

Fiscal Years 2022 and 2023 Nursing and Interprofessional Clinical Excellence Report

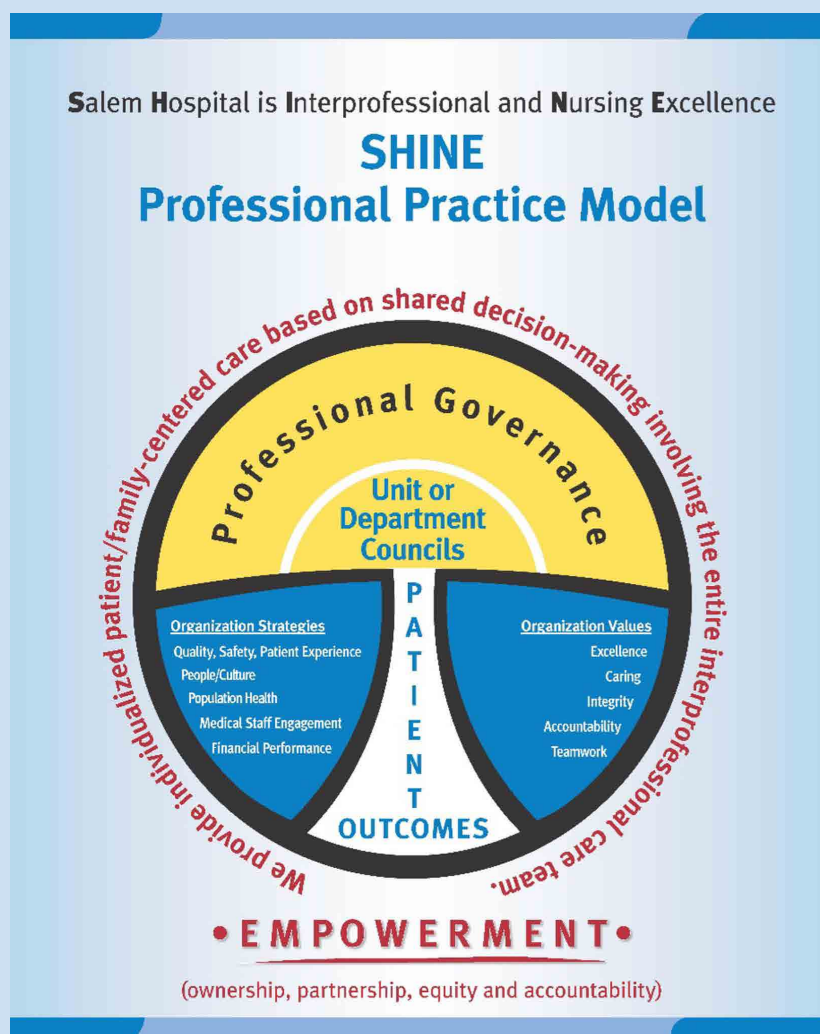


Clinical Excellence Vision—Nursing

We provide ***individualized patient and family-centered care*** based on interprofessional collaboration and shared decision making.

We do this by:

- Applying compassionate, respectful, evidence-based practice;
- Ensuring clinical decisions are made at the point of care by the interprofessional team;
- Embracing our unique interdisciplinary roles and expertise to meet evidence-based standards to foster:
 - *Transformational leadership*
 - *Exemplary professional practice*
 - *Structural empowerment*
 - *New knowledge, innovation and Lean continuous improvement*



Nursing and Interprofessional Clinical Excellence Report

Fiscal Years 2022 and 2023

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Our mission is to improve the health and well-being of the people and communities we serve.

Our vision is to provide an exceptional experience every time.

Chief Nursing Officer Message

Sarah K. Horn, MBA, BSN, RN, NE-BC, RNC-LRN

Senior Vice President and Chief Nursing and Operations Officer

Embracing resilience, renewal and progress on our journey forward

As we stand on the precipice of recovery and renewal, four years after facing the unprecedented challenges brought forth by the pandemic, I am filled with admiration and gratitude for every one of you. Our collective strength, resilience and unwavering commitment to our noble profession and mission have been the driving force that propelled us through our darkest days.



The pandemic tested our mettle — and yet, in the face of adversity, we emerged stronger, more united and more compassionate than ever before. Your commitment to patient care has been a beacon of strength. Our interdisciplinary team — the backbone of our health care family — exemplified courage and dedication, providing unparalleled care while navigating uncharted waters. Your sacrifices, professionalism and boundless empathy have not gone unnoticed.

As we turn the page and embark on the path to recovery, let us carry with us the invaluable lessons learned during these trying times. We have witnessed the power of collaboration, innovation and adaptability in the face of adversity. These qualities have become the cornerstones of our success and will continue to guide us on our journey forward. Our focus now shifts toward renewal, growth and rebuilding. Let us celebrate the victories, both big and small, that brought us here today, knowing each step forward is a testament to our collective strength and determination.

As Chief Nursing and Operations Officer, I am immensely proud of the unwavering pride and excellence that defines our culture. Together, we shall harness the momentum of our shared experiences to build a future that is not just our normal excellence, but a leap beyond excellence. Let us embrace change as an opportunity for innovation, improvement and the delivery of even higher standards of care.

In the coming days, let us renew our commitment to self-care, support one another and foster an environment where everyone can thrive. The road ahead may still hold challenges, but with the resilience we have demonstrated, there is no doubt that we will overcome them together.

I have utmost confidence in the brilliance, compassion and dedication each one of you brings to our daily work. Together, we are not just emerging from the shadows of the pandemic, we are rising, recovering and moving forward with a renewed sense of purpose. As we look ahead, your continued commitment to excellence will undoubtedly lead us to new heights.

It is with a deep sense of pride in all our interdisciplinary professionals, and with a sense of awe for the courage and strength I see in each of you, that I again say, “Thank you!” Thank you for your tireless efforts, your unwavering commitment and for being the heart and soul of the communities we serve.

With heartfelt gratitude,
Sarah

A Message from the Salem Health Clinical Excellence Team

The work reflected in this report depicts the interprofessional culture and ongoing commitment to excellent clinical practice and patient care within Salem Hospital. Much of this work is not front and center, but rather takes place in councils, committees and workgroups that generally operate out of the limelight. However, regardless if patients, the community or even our own staff at large do not know the extent of this supportive work, they can see the results. Every suggestion, improvement, innovation and refinement we make serves to advance clinical practice for the benefit of those who seek our care. This report highlights the work done every day that profoundly impacts our patients and community.

Salem Hospital is working toward our fourth Magnet® designation! Magnet® is awarded by the American Nurses Credentialing Center (ANCC) to health care organizations who demonstrate quality patient care, innovation in nursing practice and a culture where clinicians are empowered to influence decisions that affect their practice. Salem Hospital achieved our first Magnet® designation in 2010 and has continued to exemplify clinical excellence and receive re-designation in 2015 and 2020.

Thank you for your hard work and dedication to our patients and loved ones, your commitment to our health care profession and for living our mission every day.

Staff Engagement and Resiliency Advocate (SERA) Program

With an innovative approach to addressing emotional exhaustion and burnout amongst frontline caregivers, Salem Health's SERA Program has had meaningful impacts during some of the most trying years.



The SERA Team, left to right: Jeff Brown, ED/PMC, D5 SERA; George Escalante, Adult Health SERA; Carla Padilla, Women's and Children's SERA; Heidi Schaap, Critical Care and Women's and Children's SERA; Fred Preston, SH Surgical Services and West Valley Hospital, Lead SERA; John Abraham, Critical Care SERA.

In 2019, recognizing burnout in their team and an increase in staff turnover, the Emergency Department director and manager submitted a grant request to the Salem Health Foundation for support of a resiliency chaplain.

The Foundation graciously approved and funded a part-time resiliency chaplain. The ED leadership conducted a baseline resiliency survey (the tri-survey) in the ED and a control unit that measured emotional exhaustion, emotional recovery and emotional thriving. The survey was repeated after six months of resiliency chaplain support.

The six-month survey showed an improvement in all three areas for the ED, while the control unit showed 25.6% increase in emotional exhaustion over the same time period without resiliency chaplain support. Furthermore, ED staff turnover decreased by 46% during this initial period. With data showing the resiliency chaplain positively impacts staff turnover and resiliency, the role was increased to a full-time position in the ED.

In 2021, the Salem Health CEO and executive team approved three additional positions and the Staff Engagement and Resiliency Advocate (SERA) team was expanded to include supporting the critical care, adult health and women's and children's divisions. By March 2022, the team of four full-time advocates was fully in place.

The tri-survey continues to be utilized annually to measure resiliency in frontline staff and help the SERA team to check and adjust their processes, ensuring they are providing the support frontline teams need. One example of this is when the results of the September 2022 tri-survey showed an increase in emotional exhaustion (a sign of burnout) in frontline staff in all divisions. The SERA team used Lean principles to assess all data points and pivoted to begin providing Stress First Aid (SFA) into the SERA work process and education they give staff.

SFA is a program developed by the Veterans Association (VA) to combat stress and burnout in VA staff. The SERA team adapted SFA for SH and began teaching SFA to unit leaders and frontline teams in December of 2022. SFA provides a common language for staff to use when discussing feelings of being overwhelmed and stressed, which allows team members to recognize stress in themselves and each other. Team members are then able to support each other and call for a SERA referral when needed.

The annual survey completed in September 2023 showed the SERA team had hit the mark, improving emotional exhaustion with SFA by 23%. Specifically, A6E worked closely with their leadership and SERA to recruit and train staff SFA champions. This intentional project not only improved emotional exhaustion by 27.8% for the A6E staff, it also decreased turnover by 27.6%.

One of the most important tasks of each SERA on the team are the one-to-one interactions they have with frontline staff. In Fiscal Year 2023, the four-person SERA team completed 19,235 individual interactions with frontline staff. These interactions give staff the opportunity to share their experiences and difficulties of their day/week. Staff know no topic is off limits and share family and life concerns as well moments of stress in the workplace. The SERAs use their training and expertise to provide support to the team member, including referrals to Salem Health's Employee Assistance Program and other services when indicated.

The success of the SERA team continues to be seen and felt as the CEO and executive team further expanded the team who now also support surgical services and West Valley Hospital. Fiscal Year 2024 promises to show the continued need for and impact of this valuable service provided by the SERA team.

Tricia Shoun, MSN, RN, CCRN

Systems Operations Supervisor

Emergency Department

Health care workers improve subjective happiness using a positive psychology intervention

Homegrown innovation and research takes aim at improving happiness amongst Salem Health staff



The Happiness Advantage research team, left to right: Nancy Dunn, Paul Howard, Freida Ryan-Anzur, Sara Nash, and Elizabeth Whitney.

In 2018, Nancy Dunn, RN, MS, Clinical Excellence Coordinator, and Sara Nash, MSN, RN, CMSRN, NE-BC Infection Preventionist, attended a session on Happiness at the Magnet® Conference. They learned about a positive psychology intervention (PPI) that one unit of nurses did over three months. In a book club together, they read *The Happiness Advantage* by Shawn Achor. They then individually began a 21-day challenge to start and/or improve an evidence-based behavior that improves happiness. They saw their unit's Press Ganey scores increase significantly during this experiment. Nancy and Sara returned to work, pitched this idea to Professional Governance and secured support to adapt and implement as cohorts. They made two major changes: 1) They decided to measure subjective happiness before and after the intervention, and 2) they designed a personal journal to track the 21-day challenge. Two cohorts showed significant increases in happiness, and then in December 2019, COVID hit.

