and national benchmarks in all but one category.

<table>
<thead>
<tr>
<th>Surgical Care Improvement Project (SCIP)</th>
<th>Woman’s</th>
<th>LA</th>
<th>National</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prophylactic antibiotic received within one hour prior to surgical incision</td>
<td>100%</td>
<td>98%</td>
<td>98%</td>
</tr>
<tr>
<td>Outpatient prophylactic antibiotic within one hour of incision</td>
<td>96%</td>
<td>96%</td>
<td>97%</td>
</tr>
<tr>
<td>Prophylactic antibiotic selection appropriate</td>
<td>100%</td>
<td>98%</td>
<td>99%</td>
</tr>
<tr>
<td>Outpatient prophylactic antibiotic selection appropriate</td>
<td>98%</td>
<td>97%</td>
<td>97%</td>
</tr>
<tr>
<td>Prophylactic antibiotic stopped within 24 hours after surgery</td>
<td>95%</td>
<td>96%</td>
<td>97%</td>
</tr>
<tr>
<td>Treatment to prevent blood clots received within 24 hours before or after selected surgeries</td>
<td>100%</td>
<td>97%</td>
<td>98%</td>
</tr>
</tbody>
</table>

* Q3 2013

Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)
HCAHPS is a national survey to measure patients’ perspectives and experiences during their hospital stay. Woman’s scores met or exceeded state and national benchmarks in all categories.

<table>
<thead>
<tr>
<th>Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)</th>
<th>Woman’s</th>
<th>LA</th>
<th>National</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communication about medicine</td>
<td>78%</td>
<td>68%</td>
<td>63%</td>
</tr>
<tr>
<td>Communication with doctors</td>
<td>92%</td>
<td>87%</td>
<td>81%</td>
</tr>
<tr>
<td>Communication with nurses</td>
<td>83%</td>
<td>83%</td>
<td>78%</td>
</tr>
<tr>
<td>Discharge information</td>
<td>94%</td>
<td>84%</td>
<td>84%</td>
</tr>
<tr>
<td>Pain control</td>
<td>81%</td>
<td>75%</td>
<td>71%</td>
</tr>
<tr>
<td>Rate hospital</td>
<td>82%</td>
<td>74%</td>
<td>70%</td>
</tr>
<tr>
<td>Responsiveness of hospital staff</td>
<td>77%</td>
<td>71%</td>
<td>67%</td>
</tr>
<tr>
<td>Room kept clean</td>
<td>75%</td>
<td>75%</td>
<td>73%</td>
</tr>
<tr>
<td>Room quiet at night</td>
<td>79%</td>
<td>73%</td>
<td>60%</td>
</tr>
<tr>
<td>Would recommend hospital</td>
<td>91%</td>
<td>75%</td>
<td>71%</td>
</tr>
</tbody>
</table>

* Q3 2013
Leadership

To do what nobody else will do, a way that nobody else can do, in spite of all we go through, is to be a nurse.
-Rawsi Williams

Nursing Executive Council

The Nursing Executive Council integrates the governance structure with the Division of Nursing and ensures its effective operation. It integrates the mission, values and goals of Woman’s Hospital and the Nursing Division into all aspects of the Shared Governance. The Nursing Executive Council acts on recommendations from the various nursing councils and facilitates dissemination of information both horizontally and vertically throughout the organization. It also reviews and provides input into Nursing Division goals, objectives and budgetary processes. Patricia Johnson, Senior Vice President and Chief Nurse Officer, chairs the Nursing Executive Council and oversees Nursing Councils listed on the following pages.
Nursing Research Council

The Nursing Research Council (NRC) educates nurses and others in research processes, facilitates nursing involvement in research activities, supports nurses in the research process, communicates the results of institutional nursing research activities, and reviews nursing research proposals. NRC chair Wendy Singleton and NRC member Mary Ann Smith continue to serve on the organizational Institutional Review Board. This year, the NRC:

- Hosted its 7th Annual Research Program in May, which featured posters from various colleges around the area.
- Sponsored the 5th Annual Nursing Research Advice Day program, during which potential nurse researchers had the opportunity to meet with a PhD consultant to develop a research plan related to their particular topic of interest.
- Provided support to four graduate nursing students in successfully completing their research projects.

Additionally, Sandra Brown, DNS, APRN, FNP-BC (research consultant) presented an I offering titled Research Designs for Nursing Studies at the Organizational Nursing Continuing Education Day program.