By fall 2020, Nancy realized her colleagues could benefit from this intervention, now more than ever. Nancy proposed a research study of the PPI as a randomized control trial (RCT), the gold standard of research designs. Nancy recruited Sara; Paul Howard, MLIS, PhD, Health System Librarian; and Freida Ryan-Anzur, BSN, RN, OCN, CHPN; to assist her with a research proposal and IRB application. Paul coached the team to search for a validated measurement tool using an evidence table. They selected the Subjective Happiness Scale (SHS), a four-item measure, to evaluate the subjective happiness of participants in this study (Lyubomirsky & Lepper, 1999). The SHS is a self-reported assessment of an individual's overall level of happiness using a seven-point Likert-type scale. They continued their literature review to determine the behaviors with the strongest evidence that were the simplest to start/improve, given the limited bandwidth of health care workers (HCW) at the height of a pandemic. They chose the following evidence-based behaviors for their 21-day challenge: 1) Seven to eight hours of sleep daily; 2) expression of gratitude; 3) meditation; 4) exercise; 5) nutritious meals and snacks; 6) expression of three good things; 7) family/friend connections; and 8) random acts of kindness (Achor, 2011, pp. 51-6; Adair et al., 2020; Brook, et al., 2019; Health et al., 2020; Sexton, J. and Adair, K.C., 2019).

In March of 2021, the application was approved with Nancy as Principal Investigator (PI) and Sara, Paul and Freida as Co-Investigators. Their three research questions included:

1. Do HCW who engage in a PPI score higher in SHS over a period of six months compared to peers who did not participate?
2. Does engagement in behaviors shown to increase subjective happiness, along with confidence in their ability to change their level of happiness, moderate the effects of the change in subjective happiness of HCW?
3. Is the magnitude of the change in SHS score experienced by HCWs who participate in PPI maintained six months post-intervention and again at 18 months post-intervention?

By June of 2021, 183 staff and physicians consented to participate in the RCT. They were randomized into two arms: 89 in control and 94 in intervention. All participants completed a baseline SHS, current EBP behavior practices and personal and work demographics. The only exclusion criteria were previous reading of *The Happiness Advantage*. The pandemic restrictions required investigators to use voice-over PowerPoint recordings for onboarding to each arm's research process and protocols. The control group was asked to NOT read *The Happiness Advantage* and lead their lives as the normally do. The intervention group was asked to read *The Happiness Advantage* cover to cover and when finished, start a 21-day challenge for experiential learning. In the challenge, they were asked to select 1–3 of eight

evidence-based behaviors that they could either improve or start. They were asked to document their improved/new behavior in a journal specifically designed for this purpose and issued to them for free. They were asked to both read the book and do the 21-day challenge over the three to five month timeframe.

For the control group, SHS and behaviors were measured again at six months. For the intervention group, the SHS and behaviors were measured again post PPI, and again at six and 18 months after that.

All participants were asked about their confidence level to increase their happiness. Mean ratings (on a seven-point scale) of confidence in ability to improve happiness was 5.6 ($SD = 1.2$) for the control group and 5.7 ($SD = 1.2$) for the intervention group, a non-significant difference ($t[178] = 0.63, p = 0.524$).

Study Results

Results were finalized in May 2023. Within the intervention group, SHS significantly increased (estimate = 0.71, $SE = 0.11$, $t\text{-value} = 6.47$, $p\text{-value} < 0.001$, $d = 0.60$) from pretest to posttest; pretest to six-month follow-up (estimate = 0.60, $SE = 0.12$, $t\text{-value} = 4.96$, $p\text{-value} < 0.001$, $d = 0.51$); and pretest to 18-month follow-up (estimate = 0.50, $SE = 0.14$, $t\text{-value} = 3.68$, $p\text{-value} = 0.001$, $d = 0.42$). ***In summary, there were significant increases in SHS; 20% post intervention, 17% at six months (85% maintenance) and 14% at 18 months (70% maintenance).***

Conversely, the control group decreased their SHS scores by a very small percentage, which was not statistically significant.

The most frequently reported, regularly practiced behaviors were connection with family and friends, expressions of gratitude and exercise. No moderators — including demographics, behaviors, and confidence in ability to change subjective happiness — had significance on results (all $p\text{-values} > .337$).

Before the 18-month follow-up with intervention participants, Nancy and Sara submitted an abstract for presentation at the 2023 Magnet® Conference. They sent the abstract to Shawn Achor who immediately contacted Sara and Nancy. This resulted in Shawn and his partner, the International Thought Leader Network (ITLN) offering two free registrations to certify in the Orange Frog Workshop. This experiential, two-day workshop teaches the science of peak performance based on the seven actionable principles from *The Happiness Advantage*

and provides a sustainable approach to enhancing productivity at the individual, team and organizational levels. Nancy Dunn and Fred Preston attended the train-the-trainer workshop in Virginia in March and completed their certifications by facilitating two, two-day workshops in June at Salem Hospital, each with 20 participants. The results in SHS change were comparable to the research RCT results and the participants gave the workshop a 9.4 average rating on a scale from 1 to 10, with 10 being outstanding. The key stakeholders met and proposed an adaptation to a “health care version” to test in another research study in the Women’s and Children’s Division in mid-2025.

Conclusion and Next Steps

Advances in positive psychology and neuroscience have progressed markedly in the last five years, most notably in the health care environment (Kunzler et. al., 2020). Research has explored the variety of factors that contribute to subjective happiness and well-being, including the role positive emotions — and the behaviors that generate them — play in fostering resilience and effective coping skills for physicians, nurses and other health care professionals facing challenging and stressful work environments (Kunzler et. al., 2020; Townsley et. al., 2023). The field now recognizes that workplace culture can change for the better through structural interventions that are responsive to workers’ emotional needs (Donaldson et. al., 2019). To date, most of the PPIs in the health care workplace have generally implemented two types of programs (Townsley et. al., 2023). One type encourages HCWs to perform certain behaviors (expressions of gratitude, “three good things,” self-compassion, etc.) as they go about their workday to build resilience through a “high-reps, low-weight” approach, sometimes using smartphone apps or other regular prompts to reinforce the behaviors. The other type implements programs that present positive psychology principles and practices in longer format venues, such as resilience classes or mindfulness trainings that occur outside of the work environment. Prior research (e.g., Iverson et. al., 1998) has identified a close inverse relationship between happiness and burnout, with one recent study finding that “[i]ncreased positive affect . . . and meaning and purpose . . . scores were significantly associated with reduced burnout” (Bannon et. al., 2022, p. 1). This provided the rationale for the hypothesis that increases in subjective happiness can help to reduce burnout.

The study demonstrated the value of using a PPI that included gaining positive psychology knowledge and its application with experiential learning with a 21-day journal focused on eight EBP behaviors. It demonstrates that HCW happiness can be improved to help decrease burnout and improve emotional recovery by using PPI. Sustainment of happiness

scores using the SHS was convincingly shown at both the 6-month and 18-month posttest for those participants in the intervention arm of the study.

In March 2023, Nancy and Sara's abstract was accepted for a one-hour podium presentation at the 2023 Magnet® conference in Chicago. Additionally, in April 2023, the American Nursing Credentialing Center (ANCC) announced that Shawn Achor would be the 2023 conference opening keynote speaker to over 13,000 nurses anticipated to be in attendance, making for an exciting confluence of efforts and awareness regarding happiness research in nursing and the health care field at large.

Nancy Dunn, MS, RN

Clinical Excellence Coordinator, Unscheduled



Professional Governance Council Reports

Salem Health enjoys a robust and active Professional Governance structure that both serves as a forum to constructively amplify the frontline voice and generate meaningful work that positively impacts clinical practice and patient care.

The following section highlights the work and achievements of what are known as Functional Councils within the system. These councils focus on topics that are relevant and impactful across most, if not all, areas of practice and are comprised of a diverse membership across the spectrum of nursing practice areas, as well as our allied health care partners from interprofessional specialties.

- **Clinical Structures**
- **Evidence-Based Practice Council (EBP)**
- **House-Wide Staffing Council (HWSC)**
- **Informatics Council**
- **Nursing Peer Case Review (NPCR)**
- **Professional Growth and Development Council (PG&D)**
- **Quality, Safety and Patient Experience (QSPE)**
- **Transformational Leadership Council (TLC)**



Clinical Structures Council

**Anna Harris, MSN, RN, Professional Development Specialist,
Council Chair**

**Donna Thomas, BSN, RN, PCCN, CHFN, Heart Failure Nurse
Navigator, Council Chair**

**Kimberly Vachter, BSN, RN, CCRN, Clinical Nurse, Inpatient
Rehab, Council Chair**

Council Purpose

The Clinical Structures Council was established in 2017 as a sub-council of Practice Council. This council continuously advances standards for clinical practice in accordance with the best available evidence. The members do this by performing a regular review of clinical procedures to ensure staff have access to the most up-to-date clinical practice evidence for high quality care for patient and family outcomes. Using a broad and complementary membership from clinical divisions, service lines and clinical ancillary services, the Clinical Structures Council ensures the voice of the front line is heard when updating clinical procedures for all patient populations and encounter experiences.

FY22-FY23 Key Achievements

Lippincott Procedure Review: The Clinical Structures Council reviewed and made recommendations on over 1,000 Lippincott Procedures in FY22-23. Critical Notes were revised and removed to promote clarity and remove redundancy.

All Clinical Standard Work Review: Members of this council led and participated in the review process for approximately 30 Standard Work documents used by nursing staff across the organization.

Patient Education Material Requests: The Clinical Structures Council reviewed patient education materials for clarity and accuracy to ensure high-quality materials are distributed by nursing staff at Salem Health.

Evidence Based Practice Council

Barb Merrifield, MSN, RN, NE-BC, Director of Clinical Practice Support and Magnet®

Cassandra Peters, BSN, RN, Clinical Nurse, CVCU, Council Chair

Council Purpose

The EBP Council continuously advances standards for clinical practice in accordance with the best available evidence. Using a broad and complementary range of quality approaches, such as EBP, Research, Lean Methodology and Quality Improvement, the EBP Council helps members of the Salem Health Hospitals and Clinics team develop competency in these areas and solve practice problems. The EBP Council disseminates evidence-based information to support the organization's journey toward excellence in the delivery of care and assist clinicians in delivering optimal care, thus ensuring high quality patient and family outcomes.

The EBP Council also provides a forum to educate and mentor all members of the SH team to appraise evidence for use in practice. EBP members support our SH team to generate new knowledge to guide our practice and positively influence the health outcomes for our communities. The EBP Council intentionally influences cultural change, exemplified through empowerment and strong staff engagement, in a bold spirit of inquiry, with a focus on continuous quality improvement.

FY22-FY23 Key Achievements

- Clinical Inquiry Challenge
 - ▶ 2022 Winner: IMCU, with 46 entries.
 - ▶ 188 total entries received from 15 units.
 - ▶ EBP Council evaluated submissions for education, improvement project and research potential.
- Evidence Based Practice Skill Building Workshops
 - ▶ Education workshop presented to professional governance membership.
 - ▶ Dedicated 30 minutes of every meeting to a learning activity.
 - ▶ Follow-up assignments completed for practical application.

House-wide Staffing Council

**Shelley Weise BSN, RN, Nurse Manager, Mother Baby Unit,
Council Chair**

**Annie Derochowski BSN, RN, Clinical Nurse, Float Pool,
Council Chair**

Council Purpose

House-wide Staffing Council was established to meet the requirement set forth by the State of Oregon and Oregon Administrative Rules regarding hospital staffing. The Council provides support and guidance for staffing and staffing plans on a continual basis. The House-wide Staffing Council has been meeting since 2006.

This council is dedicated to:

- Promoting the health and safety of our patients by ensuring adequate staffing to meet the health care needs of our patients.
- The evaluation and modification of staffing plans where the primary consideration is the provision of safe, quality care and adequate nursing staffing based on nationally recognized and evidence-based standards and guidelines.
- To ensure compliance with Oregon Nurse Staffing Law.

FY22–FY23 Key Achievements

- The staffing council monitors, evaluates and modifies staffing plans by considering:
 - ▶ Patient outcomes;
 - ▶ Complaints regarding staffing, including complaints about a delay in direct care nursing or an absence of direct care nursing;
 - ▶ The number of hours of nursing care provided through a hospital unit compared with the number of patients served by the hospital unit during a 24-hour period;
 - ▶ The aggregate hours of mandatory overtime worked by nursing staff;
 - ▶ The aggregate hours of voluntary overtime worked by nursing staff;
 - ▶ The percentage of shifts for each hospital unit for which staffing differed from what is required by the staffing plan;
 - ▶ Any other matter determined by the council to be necessary to ensure that the hospital is staffed to meet the health care needs of patients; and
 - ▶ Any report filed by a nursing staff member stating the nursing staff member's belief that the hospital unit engaged in a pattern of requiring direct care nursing staff to work overtime for nonemergency care.

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- The staffing council reviews and trends staffing concerns submitted via the patient safety alert (PSA) system to ensure current staffing plans ensure safe patient care. Council investigation includes, but is not limited to:
 - ▶ Staffing at time of concern: Requested staff versus received.
 - ▶ Review of assignment for staff submitting concern for appropriate workload intensity and acuity.
 - ▶ Identification of any additional resources, including staffing office, resource staff, other RN/CAN staff on unit, charge nurse, house supervisor, per diem, contract labor, etc.
 - ▶ Review of patient electronic medical record for evidence of any missed cares (see below for detail listed of possible missed care).
 - ▶ Review of unit meal and rest compliance during shift.
 - ▶ Time clocking review for shift or individual staff, to determine if overtime resulted.
 - ▶ Evidence/initiation of chain of command for Daisy Award Optimization
 - Policy oversight and review
 - ▶ Staffing Plan for Nursing Services
 - ▶ Nursing U-Status Guidelines
 - ▶ Floating Guidelines
 - ▶ Time Off Request Guidelines
 - ▶ Nursing Staffing and Scheduling Guidelines
 - ▶ Staffing, Acuity and Productivity Software Downtime
 - HealthStream Education Development and Review
 - Staffing Survey Preparation

FY22–FY23 Key Metrics Tracked

Staffing Indicator Dashboard:

(Reviewed Monthly)

- Voluntary Turnover and Hiring
- Voluntary Transfers
- Family Medical Leave as % of Total # RNs
- Overtime as % of Total Nursing Hours Worked
- Sick Time as % of Total Nursing Hours Worked

-
- Called Off Time as % of Total Nursing Hours Worked
 - Standby Time as % of Total Nursing Hours Worked
 - % Nonproductive Time (FTE Predictor Tool – Replacement Factors tab)

Staffing Plan Leadership Report Cards:

(Reviewed annually at minimum)

- Patient Outcomes
- Patient Satisfaction
- Non-Overtime Nurse Staffing Concerns
- Overtime Nurse Staffing Concerns
- Staffing Levels
- RN Survey Meals and Breaks responses
- Aggregate Mandatory Overtime hours worked
- Aggregate Voluntary Overtime hours worked

Informatics Council

Bernard Maurer, RN, Clinical Informatics Supervisor, Council Chair

Lacey Geigle, BSN, RN, Informatics Nurse, Council Chair

Sarah Aulerich, BSN, RN, BS, CCRN, Clinical Nurse, Med-Tele, Council Chair

FY22–FY23 Key Achievements:

- **IV Pump project:** Informatics Council was a key part of decision-making for clinical workflows for the IV pump and Epic, which resulted in safer drip administration for patients and less administration errors.
- **Beaker (Lab workflows):** Informatics council provided feedback and helped make the Beaker implementation and training more user friendly.
- **Optimizing Nursing Brain:** Informatics Council provided members input for the initial brain implementation and continues to provide feedback to improve the real time tasks for nursing, including labs, meds and patient assessments.

FY22–FY23 Key Metrics Tracked:

- **Elimination of waste / Prioritize Length of Stay-related work:** Informatics Council focused on Length of Stay work and was a key part of implementing improvements in Epic for “New Discharge Delay Options” and documentation of the “Last BM patient list column,” which were barriers to patient discharges.
 - ▶ New Discharge Delay Options
 - ▶ Last BM Patient List columns
- Attendance / Membership: 62%
- Epic Enhancements reviewed at Council: 38
- Foundation vs. non-Foundation Epic Enhancements implemented: 34 with 0 non-foundation.

Nursing Peer Case Review (NPCR)

Sandra Bunn Sandra Bunn, MSN, CNS-PP, ACNS-BC, BC-ADM, Diabetes Care, Council Chair

Miranda Hennan, BSN, RN, CEN, PCCN, Clinical Nurse, Emergency Department, Council Chair

Council Purpose:

The purpose of Nursing Peer Case Review (NPCR) is to help ensure the quality of nursing care through safe deliverance of standards of care and newly discovered evidence-based practices. “Peer review nursing is the process by which practicing registered nurses systematically access, monitor, and make judgments about the quality of nursing care provided by peers as measured against professional standards of practice. Peer review implies that the nursing care delivered by a group of nurses or an individual nurse is evaluated by individuals in the same rank or standing according to established standards of practice” (ANA 1988).

FY22–FY23 Key Achievements

- Improved the referral process for PSAs to come to NPCR by activating a button on the PSA system.
- Standard Work on obtaining orthotic ordering across the three most frequently ordering units: Ortho, NTCU and A5E.
- Improving patient safety and outcomes by addressing chain of command concerns with patient placement and activation of RRT / Code Blue
- Continuum of care work for patients in imaging procedures without the influence of an RN for an extended period of time.
- Standard Work for activating and requesting an interpreter and interpreter services (IDEAL goals).
- Assessment of AC IVs and support of Vascular Access improvement project for the same.
- Addressed continuity of care for IV fluids in patient moving to IP unit from ED.

Professional Growth and Development Council

Kesley Muramoto BSN, RN, Clinical Nurse, General Surgery, Council Chair

Kaylee Corrado BSN, RN, Clinical Nurse, Emergency Department, Council Chair

Council Purpose

The Professional Growth & Development Council (PG&D) is an interprofessional group designed to support the continuous professional growth and development of Salem Health Hospitals and Clinics' valued staff. To help achieve the organization's mission and vision, PG&D works to support staff in becoming life-long learners and reach their highest potential through ongoing education, education advancement, involvement in professional organizations and obtaining/maintaining specialty certification. In addition, PG&D is passionate about providing staff with well-deserved recognition for providing high quality patient care.

FY22–FY23 Key Achievements

- APEX Revisions
 - Goal: Increase participation and value of APEX program.
 - ▶ Reassessed reward activities and reassigned point values.
 - ▶ Developed an electronic submission process.
 - ▶ Created future plans to include more roles in eligibility to participate.
- Educational Offerings from Bi-Annual Educational Needs Assessment
 - ▶ Length of Stay Education
 - ▶ Care with Respect
 - ▶ Long Covid

- Daisy Award Optimization

Goal: Increase quantity and quality of nominations.

- ▶ 4SPS Test of Change: New external nomination site on SH website for patient access and QR code on all printed forms. Added examples of nomination criteria to the forms (printed and electronic) to inspire more thoughtful and higher quality nominations.
- ▶ Results: Reviewed 28 nominations and selected 11 winners who demonstrated excellence in the areas of clinical skills, compassionate care, exemplary service and continued commitment to their profession and the organization.

- Certification Review Courses

- ▶ Certified Perioperative Nurse (CNOR): In-person class, 12 participants.
- ▶ Certified post Anesthesia Nurse (CPAN) / Certified Ambulatory Perianesthesia Nurse (CAPA): In-person class, 16 participants.
- ▶ Stroke Certified Registered Nurse (SCRN): Online class, 10 participants.

- Star Awards Optimization

Goal: Improve visibility of Star Awards and winners and remove barriers to nominations.

- ▶ Council proposed updating Star Awards SharePoint page to newest version for visual appeal and ease of navigation, as well as the FAQ/tip sheet and expectations for award, adding delivery/presentation by leaders and highlighting winners in a rotating storyboard on site and Daily Dose.
- ▶ Work to continue into FY24.

FY22–FY23 Key Metrics Tracked

- RN Certification Rate
- BSN Rate
- Bi-Annual Educational Needs Assessment
- Daisy Award Nominations and Winners

-
- Magnet® Conference Shared Learnings
 - ▶ Shared Magnet® Conference virtual presentation on an EBP mentoring program in another organization.

 - Oregon Nursing Research and Quality Consortium (ONRQC) Annual EBP Conference
 - ▶ Hosted by Salem Health on April 17, 2023.
 - ▶ Theme: “Using Evidence to Address Clinical Priorities.”
 - ▶ Salem Health Podium Presenters:
 - ❖ Nancy Bee, MBA-HCM, BSN, RN, CEN, NE-BC
 - ❖ Patricia Shoun, MSN, RN, CCRN: “Care for the Caregiver: Resiliency Advocates Matter”
 - ▶ Salem Health Poster Presenters:
 - ❖ Erin McGinnis, BSN, RN: “Omnicell Safety Gates Improve Nurse Confidence”
 - ❖ Nancy Dunn, MS, RN: “Positive Psychology Experience Improves Health Care Worker Happiness”
 - ❖ Ellie Butsch, MSN, RN, PCCN: “Sound the Alarm! Standardizing the Use of Alarms to Decrease Falls”
 - ❖ Ann Can, MS, RN, CNS, CNRN: “Take Care of Yourself First: Pausing to Don Full PPE”
 - ❖ Amy Brown, BSN, RN: “Targeted Daily Communication Reduces Hospital Length of Stay”
 - ▶ Salem Health Panel Member:
 - ❖ Nancy Dunn, MS, RN: Nurse Well-being

 - Evidence Tables Completed
 - ▶ Alcohol Impregnated Caps for All Vascular Access Devices

PICO Question: In the hospitalized patient with vascular access devices, does the use of alcohol-impregnated caps reduce the incidence of hospital-acquired infections compared with only placing alcohol-impregnated devices for central line patients only over a three-month period?
 - ▶ Single-use Aromatherapy products

PICO Question: In the acute care inpatient setting, does the use of single-use aromatherapy products reduce the risk of hospital-acquired infections compared to shared use of aromatherapy essential oils?

- ▶ Tracheostomy Care Kits Project

Big Vague Concern: Patients did not have proper supplies at bedside or on unit, and nurses had low confidence in what was needed for care. Critical appraisal of evidence completed, created SW for implementation, shared with stakeholders and reviewed products.

- Abstract Writing and Poster Development Workshops

- ▶ EBP Council hosted annual workshops alongside Clinical Excellence team members in support of Professional Practice Day and for ONRQC's annual EBP Conference submission.

Quality, Safety and Patient Experience Council

Cassandra Peters, BSN, RN, CCRN, Clinical Nurse, CVCU, Council Chair

Sara Nash, MSN, RN, CMSRN, NE-BC, Infection Preventionist, Council Chair

Purpose

- Collaborate, support, monitor, make accountable, encourage and celebrate quality and safety.
- Functions as an active group for frontline team members to bring concerns of quality, safety and patient experience for awareness, support and escalation when necessary.
- Advise and assist in enhancing and enabling a culture of quality and safety.
- Share quality, safety and patient experience data with frontline teams.