Nursing Informatics Council

The Nursing Informatics Council (NIC) supports nurses in the continuous efforts of improving the quality and efficiency of nursing care provided through ongoing evaluation and management of clinical information systems. The NIC provides a structured and standardized method for evaluating and implementing new technology affecting the practice of nursing at Woman’s Hospital. This year, the NIC:

- Implemented Computerized Physician Order Entry (CPOE) in the Assessment Center with hospitalists, and in Same-Day Surgery and the Post-Anesthesia Care Unit with anesthesiologists.
- Standardized hospital discharge instructions. An electronic copy of the discharge instructions are also available per patient request.
- Edited nursing documentation to include IV stop times.
- Created electronic documentation for Breast Center patients.
- Implemented shock index documentation to emphasize patients at risk for hemorrhage.
- Created an OB flowsheet to capture components of the progression of the laboring patient for clinical decision making.
- Enhanced key indicator reports such as flu and pneumococcal vaccines, exclusive breastfeeding rates, and pain assessment/reassessment to enhance quality initiatives.
- Created and implemented palliative care documentation for perinatal patients as well as infants and NICU patients.
Nursing Quality Council

The Nursing Quality Council (NQC) supports the Division of Nursing in improving the care of women and infants by providing a coordinated system that continually assesses and evaluates quality, safety, effectiveness and efficiency in patient care and nursing practice. The NQC facilitates the implementation of the Division of Nursing Performance Improvement Plan. It disseminates quality data, utilizes the data to improve patient care and develops and prioritizes nursing improvement initiatives. This year, the NQC:

- Added NICU Pressure Ulcers and Restraints data to National Database of Nursing Quality Indicators (NDNQI) quarterly reports.
- Received the Safety Star award for the NICU Move and Failure Mode and Effects Analysis (FMEA).
- Participated in the NDNQI RN Satisfaction survey.
- Participated in the American Hospital Association/Health Research and Educational Trust (AHA/HRET) Health Engagement Network (HEN) Harm Across the Board collaborative.

Clinical Practice Council

The Clinical Practice Council (CPC) is responsible for the revision and development of evidence-based nursing procedures and patient care standards. The CPC uses evidence-based research, national practice guidelines and our Nursing Philosophy of Care to accomplish this work. The CPC’s goal is to support and promote the delivery of safe, competent and ethical care. The CPC functions to develop, review and revise nursing procedures and patient care standards; to standardize nursing practices across all patient care areas; and to mentor the professional/leadership role to peers. This year, the CPC:

- Reviewed and revised the Council’s charter, 60 nursing procedures and 10 patient care standards.
- Implemented new procedures, including labeling specimens using the Mobilab System and Electronic Infant Protection System.

Nursing Education Council

The Nursing Education Council (NEC) supports nurses in their pursuit of continued professional growth, particularly in knowledge and skill acquisition, which requires a commitment to lifelong learning. The NEC also serves as a resource for its members and coordinates all aspects of nursing education and patient education in conjunction with Educational Services. The Nursing Education Council provides educational offerings for nursing staff in compliance with the Nursing Division tactical plan and external regulatory standards along with coordinating patient education materials. This year, the NEC:

- Provided a national certification review course for 25 staff nurses relevant to women’s health. The Steps to Success program provides online education and review material for a national certification exam for various disciplines, rather than just one specialty area.
- Provided two educational initiatives relevant to the support of breastfeeding:
  - Strategies to Successful Breastfeeding, August 2013, live CE offering (IBLCE approved).
- Established Woman’s as an approved test site for national certification.
Nursing Professional Development Council

The Nursing Professional Development Council (NPDC) recognizes nursing excellence and encourages and promotes nurses’ professional development. The NPDC promotes nurse retention and coordinates Nurses Week activities. The NPDC makes recommendations for the acceptance or denial of applications for entrance and progression in the Nursing Professional Development Program and promotes the growth and development of nurses from novice to expert through mentoring. This year, the NPDC:

- Reviewed more than 200 professional development program applications.
- Coordinated an art show during Nurses Week to exhibit nurses’ original art.
- Approved continuing education activities addressing leadership and ethics in healthcare.

Nurses Holding Local and State Leadership Positions

- **Patricia Johnson**, DNP, NEA-BC, Senior Vice President and Chief Nurse Officer, serves on the Louisiana State Board of Nursing (LSBN). She has also served as President of the Louisiana Organization of Nursing Executives as well as served on the Louisiana Nursing Supply and Demand Council, the Legislative, Regulatory and Policy Council, and the Louisiana Nursing Center Governance Advisory Committee. Tricia also served on the LSBN search committee for new Executive Director.