Key Achievements

FY22

- Constructed and designed the new Quality, Safety and Patient Experience Council.
 - ▶ Created the charter, expectations, purpose and dashboard.
- Clarified eyewear requirements for all patient types (COVID excluded).
 - ▶ Changed to *recommended* instead of required.

FY23

- Suicide precautions (Superuser training)
 - ▶ Measure compliance/impact of training
- Joint commission survey “watch points” (tape, furniture)
 - ▶ No citations from TJC survey related to these citations at next survey.
- Pass through supply standardization (clean or toss)
 - ▶ Measure reduction of cost to replace “clean” eligible supplies vs. pre-standardization by unit in AE tower.

Key Metrics Tracked

FY22

- Eyewear requirement
 - Standard clarified and changed from required to recommended, which helped improve compliance.
 - Informed staff of change to eyewear standard.

FY23

- Suicide precautions training
 - Eight Superusers trained for suicide ideation documentation compliance.
- Joint Commission Survey Watch Points
 - No citations from TJC related to watch points.
 - Cheri Blevins, Manager of Regulatory, presents watch points monthly to council for dissemination and to spread knowledge to frontline staff.
- Pass Through Standardization
 - Updated standard work to include commonly-used items in pass through for cleaning and spread of knowledge of cleaning practices for pass through.
 - Created list of commonly-used items in pass through to clean or toss.
 - Measured compliance to standard work on units.

Transformational Leadership Council

Harriett F. Martin, BSN, RN, PCCN, Clinical Nurse, CDU, Council Chair

Alexandra Adelman, MSN, RN, PCCN, Clinical Nurse, Med-Tele, Council Chair

Brandy Reishus, BSN, RN, CEN, Clinical Nurse, Emergency Dept, Council Chair

Council Purpose

The Transformational Leadership Council (TLC) was originally named Practice Council and was one of the foundational councils at the start of professional governance at Salem Health Hospitals and Clinics. Redesign of professional governance structure in 2021, including a revised purpose and outcomes, prompted the renaming of the council to the TLC.

Through collaboration and mentorship, TLC seeks to give clinical staff a strong voice in clinical decision-making, promoting practice surveillance/inquiry, community connection and continuous improvement, thereby assuring quality patient outcomes, workflows and staff satisfaction.

FY22–FY23 Key Achievements

Journal Club: TLC hosted a journal club for members to promote professional development, growth and knowledge sharing. Most months, the committee would choose a journal article for review and discussion during the meeting, with a focus on articles in the realm of transformational leadership.

RN Survey: TLC members collaborated to identify strategies to promote engagement, awareness and participation in the biennial RN survey throughout their respective units.

Caring Beyond Bedside: TLC served as champions to raise awareness and unit participation in the annual Caring Beyond the Bedside charitable donation and volunteerism event.

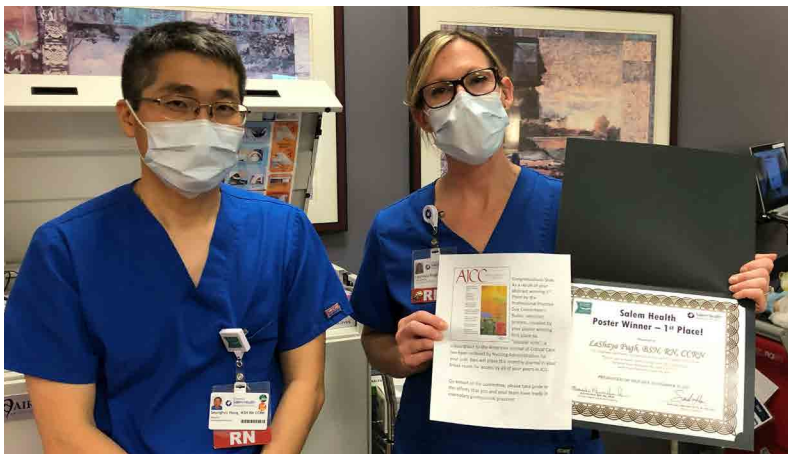
Patient Transport: TLC investigated an opportunity for process improvement from frontline nursing regarding difficulty in identifying requirements for monitoring and RN

accompaniment during patient transport. The group rounded on units, investigated current state and concluded their efforts by getting the appropriate policy hyperlinked into Epic EMR for easier access to accompaniment and monitoring requirements at time of transport.

Blood Consent: Frontline nursing brought forward a practice concern that nurses were at times completing informed consents for blood administration, often without a licensed independent provider (LIP) having first completed the procedure, alternative, risks and questions (PARQ) conversation with the patient. Upon review, TLC determined that this raised concern for the potential of nurses operating outside of the Nursing Scope of Practice. Work was initiated with a large interdisciplinary team that ultimately created a new policy for blood consent, including specification that a LIP must complete the PARQ conversation with the patient prior to signing blood consent.

Professional Practice Day poster presentations

Salem Health Hospitals and Clinics celebrated Professional Practice Day on Sept. 28, 2021 and Dec. 7, 2022. This annual event is an opportunity for staff to share their excellent quality improvement and clinical innovation projects across the organization and gain experience with abstract writing, developing professional posters and presenting. In 2021, there were 12 participating projects and in 2022, 16 projects.



2021 Poster Winner, LeShaya Pugh, RN

You've Got to Know when to Hold 'em: Possible Relationship between Two Senna per Day and CAUTI

LeShaya Pugh BSN, RN CCRN; Anne Erickson BSN, RN; Emily Haydel BSN, RN, CCRN; Jennifer Rice BSN, RN, CCRN

Background/Problem

Nursing staff in the Medical-Surgical Intensive Care Unit (ICU) noted that Catheter Associated Urinary Tract Infection (CAUTI) incidence increased over a period of 12 months despite implementation of best practices for urinary catheter insertion, maintenance and removal.

Coincidentally, the incidence of diarrhea increased at the same time. Nurses in the ICU grew curious about the possible connection between diarrhea and CAUTI. The hospital Adult Bowel Care Protocol (ABCP) is routinely used in the ICU to support normal bowel function.

Methods

- Nurses employed Lean methodology to measure what was happening and what should be happening.
- Zero out of seven ICU patient charts demonstrated proper application of the bowel protocol.
- Clinical nurse leaders instructed staff on proper use of ABCP during the month of March, 2021.
- Tip Sheets were emailed to unit staff contrasting Clinical Practice Myths with the Protocol Truths to assure all nurses received instructions.

Applying the Adult Bowel Care Protocol

Myth: Continue all bowel care meds even after the patient has had an adequate result in order to prevent constipation.

Truth: Per the Adult Bowel Care Protocol (ABCP), if the patient has had adequate results or frequent stools in the past 24 hours, hold Senna but continue Colace. If the patient has not had a BM in >72 hours, then restart Senna.

Bristol stool chart

Type 1	Separate hard lumps, like nuts (hard to pass)
Type 2	Sausage-shaped, but lumpy
Type 3	Sausage-shaped, but with cracks on surface
Type 4	Sausage or snake like, smooth and soft
Type 5	Soft blobs with clear-out edges (easy to pass)
Type 6	Fluffy pieces with ragged edges, mushy
Type 7	Watery, no solid pieces (entirely liquid)

Results: 90 days CAUTI Free

Catheter Associated Urinary Tract Infections Cases per 1000 device days between January and June 2021

Month	Cases per 1000 device days
JANUARY	4
FEBRUARY	2.4
MARCH	2.2
APRIL	0
MAY	0
JUNE	0

Protocol Re-Education

Lessons Learned

- Hospital Protocols allow for nursing judgement to either hold or administer medications.
- Following an educational intervention, 6/7 (86%) chart reviews showed ABCP compliance.
- CAUTI incidence in this situation is inversely related to the ABCP compliance.
- Continued consideration of practice patterns and the current protocol are important steps to reducing hospital related infections.

Acknowledging the ICU CAUTI Prevention Team
Benjamin Burlison, Michael Griffiths, Jean Lucas, Maria Moore, Tamara Wallace, Ann Alway, Dana Rose, Tracy Shepherd, Sarah Dawson, Seunghyo Hong, Carolyn Wiens, Pamela Cortez.

This poster was made possible by a grant from the Salem Health Foundation.

Contact: Leshaya.pugh@salemhealth.org

2021 Projects

Certification Resources: How To “Sell” the Seats

Brandy Belling, BSN, RN, CEN; Miranda Hennan, BSN, RN, CEN, PCCN; Kaylee Corrado, BSN, CEN, RN

Culture Change: Care in Place to Meet the Varying Needs of the Patient

Kristiina Broten, MSN, RN, PCCN; Ellie Butsch, MSN, RN, PCCN; Marge Willis, DNP, RN, NEA-BC, CCRN-K

CUT IT OUT!! Reducing Specimen Errors in the OR

Saydie Newkirk RN, BSN, CNOR

Cut the Cord: Implementing an Evidence-Based Continuous Pulse Oximetry Discontinuation Protocol

Ann Always, MS, RN, CNS, CNRN; Kristiina Broten, MSN, RN, PCCN; Ellie Butsch, MSN, RN, PCCN; Adam Dendauw, BSRC, RRT; Nancy Dunn, MS, RN; Dinah Loa, MD; Kathy Martin; Bernard Maurer; Charleigh Nygaard, BSN, RN, PCCN; Jessica Reese, BSN, RN, CMSRN; Allison Seymour, BSN, RN, CMSRN; Sarat Velivela, MD

Empowering Black and African American Students Using a Mentorship Program

Marnasha Fowlkes-Cetz BSN, RN; Justin Davis BSN, RN; Stevie Drake; Ken Gilbert

Neuro Trauma Care Unit Nurses Increase Their Knowledge and Confidence with TBI Patients

Nicole Belknap, RN, BSN; Glenda Arreola, RN BSN, PCCN; Maddie Pelley, RN, BSN, CCRN; Gabe Piccirilli, RN, BSN

Length of Stay and Mortality for Patients Who are COVID-positive with a Pneumomediastinum (PM) and Those without. Is there a difference?

G. Sierra Schneider, DVM, BSN, RN, CCRN

PRACTICE MAKES PERFECT! Monthly Code Blue Drills Improve Staff Confidence During Code Blue Events

Bethanie Quiel BSN, RN

Pre-Procedural Sedation: Timing is Everything

Teri Benzinger, RTR; Nancy Leach, BSN, RN, CVRN; Amy Crain, BSN, RN, PCCN; Kristen Perrin BSN, RN CRN

Kelly Bodnarchuk, MBA, BSN, RN, CENP; Nancy Leach, BSN, RN, CVRN; Marcus Whitney, MBA, JD; Ann Alway, MS, RN, CNS, CNRN

Rita Giles, MPH, RD, CNSC

LeShaya Pugh BSN, RN CCRN; Anne Erickson BSN, RN; Emily Haydel BSN, RN, CCRN; Jennifer Rice BSN, RN, CCRN

Rachael Spilde, BSRT, RRT

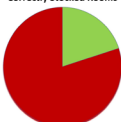
Breathe Easy with Tracheostomy Safety Protocols

Author
Rachael Spilde, BSRT, RRT

Problem

- A critical airway incident with a tracheostomy patient led to an urgent review of the tracheostomy policy and stocking practices.
- Visual inspection of trach supplies for 10 patients on a 40-bed med surg unit
- Shown that only 20% of tracheostomy patients had correctly stocked supplies.


Correctly Stocked Rooms



■ Rooms Correctly Stocked
■ Rooms Incorrectly Stocked

Aim

The primary objective of this project is to improve safety for tracheostomy patients by ensuring the correct tracheostomy tubes, suction catheters, and obturator are stocked at the patient's bedside.



This poster was made possible by a grant from the Salem Health Foundation.

Respiratory therapy promotes the use of visual aids and standardized equipment to improve safety for tracheostomy patients

Methods

Using an interprofessional team approach for this quality improvement project, the project scope included:

- Direct visualization of 10 patients on two 40-bed inpatient medical units to assess the presence of trach supplies available at bedside
- An assessment of 20 staffs' knowledge utilizing a four-question survey to determine a baseline knowledge of and competency in the appropriate equipment at bedside.

This Patient has a TRACHEOSTOMY

Date placed if N/A:

Current trach size: _____ (ET/Endotracheal), Inner Cannula Size: _____

Manufacturer: _____ Outer trach size: _____

Suction catheter size: _____ Suction Depth: _____

Empiric assessment of the equipment is used. Medication delivery equipment not used for suction of secretions.

This patient has a LARYNGECTOMY


Do NOT intubate or oxygenate via the mouth

Performed on (date): _____

Tracheostomy tube size (if present): _____

Notes:

Please sign up for the alert in the notes. The information will be sent to the email address in the alert. (If you are the alert manager, you will receive the alert.)




Signatures of all team members are required for this alert. If you are the alert manager, you will receive the alert.


Strategy and Implementation

- Visual aid placed at HOB upon admission
- Standardized workflow for tracheostomy admissions
- Standardized order set for tracheostomy patients
- Standardized tracheostomy supply box
- EPIC prompts added for tracheostomy supplies


Implications for Clinical Practice

Few institutions collect data on tracheostomy outcomes (such as mortality, length of stay, hospital readmission rate, tube blockage or accidental decannulation). If institutions are not aware of the problem, they will not have a sense of "ownership" or responsibility and will not realize the urgent need for improvement.





Take a picture to download Abstract and References



Results

- Variation in tracheostomy management results in confusion among staff. In addition, shared responsibility between interprofessional teams and the infrequency of seeing tracheostomy-related complications put patient safety at risk.

100% of surveyed nurses

- Care for less than three trach patients per year
- Omitted at least one piece of emergency equipment.
- Stated that a visual aid would improve stocking practices

Outcomes

- Attitudes about proposed changes to the tracheostomy workflow are highly positive throughout multiple disciplines.
- Several nurses stated that a visual aid would improve stocking practices.
- One respiratory therapist said, "...Knowing at a quick glance what is needed during an airway emergency reduces stress." -Kristin McKee, RRT
- One nurse said, "...Visual aids are commonly used at the bedside. Using one to improve safety for our trach patients just makes sense." -Madeline Lindquist, BSN, RN

Next Steps


- Use Lean methodology to implement a test of change on a scoped area of operation to localize, test, and adjust the standard workflow
- Undertake further collaboration by utilizing established organizational shared leadership teams to develop and implement
- Employ adaptation to prototype a tracheostomy supply box and consult the SH Products and Standards committee to gain cost implication and approval
- Collaborate with the Informatics shared leadership council to assess build of a best practice alert for tracheostomy patients.

Acknowledgements

Andrea Vu, BSN, RN
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Poster Contact

Rachael Spilde
Rachael.Spilde@salemhealth.org



Patricia Shoun, MSN, RN, CCRN; Amie M. Wittenberg, MSN, RN, NE-BC; Nancy Bee, MBA-HCM, RN, CEN, NE-BC; Fred Preston, BS, CISM

Does Pronation Prevent Intubation and ICU Transfers in COVID-19 Patients?

Ellie Butsch, MSN, RN, PCCN; Ann Alway, MS, RN, CNS, CNRN; Margo Halm, PhD, RN, NEA-BC; Alyssa Miller, BSN, RN; Joshua Green, BSN, RN, CCRN, TCRN; Eliza Burkholder, MSN, RN, NEA-BC; Julia Koos, BSN, RN, CCRN, TCRN

Hand-off Rules for Successful Communication

Valorie Hergenreter, BSN, RN, CDE; Betsy Alford, MSN, RN, NE-BC; Andrea Moye, BSN, RN, CMSRN; Ben Burlison, MBA, BSN, RN, CCRN; Megan Schwabauer, BSN, RN; Harriet Martin, BSN, RN; Jessica Thomas, BSN, RN, CMSRN; Ann Alway, MS, RN, CNS CNRN

Increase Nurse Resilience in 15 Minutes with Respite Room

Zoe Rain, RN, BSN, CWON, PCCN

Lights On: Preventing Newborn Falls

Katie Ahlstrom DNP, CNM, RNC-OB; Farah Etzel MD, MS, FAAP; Jennifer Graham BSN, RNC; Katie Hill MS-NE, RNC MNN; Cassandra Mattson BSN, RN; Amy Molan BSN, RNC; Christine Steiner RN, IBCLC; Shelley Weise BSN, RN

Medication Safety Matters

Erin McGinnis, BSN, RN; Matthew Tanner, PharmD, BCPS; Kelly Bodnarchuk, MBA, BSN, RN, CNML, CENP; Peter Ashton, BSN, RN; Ann Alway, MS, RN, CNS, CNRN; Ben Burlison, MBA, BSN, RN, CCRN

MOVE ON OUT: Increasing Mobility so Patients Can Return Home

Gina Umble, RN BSN; Allie Adelman, MSN RN PCCN; Trent Dunlop, MPT

On Par: Adjusting Pass Through Par Levels to Decrease Waste

Allie Adelman MSN, RN, PCCN; Aubrey Applegate BSN, RN; Eleanor Arnette BSN, RN; Sarah Aulerich BSN, RN, CMSRN; Katie Hole BSN, RN, CMSRN; Marcela Mendez-Ruiz, BSN, RN; Holly Stein BSN, RN, PCCN; Gina Umble BSN, RN; Josh Yoder MSN, RN

Positive Psychology Experience Improves Health Care Workers' Happiness

Nancy Dunn, MS, RN; Sara Nash, BSN, RN, CMSRN, NE-BC; Paul Howard, PhD, MLIS; Frieda Ryan Anzur, BSN, RN, OCN, CHPN; Elizabeth Whitney, BA

Reducing Bariatric Surgery Length of Stay (*Podium presentation winner*)

Jordain Mahr, MHA , OTD, OTR/L, CDE; Lisa Nair, BSN, RN, CBN



Podium Presentation Winners: Dr. Catherine Boulay and Jordain Mahr, MHA , OTD, OTR/L, CD

Sound the Alarm! Standardizing the Use of Alarms to Decrease Falls

Ellie Butsch, MSN, RN, PCCN; Marge Willis, DNP, RN, NEA-BC, CCRN-K

Take Care Of Yourself First: Pausing to Don Full PPE

Ann Alway, MS, RN, CNS, CNRN; Kovid Trivedi, MD, FCCP, ATSF

Targeted Daily Communication Reduces Hospital Length of Stay

Amy Brown BSN, RN; Sheila Loomas MSN, RN, NE-BC

Transfer of Trust: Making Patient Handoff Safer and Leaner

Barbra Breyer, RN; Nicolle DeHerrera, RN; Amanda Filipenko, RN; Crystal Hamilton, RN; Mackenzie Linder, RN; Amy Molan, RN; Shannon Ward-Sunderland, RN

We've Got YOU Covered with Stress First Aid

George Escalante, MA, CIT, CISD, CISM; Jessica Thomas, RN, BSN, CMSRN

Salem Health

Caring Beyond the Bedside



In 2010, the “Nurses Give Back” program launched under the approval of Salem Health’s Practice Council, Chief Nursing Officer and Nurses Week Committee. The program was born from attendance at the 2009 American Nurses Credentialing Committee (ANCC) National Magnet® Conference in Kentucky. Nurses unanimously voted to forgo their traditional Nurses Week gift and instead donated those monies along with volunteerism to charitable organizations. This spirit of volunteerism supports the mission, vision and values of Salem Health Hospitals and Clinics to support our community. As a result, Salem Health nurses supported over 30 projects and organizations during the first year with the support of their Specialty Practice Teams (SPTs).

The project evolved over the years and was renamed “Nurses SHINE On” with emphasis placed on volunteerism to charitable organizations in the Salem area. Each year during Nurses Week, the Unit Department Councils, or UDCs (previously SPTs), had the opportunity to volunteer their special talents along with designated monies to provide support to charitable organizations. UDCs, along with interprofessionals, such as Rehab Services, Respiratory Therapy and Clinical Nutrition, started participating in the program, so Practice Council renamed the program to Salem Health Caring Beyond the Bedside in February 2020. They also decided to align the distribution of monies to the National Volunteer Week in April rather than Nurses Week in May.

In FY22, 29 UDCs participated in selecting a charity to support, with 32 UDCs participating in FY23. Many UDCs choose charities near and dear to their hearts, or charities that align with their patient populations, such as HOAP (Homeless Outreach and Advocacy Project) and Marion Polk Food Share. Care Management refers many patients to HOAP post discharge, so they understand the value and importance that the organization has in the community supporting our most vulnerable populations. Nutrition Services UDC sees countless patients experiencing food insecurity and understands how the Marion Polk Food Share program impacts our community's nutrition status and overall wellbeing. In addition to providing funds to their selected charities, some UDCs also volunteered their time and skills or hosted donation drives.

PACU Supports Heart to Soles

Heart to Soles is a local charity that is now in its third year of existence. It focuses on underprivileged youth in the Marion County foster system and provides new shoes during “unboxing” events. At these events, children can shop from hundreds of pair of shoes in all different styles and colors at no cost to their foster parents. This local charity also partners with the Boys & Girls Club, connecting these children to their resources, as well as a mental



health practitioner. Prior to COVID, these events also included free haircuts from local barbers/stylists, free personalization of shoes from local tattoo artists and a day of free fun and games before each school year. When asked how this charity aligned with Salem Health's mission and vision, Kim Mullins, PACU RN and UDC member, said, “Taking care of our community means taking care of our future leaders as well. By providing support, growing confidence and allowing our youth to gain a sense of self, we are shaping the next round of decision makers through kindness.”

Imaging Unit volunteers at Camp Odakoda

For 12 years running, the Imaging Unit council volunteers at Camp Odakoda, a summer camp dedicated to children with Autism or Asperger Syndrome. Many of the children take several medications each day, so the Imaging team helps organize those medications on



the first day so that the camp nurse can focus on caring for the children and talking with families. The unit has also provided Imaging Nurses who volunteer their time during the week as “camp nurse.”

Mother Baby Unit Creates Care Packages for Grieving Mothers

Mother Baby Unit council members partnered with a local charity, Always in My Heart, to create care packages for grieving mothers who have experienced a loss during pregnancy. MBU regularly cares for women post-delivery with histories of loss and grief, so they naturally allied with the charity’s mission “to comfort, connect and support those who have experienced a loss during pregnancy, while remembering each baby lost.”



ICU Comfort Care Quilts

Spearheaded about six years ago by ICU Council Chair Jen Erpelding, many nurses have since participated in the cutting and sewing of over 100 quilts annually for ICU comfort care patients. Every few months a nurse will take the lead and coordinate a date, time, and location. Each quilting event ranges from two to four hours with up to 10 team members attending. Jen said about the experience,

“Providing a high quality, unique quilt for end-of-life situations has shown our families that we go the extra mile to provide an exceptional patient experience regardless the outcome.”