- **Staci Sullivan**, MSN, CNS, RNC-NIC, NEA-BC, Vice President of Infant and Pediatric Services, served as the Woman’s Executive Champion for the March of Dimes campaign, which raised $47,000. She also serves on the Advisory Board for Early Detection Hearing Impairment.

- **Lucie Agosta**, PhD, APRN, Employee Health Nurse Practitioner, serves on the LSBN. She was the 2010 Chair of the Nurse Practice Committee, and co-chaired the task force to revise the Advanced Practice Nurse Act.

- **Kristy Simmons**, MSN, CNOR, Operating Room, serves as President-elect and Communication Chair Pediatric Assembly for the local Association of Perioperative Registered Nurses (AORN) chapter.

- **Barbara Friscia**, BSN, CNOR, Operating Room, serves as Vice President for the local AORN chapter.

- **Carolyn Alexander**, AD, CNOR, Operating Room, serves as a board member for the local AORN chapter.

- **Stephanie Powers**, BSN, Operating Room, serves as a board member for the local AORN chapter.

- **Annette Savoy**, BSN, Operating Room, serves as a board member for the local AORN chapter.

- **Kahne Caraccioli**, BSN, CNOR, Operating Room, serves as Membership Committee Chair for the local AORN chapter.

- **Elke Guillot**, CNOR, Operating Room, serves as Nominating and Leadership Development committee member for the local AORN chapter.

- **Margo Weisgerber**, BSN, CNOR, Operating Room, serves as Nominating and Leadership Development committee member for the local AORN chapter.

- **Pollie Harris**, AD, Surgical Care, serves as Nominating Committee Chairman of the local AORN chapter.

- **Neva Elliot Carter**, BSN, RNC-LRN, Mother/Baby, serves as Coordinator for the Association of Women’s Health, Obstetric and Neonatal Nurses (AWHONN) Baton Rouge Chapter.

- **Jamie Schmolke**, BSN, Mother/Baby, serves as Planning Coordinator for the AWHONN Baton Rouge Chapter.
Accomplishments

It would not be possible to praise nurses too highly.
The Louisiana State Nurses Association and Louisiana Nurses Foundation honored Woman’s for its exceptional specialized care at the 2013 Nightingale Awards Gala. Woman’s is the first hospital to receive the new “Specialty Hospital of the Year” award. Woman’s was also named “Hospital of the Year” in 2007 and 2012.

Three of Woman’s registered nurses also received top honors at the 2013 Nightingale Awards:
• Nurse Administrator of the Year: Lori Denstel, MBA, BSN, RNC-OB, Director, Nursing Administration.
• Nurse Mentor of the Year: Amye Reeves, BSN, RNC-OB, Nurse Manager, Labor and Delivery.
• Registered Nurse of the Year: Alicia Plumer, RN, BSN, Nurse Manager, PACU / AICU

Baton Rouge District Nurses Association
The Baton Rouge District Nurses Association recognizes nurses annually who have made contributions to community, healthcare and/or nursing. The following Woman’s registered nurses were recognized in 2013:
• Kahne Caraccioli, Operating Room
• Lani Carter, Mother/Baby
• Lane Halk, Antepartum
• Karen Kelone, Labor/Delivery
• Tracie Meeks, Mother/Baby
• Alicia Plumer, PACU / AICU
• Leslie Roy, PACU / AICU
• Christina White, Labor/Delivery

AORN Gold Intermediate Chapter Award
The Association of Perioperative Nurses (AORN) provides professional development of and improvement for perioperative practice by generating and evaluating scientific evidence for the optimal care of patients before, during and after operative and other invasive procedures. At the recent AORN 60th Congress in San Diego, local Chapter 1904 was awarded the Gold Intermediate Chapter Award for excellence. This award was based on the fiscal responsibility, community involvement and individual member achievement of the chapter and submitted to a review board at the national headquarters in Denver, Colorado. Delegates representing Woman’s Chapter 1904 included Kristy Simmons, Barbara Friscia, Elke Guillot and Vaun Dell Ingalls.
**Auxiliary Scholarships**

Woman’s Auxiliary bestowed $1,000 each to the following individuals who are pursuing careers in healthcare:

- Laurie Ann Hancock, RN, Mother/Baby, is pursuing a Bachelor of Science in Nursing (BSN) at Loyola University.
- Emily Jewell, RN, NICU, is pursuing a Master of Science in Nursing (MSN) as a pediatric nurse practitioner online at the University Of South Alabama.
- Lauren Perry, nurse tech, Labor and Delivery, is pursuing a Bachelor of Science in Nursing (BSN) at Southeastern Louisiana University.
- Amy Wallace, RN, Med-Surg/Oncology, is pursuing a Bachelor of Science in Nursing (BSN) at Southeastern Louisiana University. She is one of only two staff nurses who hold a national certification in oncology nursing.