2023 Charities Selected

Acres of Hope Youth Ranch

IRU

The mission of Acres of Hope is to improve the physical, emotional, social, economic and spiritual quality of life for homeless women and their children. We accomplish this by identifying and replacing faulty belief systems that drive destructive behaviors with biblically based truths and the implementation of healthy life skills.

Agape Youth & Family Camps

Cath Lab

The Agape Youth Camp is a local mission field that is open to all with a heart to serve the kids in their community. The Agape Youth Camp is a summer camp for kids ages 7 to 17 who are impacted by a family member's incarceration.

Boys & Girls Club, Dental Program

Peds

To inspire and enable all youth in grades 1 to 12, especially those who need us most, to realize their full potential as productive, responsible and caring citizens through the development of a positive self-image and self-reliance.

Camp Odakoda

Imaging

Camp Quest provides an educational adventure shaped by fun, friends and free thought, featuring science, natural wonder and humanist values. This organization caters to children ages 10 to 15 with Autism.

CASA - Court Appointed Special Advocates

CNA Council

Through our volunteers, CASA of Marion County advocates for abused and neglected

children who need safe and permanent homes. In an underfunded and overburdened child welfare system, judges appoint community members to advocate for individual children and provide them with key insights to make the best possible decisions. These children need advocates-CASA volunteers devoted to following them through the legal and child welfare systems, and ensuring their needs are a top priority. The health and viability of our community is dependent upon the investment in our most vulnerable children.

Center for Hope and Safety

NICU

Since 1973, the agency has offered a safe refuge and support to the victims of domestic violence, sexual assault, stalking and human trafficking. The Center for Hope and Safety work with survivors of any race, color, creed, religious belief, sexual orientation or gender identity.

Comfort Care Quilters

ICU

Our goal is to provide a blanket/quilt to every ICU patient at end of life (comfort care/hospice). This goal is completely volunteer driven. By providing every comfort care patient with this gift we are aligning with Salem Health's mission of an Exceptional Experience Every Time.

Cystic Fibrosis Foundation

RT

The mission of the Cystic Fibrosis Foundation is to cure cystic fibrosis and to provide all people with CF the opportunity to lead long, fulfilling lives by funding research and drug development, partnering with the CF community and advancing high-quality, specialized care.

Dolly Parton Imagination Library: Marion & Polk early Learning Hub, Inc

NP-NICU

To ensure all children have books at home, regardless of the environment in which they live, so they can develop the basic literacy skills needed to be successful in school when entering kindergarten.

Family Building Blocks

PACU

Family Building Blocks is a private, nonprofit organization that works to break the intergenerational cycle of child abuse and neglect by providing services for high-risk families who have children ages 6 weeks to 5 years old. We are the Crisis Relief Nursery serving Marion and Polk Counties.

Father Taaffe Home

Oncology Service Line

Catholic Community Services is a non-profit, faith-based organization serving children, youth, adults and families with special needs in the Mid-Willamette Valley and Central Oregon Coast.

Grant Community School

Rehab Services

All students graduate and are prepared for a successful life.

Habitat for Humanity

A3E-GenSurg

Through volunteer labor and tax-deductible donations of money and materials, Habitat for Humanity of the Mid-Willamette Valley builds and rehabilitates simple, decent houses with the help of the homeowner (partner) families.

Heart to Soles

Ortho

“To provide the underprivileged youth of our community a better chance to grow their confidence and opportunities through a new pair of shoes.” So often in life people are given charity but not given a choice. This is something we at Heart to Soles would like to do

differently. At our unboxing events, the children who attend will not only receive a new pair of shoes, but will have the choice as well. The events feature several brands and styles of new shoes for them to choose from. As we all know, confidence comes from individuality and individuality comes from choice.

H.O.M.E.

ED

HOME's mission is to provide a safe, supportive environment where Salem's at-risk and homeless youth may have their immediate needs met as well as have positive opportunities to reconnect with their community.

Ike Box - Isaac's Room

MedSurg

Isaac's Room helps divested young people build the capacity to rise to the challenges of life. We will do whatever we would do for our own kids in pursuit of this mission. We provide experiences that build character, confidence and skills and a community of people living life with intentionality, intelligence and spirit.

Marion-Polk Food Share

Operating Room

Your gift to Marion-Polk Food Share helps us provide emergency food to more than 35,000 people in Marion and Polk counties this month, including 14,000 children.

Meals on Wheels

Clinical Nutrition

To empower local community programs to improve the health and quality of life of the seniors they serve so that no one is left hungry or isolated.

Recovery Outreach Community Center (ROCC)

PMC

ROCC is a safe place for people recovering from or who are interested in mental health, addiction, trauma or other related issues. Our mission is to empower and respect others through peer led service and peer to peer support. We want to encourage self-direction, personal responsibility and hope by providing a safe place for people to share stories and heal.

Rock Steady Boxing

NTCU

The mission of Rock Steady Boxing is to equip our affiliates and empower the coaches to improve the quality of life for people with Parkinson's disease through a non-contact, boxing-based fitness curriculum.

Salem Angels (Transformations by Salem Angels)

L&D

The Salem Angels' mission is to walk alongside children, youth and families in the foster care community by offering consistent support through intentional giving, relationship building and mentorship.

Salem Free Clinics

Anticoag

Provide quality health care at no cost to the poor, the uninsured and the underinsured children and adults in our community.

Salem Harvest

IPR

Salem Harvest is a non-profit organization that connects farmers and backyard growers with volunteer pickers to harvest fruits and vegetables that would otherwise go to waste. Salem Harvest has as its principal purpose the distribution of food without charge to children or homeless, unemployed, elderly or low-income individuals.

Salem Star Valor Quilters of Oregon

General Medical

The foundation's goal is to use quilts to comfort and help heal service members and veterans touched by war. It has gifted more than 300,000 quilts to date.

Simonka Place (part of UGM)

IMCU

Providing emergency services, such as nourishing meals, warm safe shelter, a hot shower, clean clothing and personal care items are just the first step in sharing Christ's love and providing for those in need.

St Francis Shelter

D5

Our mission is to provide safe, temporary housing for families with children by working in solidarity to recognize their innate worth and dignity.

Union Gospel Mission

CDU

Since 1953, Union Gospel Mission of Salem has been tending to the needs of men, women and children from all walks of life. They are hungry, cold, wet and discouraged. They are the hurting, the lost, the poor and the overwhelmed. They come to the Mission each day seeking meaningful help for urgent, emergency needs. They are welcomed here with hot nourishing meals, safe overnight shelter and, most of all, hope for a new life in Christ.

Willamette Humane Society

CVCU

Willamette Humane Society (WHS) was founded in 1965 and serves Marion and Polk counties, providing compassionate services to pets and people. CVCU

Willamette Vital Health

Oncology

Formerly known as Willamette Valley Hospice, we provide comprehensive hospice care services, supportive care for pain and symptom management for those with serious illness and grief support. Through our mission, Willamette Vital Health supports adults and children living with a serious or life-limiting illness throughout Marion and Polk counties and beyond. Mission statement: We are a community owned, not-for-profit organization providing innovative, personalized and compassionate care to patients and families facing serious illness.

Wounded Warriors

Pre Surg

To honor and empower wounded warriors. Every warrior has a next mission. We know that the transition to civilian life is a journey. And for every warrior, family member and caregiver, that journey looks different.

Always In My Heart

MBU

“To comfort, connect and support those who have experienced a loss during pregnancy, while remembering each baby lost.”

Salem for Refugees

Prep Recovery

Our vision is to see all refugees in Salem as valued, thriving, contributing members of our community.



Celebrations

EXTERNAL AWARDS

American Association of Critical-Care Nurses:

- Beacon Awards for Excellence in Critical Care since 2006
 - Beacon Award for CVCU, 2021
 - Beacon Award for ICU, 2022

Honors in Cancer Treatment

- American College of Surgeons Commission on Cancer accredited cancer program since 1952
- American College of Surgeons National Accreditation Program for Breast Centers, first designed in 2010
- Lung Cancer Alliance Screening Center of Excellence since 2015

Women's and Children's Services

- World Health Organization Baby-Friendly USA designated birth facility since 2017

US News & World Report 2022 to 2023

- Listed as a top hospital in the region

Other honors and awards

- The Joint Commission: Reaccredited 2022
 - Salem Health Spine Center of Excellence, reaccredited 2022
 - Salem Health Joint Replacement Center of Excellence, reaccredited 2022
 - Salem Health, Primary Stroke Center, 2022
- American Nurses Credentialing Center, Magnet®: Salem Hospital reached Magnet® designation in 2010 and re-designated in 2015 and 2020 (Next re-designation is 2025.)
- American College of Radiology's Commission on Breast Imaging: Breast Imaging Center of Excellence since 2011
- American Society for Metabolic and Bariatric Surgery: Bariatric Surgery accredited comprehensive center since 2010, re-accredited in 2013, 2016, 2019, 2023

-
- Oregon Health Authority: Accredited as Level II Trauma Center 1992 to 2012; Level II in 2013, 2016 to 2023
 - Cascade Life Alliance: Hope Award in 2017, 2021 and 2023 for leading in organ donation
 - Advanced Wound Care Center of Distinction Award, Healogics, since 2019
 - Statesman Journal Best of the Mid-Valley 2023 winner in:
 - ▶ Best Hospital/Medical Center
 - ▶ Best Weight Loss Center
 - ▶ Best Maternity and Childbirth Center
 - ▶ Best Employer – 500+ Employees

Lean Excellence Award FY22

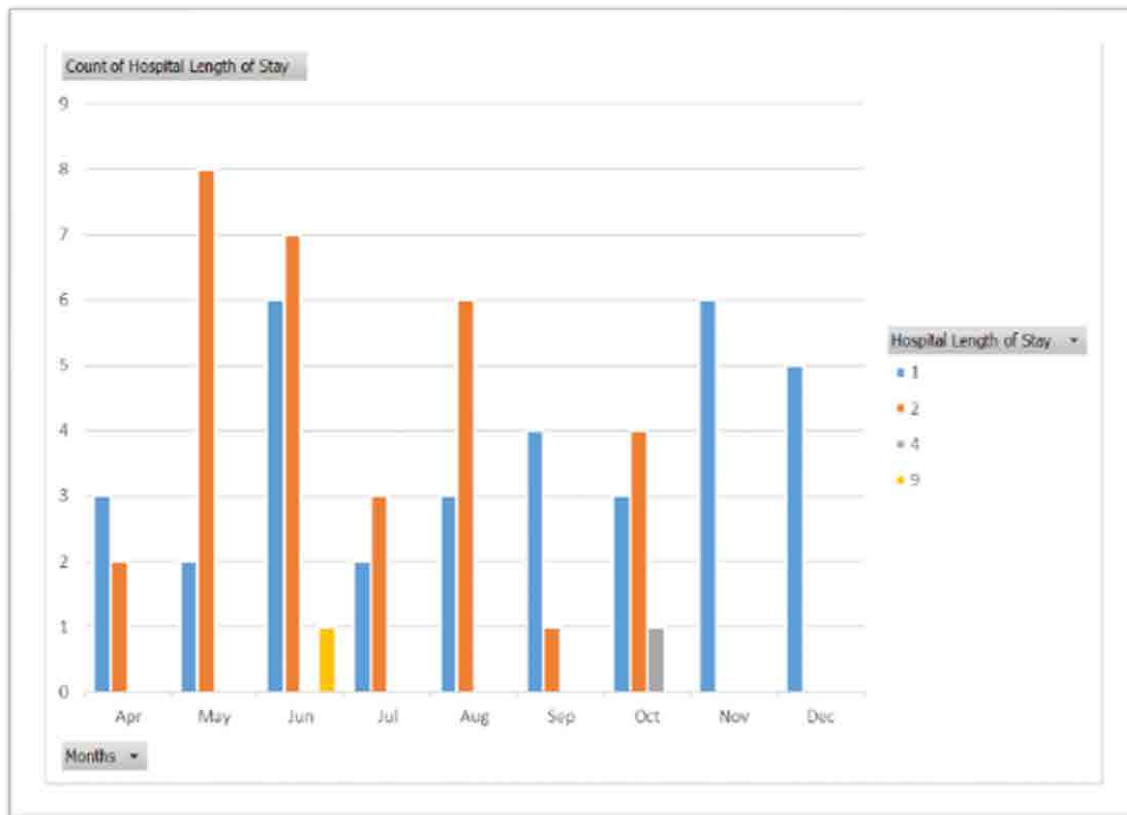
All leaders in the organization submit nominations for the Lean Excellence Award annually in October. A small team from the Kaizen Promotion Office and organizational leaders select top nominations for the Board of Trustees to vote the winner.

The Bariatric Surgery Center team — led by Program Coordinator and Data Abstractor Lisa Nair, RN, BSN, CBN; and Bariatric Surgeons Rajan Nair, MD, MPH; and Catherine Boulay, MD — was selected as the winner of the Lean Excellence Award. They were recognized at a virtual system huddle in May 2022.

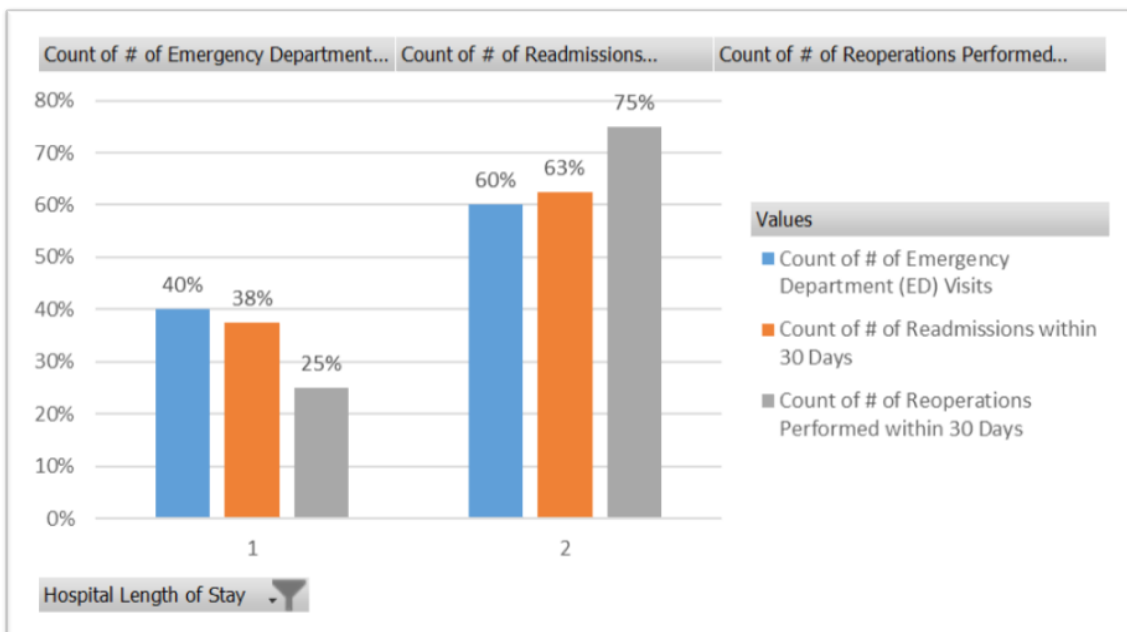
The Bariatric Surgery Center team noticed a gap of 45% in laparoscopic roux-en-y gastric bypass (RYGB) patients' LOS (2.18 days), compared to Medicare averages (1.4 days). The team determined that if Salem Health Hospitals and Clinics used the Sleeve short-stay care pathway and order sets, we could safely discharge some patients home on hospital day one, resulting in a cost savings of \$726 per patient per day.

The team created a new order set for “Short Stay Lap Gastric Bypass/Sleeve,” resulting in 51% of patients discharged on day one, 34 hospital admission days saved and a cost savings of \$68,000.

	TOC Check:	Process metric results:	Outcome metric results:
Check & adjust results	First check — April 2021	3 out of 5 (60%) one surgeon only	3 out of 5 (60%)
	Second check — May 2021	2 out of 10 (20%) one surgeon only	2 out of 10 (20%)
	Third check — June 2021	6 out of 14 (42%) one surgeon only	6 out of 14 (42%)
	Fourth check — July 2021	2 out of 5 (40%)	2 out of 5 (40%)
	Fifth check — Aug 2021	3 out of 9 (33%) one surgeon	3 out of 9 (33%) one surgeon
	Sixth check — Sept. 2021	4 out of 5 (80%) one surgeon	3 out of 5 (80%) one surgeon
	Seventh check — Oct 2021	3 out of 8 (37%)	3 out of 8 (37%)
	Eighth check — Nov 2021	6 out of 6 (100%)	6 out of 6 (100%)
	Ninth check — Dec. 2021	5 out of 5 (100%)	5 out of 5 (100%)
Length of stay trend over time			



The shorter length of stay did not affect the number of Emergency Department visits or readmissions.



Cascade Life Alliance Hope Award 2023

The Cascade Life Alliance Hope Award recognizes the comprehensive work of hospitals that meet or exceed performance standards and demonstrate outstanding efforts to support and achieve optimal donation outcomes.

In 2022, Salem Health exceeded the benchmark for donor conversion rate, had a 32% increase in organs transplanted compared to the year prior, and had the greatest number of organ donors transferred to our Donor Recovery Center of all hospitals in our service area. Salem Health also continues to display unwavering commitment to donation with an active donation committee.

The efforts of hospital staff in the Cascade Life Alliance donation service area led to 628 life-saving transplants in 2022 and gave hope to thousands of others waiting. We are so grateful for dedicated hospital staff who recognize that, in the midst of tragedy, there remains hope — not only for someone in need of a transplant, but also for the donor family in the legacy left by their loved one.

The teardrop shape of this award is meant to symbolize the tears of love and loss, of life renewed and shared gratitude for our efforts during this final act of kindness.



Service Excellence Award Recipients 2022–2023



The Star Award Program was created in 2009 to provide Salem Health Hospitals and Clinics staff an opportunity to recognize their peers: Employees, medical staff and volunteers. It is a way to share the amazing stories of how we live our vision: Excellent Experience Every Time.

Award categories include Role Model for Excellence, Leader in Practice and Teaching of Excellence, Team Award, Stop-the-Line, Excellence Above and Beyond and the Hero award. Those nominated for Excellence Above and Beyond and Hero awards are also considered for the Service Excellence Award, presented at an annual awards banquet. Previous winners become part of the selection committee for two consecutive years to uphold the integrity for the award.

2022 Service Excellence Award Recipients (virtual event)

1. Ann Alway, MS – Advanced Practice Nursing
2. Eric Anderson – Operating Room
3. Kim Baglien, CCC-SLP – Acute Rehab Services
4. Ellie Bonanno, DPT – Acute Rehab Services
5. Corey Brown – Acute Rehab Services
6. Evan Bumgarner, RN – PACU
7. David Carter – Lift Team
8. Thomas Christ, CCC-SLP – Acute Rehab Services
9. Trent Dunlop, MPT – Acute Rehab Services
10. Sarah Dyckman, PA-C – Medical Staff
11. Sarah Eperjesi – IP Rehab Therapies

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12. Yasaman Eslaamizaad, MD – Medical Staff
 13. Larry Gerig – Operating Room
 14. Milinda Hochspeier, CNA – IMCU
 15. Seunghyo Hong, MSN – Nursing Administration
 16. Devin Koontz, RN – Emergency Department
 17. McKenzie Lovell – WVH Administration
 18. Michelle McGee, BSN – Bariatric Services
 19. Denise Michaelian, CNA – General Surgery
 20. Julie Mullins – WVH Rehabilitation Services
 21. Kim Mullins, BSN – PACU
 22. Heather Rideout, BSN – CVCU
 23. Colleen Rollandi, BSN – CVCU
 24. Marnie Rosasco – IS Ambulatory & Community Connect
 25. Kurt Scherting – IS Business Intelligence
 26. Ruth Sheridan – Marketing & Communications
 27. Gary Sims, Sr., MTheol – Spiritual Care
 28. Larissa Smith, MBA – Palliative Care
 29. Geneva Stoyles – Cardiac Non-Invasive Services
 30. Mohammed Tauqir, MD – Medical Staff
 31. Deborah Timmons, LPTA – IP Rehab Therapies

2022 Board of Trustees Hero Award



Chandra Aylon Pearsall, BSN, RN
Women's and Children's Services Float Pool

2023 Service Excellence Award Recipients



1. Sarah Aulerich, BS-N, BS – Inpatient D5 Unit
2. Samuel Badgley, BS – IS Network Communications
3. Nancy Bee, RN, MBA-HCM – Nursing Administration
4. Jim Bouse, CBET – Clinical Engineering
5. Tina Breden, CMA – SHMG Support Services & Clinical Practice

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6. Sandra Bunn, MSN, CNS-PP – Advanced Practice Nursing
 7. DeAnna Carroll, BSN, CMSRN – Medical Telemetry Unit D5
 8. Matthew Cortez – Laboratory Services
 9. Cody Crockett, BSN – Cardiovascular Care Unit
 10. Annie Derochowski, BSN, RN – Float Pool
 11. Rick Dezsofi – Psychiatric Patient Services
 12. Sarah Horn, MBA, BSN – Nursing Administration
 13. Lisa Lewis, RN, CCRN – Intensive Care Unit
 14. Aries L. Manoff – IS Solution Center
 15. Rhoda Morrison, RN – Cardiovascular Care Unit
 16. Michelle Mott, RN – WVH Medical Services
 17. Lisa Nair, RN, BSN – Bariatric Services
 18. Brandy Neadow – Musculoskeletal Therapies
 19. Rita Ost – Nutrition Services
 20. Carmen Peterson, CNA – Intensive Care Unit
 21. Natalie B. Reed, PT – Acute Rehab Services
 22. Tia Rodriguez, BSN, CPAN – WVH Surgical Services
 23. Yelena Seroshtan – Medical Staff Professional Services
 24. Sergiu Todor, PharmD – WVH Pharmacy
 25. Carlos Velasco, CCHI, CMI – Language Services
 26. Anne Weinberg, BSN, CRRN – Inpatient B4N Unit
 27. Jackie Williams, RT – Respiratory Care
 28. Marge Willis, DNP, RN – Nursing Administration
 29. Amy Winters, CPPM, CPC – SHMG Uglow Clinic
 30. Sarah Wolf, FNP – Medical Staff

2023 Board of Trustees Hero Award



Tinashe Besa, RT(R)(T), Radiation Oncology



March of Dimes provided frontline care to many in our community during the COVID-19 pandemic and continues to provide much needed support. During the past year, March of Dimes has funded research grants totaling nearly \$16.7M, invested \$5.56M in maternal and child health community grants and reached out to offer support to more than 80,000 families with a newborn in the NICU through NICU Family Support.