**American Nurses Credentialing Center (ANCC)**

Kristy Simmons, MSN, RN, CNOR, was awarded the National Magnet Nurse of the Year for Exemplary Professional Practice in 2011. The ANCC recognized her once again this past year with the National Magnet Nurse of the Year pin in the Exemplary Professional Practice category.

**Published Nurse**

“Keeping Mothers and Newborns Together After Cesarean,” an article written by Neva Elliot-Carter, was first published in Nursing for Women’s Health, the journal of the Association of Women’s Health, Obstetric and Neonatal Nurses (AWHONN). Neva’s work and leadership was again recognized through the feature of her article in the November/December 2012 edition of The American Nurse, the official publication of the American Nurses Association.

**Excellence in Clinical Practice Award**

Maryellen Kelly, BSN, PACU / AICU, received the Excellence in Clinical Practice award at the 2013 Louisiana Association of Perianesthesia Nurses annual conference. Maryellen’s colleagues had the following to say: “With more than 28 years of experience, Maryellen has dedicated her career to perianesthesia nursing. She is an expert in clinical practice with her wealth of experience and knowledge. She serves as a primary RN relied upon by the entire hospital for the Code Team. She serves as resource and leader as charge nurse. She is dedicated, maintains membership in ASPAN, LAPAN and AACN and attends national conferences to expand her knowledge. Maryellen treats patients individually with compassion and respect. She received several awards from peers, physicians and patients for exemplifying exceptional skills and teamwork. One patient wrote, ‘She showed compassion, concern and care for me.’ She truly exemplifies the core values of perianesthesia nursing in her daily practice.”
In addition to professional organization leadership positions, Woman’s nurses display leadership qualities by conducting nursing research studies and presenting research findings at local, state and national venues. Wendy Singleton, MSN, APRN-BC, ANP chairs Woman’s Nursing Research Council and is supported by Dr. Sandra Brown, DNS, APRN, FNP-BC. The Nursing Research Council reviews all research studies and hosts an annual research day for the community.
**Completed Nursing Research Studies**

“Attitudes Toward Obesity and Obese Patients: An Obstetric Nurse’s Perspective”  
Brandi Payne, RN (OB Float Pool)

“Estimating Blood Loss in the Operating Room”  
Kristy Simmons, MSN, RN, CNOR (OR)

“Post Move Perceptions of NICU Nurses from an Open Bay to a Single Family Room Environment”  
Stephanie McMillan, MSN, RN (NICU)

“Pregnancy and Prolonged Hospitalization: Exploring the Lived Experience”  
Marree Saltaformaggio, MSN, RNC-OB (Antepartum)

**Current Nursing Research Studies**

“Experiences of Parents of Infants Hospitalized in the NICU During the Transition from an Open Bay Ward to a Single Family Room”  
James Maryman, BSN, RN (NICU), Nicole Square, PhD, RNC-NIC (Educational Services) and the NICU research team.

“Is There a Relationship Between Couplet Care and Maternal Pain in the Immediate Recovery Period of a Cesarean Section?”  
Rachel Morgan, BSN, RN (Labor & Delivery)

“Making the Switch to Bedside Shift Reporting: Is it Better for the Patient and the Staff?”  
Rhonda Bailey, BSN, RN; Renee Carlisle, BSN, RN; Mikel Miller, BSN, RN (Med Surg/ONC)

“Nursing Staff Perception of Evidence-Based Hospital Design: Letting Go of the Old and Embracing the New”  
Wendy Singleton, MSN, APRN-BC, ANP (Mother/Baby & Employee Health) and Mary Ann Smith, BSN, RN, OCN (MedSurg/ONC, AICU/PACU)

“Perceptions of Parent Stress: Open Bay/Pinwheel Design vs. Single Family Rooms”  
James Maryman, BSN, RN (NICU)

“Perceptions of Staff Stress: Open Bay/Pinwheel Design vs. Single Family Rooms”  
James Maryman, BSN, RN (NICU)

“Perceptions of the Nurse-Family Relationship: Open Bay/Pinwheel Design vs. Single Family Rooms”  
James Maryman, BSN, RN (NICU)

“Shattering the Myths in the OR: Patient Care Based on Evidence-Based Practice”  
Kristy Simmons, MSN, RN, CNOR (OR)
Nursing Research Presentations

“Bacterial Contamination of Mobile Communication Devices in the OR”
Presented by Kristy Simmons, MSN, RN, CNOR and Kim Edwards, RN, CNOR (OR) at Southeastern Louisiana University’s Connie Logan Research Day.

“Building Simulation for Macro Systems Testing”
Presented by Katie Wallis, BSN, RNC-NIC (NICU) at Southeastern Louisiana University’s Connie Logan Research Day.

“Clean Up Your Act, Perioperative Team Members!”
Presented by Kristy Simmons, MSN, RN, CNOR at the ANCC Magnet national conference. It outlined her study of the bacterial contamination of mobile communication devices in the OR.

“High-Fidelity Simulation in Nursing Practice The Impact on Nurses’ Knowledge Acquisition, Satisfaction and Self-Confidence”
Presented by Nicole Square, PhD, RNC-NIC (Educational Services) at the Association of Nursing Professional Development national conference and Southeastern Louisiana University’s Connie Logan Research Day.

“Nursing Staff Perception of Evidence-Based Hospital Design: Letting Go of the Old and Embracing the New” (phase 1 findings)
Presented by Wendy Singleton, MSN, APRN-BC, ANP at the annual Lucille B. Davis Research Symposium hosted by Southern University School of Nursing.

“Pregnancy and Prolonged Hospitalization: Exploring the Lived Experience”
Presented by Marree Saltaformaggio, MSN, RNC-OB (Antepartum) at the AWHONN state conference.

“TESTPILOT”
Presented by James Maryman, BSN, RN (NICU) at the Academy of Neonatal Nursing Advanced Practice national conference and Southeastern Louisiana University’s Connie Logan Research Day.

Non-Nursing Research Presentations

“Exemplary, Ethical & Equitable: The Magnetic Transformation of Care for Incarcerated Obstetrical Patients”
Presented by Dana Vidrine, BSN, RNC-MNN (Mother/Baby) at the ANCC Magnet national conference.

“Identify Opportunities to Collaborate with and Engage Health Systems in their Region or State to Improve Outcomes for Mothers and Babies”

“Integrating Theory, Standards of Performance, and Technology to Reach New Heights in Professional Nursing Development”
Presented by Joan Ellis, PhD, RN, CNS, CNE (Educational Services) and Staci Sullivan, MSN, CNS, RNC-NIC, NEA-BC (Infant and Pediatric Services) at the Sigma Theta Tau 42nd Biennial Convention.
In Memory of Susan Fabre
By NICU nurses Chrystal Deslatte, RN; Linda Travis, RN; and Laurel Kitto, RNC

Susan Fabre was a neonatal RN at Woman’s for 27 years. She was well known in the NICU for her outgoing spirit and contagious laugh. She loved taking care of the babies and was a very passionate patient advocate.

If Susan believed in something, she jumped right in. Susan began seeking her highest potential as a nurse when she joined the American Holistic Nurses Association (AHNA) in 2005. After attending two AHNA meetings, she took over as the Baton Rouge Chapter Coordinator. She led the NICU in a research project to test the effectiveness of massage therapy on stress levels in patients in the NICU. She became a Certified Healing Touch Practitioner and initiated the Blessing of the Hands for healthcare workers during Nurses Week. Susan was the Executive Vice President and founding member of the Red Stick Peacemakers, which organized the local annual World Peace Day. Susan also worked tirelessly as the Magnet Champion for the NICU. Susan worked hard to secure philanthropic donations for the NICU’s Respite Room, which continues to be a place of peace, and in her own words, a place to just “be still.”

In May 2013, shortly after she turned 53, Susan was diagnosed with pancreatic cancer. The NICU staff rallied around her family and spent countless hours caring for her by providing meals, coordinating night and day shifts to give her bedside care, providing the resources to mail uplifting notes, organizing the purchase of Susan's favorite scrubs for staff to wear in support of her. One of the neonatologists opened up her home to have a “celebrate Susan” gathering for her friends and family shortly after her diagnosis. One might not pair the terms metastatic pancreatic cancer and grace together, but it was with grace and dignity that she accepted her diagnosis as part of her journey. Susan passed away in July 2013. It was an honor to be part of her journey. The best tribute to her is for us to give attention to the care of our mind, body and spirits. Susan’s light and laughter will forever be remembered by her friends and co-workers.
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.