March of Dimes believes every baby deserves the best possible start. They fight for the health of every mom, baby and family, imagining a world where every mom and baby is healthy regardless of wealth, race, gender or geography. Their work isn't possible without remarkable support. The March of Dimes Heroes in Action Awards recognize exceptional health care providers and is their way to thank and honor these individuals for their selflessness, dedication and passion for their profession. The 2022 Hero in Action Awards event committee was chaired by Salem Health Director of Women's and Children's Services, Lisa Ketchum. In the 15 categories, 77 finalists were nominated from the Oregon and southern Washington region. Nine Salem Health finalists were in seven categories. Kacy Bradshaw won the award in Advance Practice (four finalists) and Nancy Dunn won the award in Nursing Leadership (21 finalists). The other finalists included Nancy Bee, Josh Frank, Albertine Barley, Tracy Shepard, Andrea Bell, Bethanie Quiel and Nichole Nelson. Nancy Dunn was also acknowledged as the top fund raiser, raising over \$2,000 of the grand total of \$9,124 raised by the finalists. The event and fundraiser occurred Friday, Oct. 7, 2022, at the Sentinel Hotel in Portland, where many outstanding nurses and care team finalists from fifteen categories were recognized, including one prominent Nurse of the Year. Finalists and attendees represent a variety of health care organizations from the region and a diverse range of nurses and their colleagues, from the newly graduated to nurse executives.

2022 March of Dimes Heroes in Action Awards Salem Health nominees

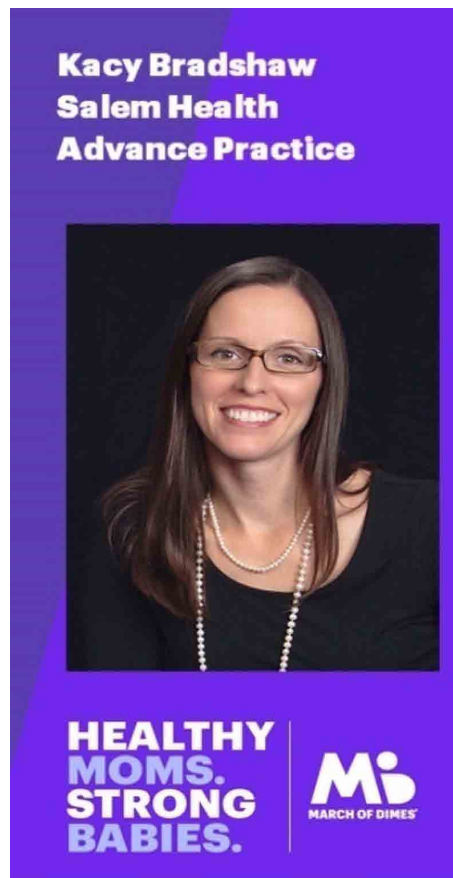
Finalist	Nomination category		Unit
Nancy Bee	Nursing Leadership		Nursing Administration
Andrea Bell	Nursing Leadership		Pediatrics, NICU, Women's and Children's Float Pool
Nancy Dunn	Nursing Leadership	Winner!	Nursing Administration
Kacy Bradshaw	Advance Practice	Winner!	NICU
Josh Franke	Health Equity Leadership Award		Chief Project Officer
Albertine Barley	Medical/Surgical		General Medical
Tracy Shepard	Nurse Educator/Research/ Nursing Informatics		Infection Prevention
Bethanie Quiel	Outpatient/Ambulatory		Cardiology
Nichole Nelson	Pediatrics		NICU
Jennifer Saechao	Clinical Nurse		NTCU



2022 March of Dimes Heroes in Action Winners



*Nancy Dunn, Nursing Administration
2022 March of Dimes Heroes in Action Winner: Nursing Leadership*



The DAISY Awards

The DAISY Foundation was established by the family of J. Patrick Barnes after he died from complications of an auto-immune disease in 1999. During his hospitalization, they deeply appreciated the care and compassion shown to Patrick and his entire family. After his passing, they felt compelled to say “thank you” to nurses for their work, commitment and dedication and for going above and beyond, so the Barnes Family established the DAISY Foundation.



More than 1.8 million times, a patient, family member or co-worker has taken the time to write a DAISY nomination! Over 5,400 health care facilities and nursing schools in all 50 states and 33 countries participate in this award program. To date, there are more than 144,000 DAISY honorees. Being a DAISY Honoree is a highly coveted recognition!

We started the DAISY Award at Salem Hospital in 2011. Since then, we have honored a registered nurse nearly every month (dependent on nominations received). To date, over 100 nurses have received this prestigious award. The winner is selected from all the nurses who are nominated each month through blind review by the Professional Growth and Development Council. To be considered for the award, a nurse must demonstrate attributes in each of four areas: Clinical skills, compassionate care, exemplary practice and continued commitment to excellence.

Each award winner receives:

- Catered lunch and a beautiful DAISY cake for the winner’s guests (family and friends) and teammates at a surprise award ceremony in their honor.
- Bouquet of daisies from our wonderful floral partners at Green Thumb Florist.
- Certificate: The winner is presented with a certificate in a custom DAISY certificate holder, signed by the Chief Nursing Officer.
- DAISY Tote Bag: Every winner is given a DAISY tote bag containing a DAISY Award pin, a DAISY badge pull, a stone sculpture and information on the DAISY Foundation.
- “Healer’s Touch” Sculpture: Each one is individually hand-carved from stone (and numbered) by an African tribe in Zimbabwe. No two are exactly alike.
- The winner’s name is engraved on a gold plate and affixed to the DAISY awardees display board located outside of Nursing Administration in Building B on the 2nd floor.
- A copy of the story and a picture of this month’s winner gets sent to the DAISY Foundation for posting on their national website.

FY22–23 Daisy Awardees: July 2021 to June 2023

2021



Sarah Siebert, CVCU, November 2021



Jinhee Jeong, OP Infusion, February 2022

2022



Kristen Emerson, L&D, January 2022



Michelle Mott, WVH Medical, March 2022



Alex Gaskey, CVCU, April 2022



Rebecca Hansis, Med-Surg, May 2022



Katie Stofleth, CVCU, September 2022



Stacey VanDyke, Nursing Resources, June 2022



Lisa Sue Lewis, ICU, October 2022



Fraya O'Keefe, L&D, July 2022



Danielle Ottinger, Med Tele, November/December 2022

2023



Dawn Shea, Gen Med, January 2023



Elisa Lucas, CVCU, June 2023



Mikaela Collier, Gen Med, May 2023

Trillium Awards, Certified Nursing Assistants

The Trillium Award was developed by the CNA Specialty Practice Team (now Unit/Department Council) in 2012 to recognize certified nursing assistants who provide exceptional care for their patients and their families, beyond usual nursing routines. CNAs are key players in the lives of our patients, from the relationships built with patients, family members and co-workers to the communication with the many care team members.



The Trillium Award for CNAs was modeled after the DAISY award for registered nurses. The DAISY Award was brought to Salem Hospital in 2011 to honor extraordinary nurses who go above and beyond. The Trillium Award was formed in 2012 (a year later) to honor and recognize CNAs.

What is a Trillium?

The delicate trillium is a wildflower native to North America, once used for medicinal purpose throughout the ages. It is now a protected flower in many states, including Oregon. The ground-covering flower has three petals and thrives best in damp, shaded woodlands. It is among the first flowers to bloom in the spring. Each petal symbolizes the three letters in CNA and SPT.

The Trillium Award is presented quarterly to a Certified Nursing Assistant who demonstrates attributes in each of three areas: Compassionate care, exemplary practice and commitment to excellence. After review of all the nominations submitted, the winner is selected through blind peer review by the CNA House-wide Council. An award presentation is organized but kept a secret from the winner. The person who nominated the awardee and unit staff are all invited to attend.



Each quarterly winner is honored with a surprise celebration that includes:

- A keepsake certificate, signed and presented by the chief nursing officer, with a lapel pin.
- A custom decorated “trillium” cake and a floral bouquet.
- A catered lunch for the awardee, special guests (friends, family, nominator) and unit peers.
- The winner’s name goes on the Trillium plaque outside of Nursing Administration in Building B on the 2nd floor.
- The awardee’s picture is posted on the Salem Health website with a copy of their nomination.

FY22 Winners



Elizabeth Morales, Med-Surg Oncology
Summer 2021 Winner



Marisela Pantoja, CVCU
Fall 2021 Winner



Brett Honyak, IMCU
Spring 2022 Winner



Elizabeth "Liz" Gonzales, Gen Med
Winter 2022/2023 Winner



Jamie Perry, ICU
Sumer 2022 Winner



Nyah Schnepf, CNA
Spring 2023 Winner



Salem Health presents the PHIL Award annually to recognize a deserving Respiratory Therapist based on professional excellence and compassion in the care and education of patients with pulmonary diseases.

The PHIL Award was created in 2006 in memory of Philip Lamka, who passed away due to complications from interstitial lung disease. His family wanted to establish a way of acknowledging the valuable role the respiratory therapists play in the lives of patients with life-threatening pulmonary illnesses.

Respiratory Therapists can be nominated by patients, their families, visitors and other caregivers, including fellow employees.



Kris McKee
Phil Award Winner 2022



Jackie Williams
Phil Award Winner 2023

Mended Hearts Award

Andy Walker, MSN, RN, nurse navigator, Cardiovascular Service Line, awarded Mended Hearts, Western Region Nurse of the Year, 2021 (SH FY22)

Prior to the COVID-19 pandemic, volunteers from the local Mended Hearts, a cardiac patient support group that typically holds monthly group meetings on the SH campus, visited inpatient floors and the Cardiac Rehab Center to meet with and support patients. When visitor restrictions were put in place during the pandemic, the volunteer visits and the in-person support group sessions were placed on hold. During this hiatus, Andy continued to support this patient population by offering support through virtual meetings and educational sessions.



As a result of Andy's meetings and educational sessions, cardiac patients had access to an equivalent level of care and personal connection compared to pre-pandemic services. Patients received information on topics related to living a heart-healthy lifestyle and were encouraged to visit a primary care provider if symptoms or concerns were raised during Andy's virtual or phone visits. When possible, Andy continued to connect patients to the Mended Hearts program for continued support and education throughout their transition of care.



In April 2021, Chapter 389's president of the Mended Hearts Program nominated Andy for its Nurse of the Year Award. Andy was honored with the award for Western Region Nurse of the Year at the Mended Hearts committee meeting in September 2021. Additionally, Salem Hospital was awarded Western Region Hospital of the Year!

Preceptor of the Year Award 2023

In 2023, Clinical Education began a new Preceptor of the Year award to formally recognize the outstanding individuals that play an imperative role in the organization. There are currently over 1,100 designated preceptors throughout Salem Health who all take additional responsibility on top of their usual work assignments to orient, guide and mentor new staff members during their onboarding period. The importance of the preceptors cannot be understated, as they have a major impact on employees' experiences and successes when orienting to new roles or areas of work and can often make the difference between keeping talented employees or losing them.

For 2023, there were 15 preceptors nominated by their peers:

- Amy Rau – Float Pool
- Drew Morrison – SHED
- Emma Stevens Whitmire – A5 East
- Erynn Friend – A5 East
- Felicia Rosenberg – PMC
- Marnasha Fowlkes-Cetz – CVCU
- Maylinda Suson – PMC
- Mikaela Greenwade – A6 East
- Mychaela Treichler – SHED
- **Jennifer Ditter – SHED**
- Nick Oleskiewicz – Care Management
- Sarah Acosta – SHED
- Sarah Anderson – Operating Room
- Shelley Reynolds – ECU
- Sunshine Watson – A7 East



Jennifer Ditter, MSN, RN

First Preceptor of the Year Awardee, 2023

