



FY
25

Remaining essential

Salem Hospital

Clinical Excellence Report



Key to Magnet Domains

The content in this report has been organized by the four ANCC Magnet Recognition Program® Domains to show how the excellent work we regularly do at Salem Hospital supports our Magnet designation. *We are a Magnet hospital because of what we do every day!*

Transformational Leadership (TL)

Practices, characteristics and structures that inspire and enable growth, innovation, initiative and change in others.



Structural Empowerment (SE)

Interprofessional shared decision making, influential nurses, lifelong professional development and strong community partnerships.



Exemplary Professional Practice (EP)

Effective and efficient care services, interprofessional collaboration and high-quality patient outcomes.



New Knowledge, Innovations and Improvements (NK)

Staff integrate evidence-based research into clinical and operational processes.



Salem Hospital Clinical Excellence Report

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On the cover, members of Salem Hospital Professional Governance 2025.

Salem Hospital is Interprofessional and Nursing Excellence

SHINE

Professional Practice Model



• **EMPOWERMENT** •

(ownership, partnership, equity and accountability)

CNO's message to nurses

TL

As we reflect on FY25, one truth remains powerfully clear — our people are, and will always be, essential. In a year shaped by continued change, innovation, and opportunity, every member of our health care team has stood firm, adapting with resilience and rising to meet the evolving demands of health care. I am incredibly proud of our entire workforce — nurses, providers, clinical specialists, educators, leaders, and every member of our healthcare team — whose dedication continues to shape safer, stronger and more compassionate care environments.

This past year, we've navigated persistent workforce challenges while doubling down on strategies to recruit, support, and retain extraordinary talent. Despite national staffing shortages and changes in health care policy, our commitment to creating a supportive and engaged work environment has never wavered. We've expanded flexible work options, prioritized mental health and well-being, and invested in programs that empower every team member to thrive, such as new professionalism standards, innovative care delivery systems, and the integration of virtual nursing.

Technology is transforming healthcare at a rapid pace — and our teams are leading the charge. From integrating virtual nursing to drive positive patient outcomes, implementing care progression huddles and early mobility programs that decrease length of stay and reduce hospital-acquired conditions, our staff have demonstrated agility and a growth mindset. The future of health care is deeply connected to innovation, and our team is embracing these advances while maintaining human connection and compassionate care at the heart of all we do.

We've also seen a continued expansion of roles and specialization across disciplines. More team members than ever before are pursuing advanced education and certification — contributing to research, influencing policy and strengthening interdisciplinary collaboration. Our people are increasingly at the table, shaping decisions that impact patients, families, and the entire health care landscape. This is evident through our robust Professional Governance model, the publication of our Happiness Advantage research in the *Journal of Nursing Administration*, APRNs being granted medical staff membership, and our frontline staff's advocacy for penalty enhancements for violence against health care workers — culminating in the signing of Senate Bill 170 by Governor Kotek.

This year, we renewed our focus on community health and preventive care — areas where our teams remain indispensable. Through initiatives like health education, screenings, and outreach efforts, our staff are helping to build healthier communities while empowering individuals to take an active role in their well-being.

Equally important is our continued attention to team well-being. In FY25, we expanded mental health resources, strengthened peer support programs, added more Staff Engagement Resiliency Advocate (SERA) support, and embedded resiliency and well-being into our organizational priorities through our Promoting Professionalism strategic initiative. We know that when our people are supported, our patients and communities thrive.

Looking ahead, our health care profession is poised for continued transformation. As we embrace new care models, emerging technologies, and evolving challenges, our foundation remains the same — a deep and enduring commitment to patient-centered care.

To every member of our team — clinical and non-clinical — who has brought compassion, innovation and strength to their work this year: thank you. You are essential and extraordinary. Together, we will continue to lead boldly, care deeply, and shape the future of health care.

With sincere gratitude,
Sarah Horn, MBA, BSN, RN, NE-BC, RNC-LRN
Senior Vice President, Chief Nursing & Clinical Operations Officer



Sarah Horn, MBA, BSN, RN, NE-BC, RNC-LRN
Senior Vice President,
Chief Nursing & Clinical Operations Officer

Message from Magnet Program Director: Our journey to Salem Hospital's fourth Magnet designation

TL

What an incredible year it has been as we advanced along our journey toward a fourth Magnet designation. We began FY25 by successfully submitting 103 Sources of Evidence to the American Nurses Credentialing Center (ANCC). This significant milestone reflects our shared dedication to nursing excellence, patient-centered care, and continuous improvement. With the unwavering support and leadership of Sarah Horn, MBA, BSN, RN, NE-BC, RNC-LRN, Chief Nursing Officer, along with the Clinical Excellence Team, our exceptional coaches, and committed authors, we proudly highlighted the outstanding contributions of nurses and interprofessional partners throughout our organization.



Kelly Bodnarchuk, MBA, BSN, CENP
Magnet Program Director
Salem Hospital



To commemorate this important milestone, we hosted a **Magnet Document Submission Celebration** on Aug. 27, 2024, in the hospital courtyard. The event featured caricature artists, a photo booth, local food vendors, and a live DJ, creating a festive atmosphere for all. During the celebration, we proudly recognized the contributions of more than 368 employees, including 22 coaches and 46 writers, whose dedication made this achievement possible.



While awaiting feedback from ANCC, we turned our attention to preparing for the Magnet site visit by activating and engaging our dedicated Magnet Champions, led by Megan Schwabauer, BSN, RN, RN-BC, and Brianna Revard, MBA, BS, Clinical Practice System Supervisor. To support this effort, two consultants from the American Nurses Association conducted a comprehensive three-day mock site visit in March 2025.

More than 60 Champions representing all clinical areas contributed to this effort — creating Magnet bulletin boards, sharing powerful “My Magnet Story” features in the Daily Dose, and participating in peer-to-peer unit rounding. These Champions continue to educate and inspire their teams, reinforcing the impact and importance of nursing excellence and the value of being a Magnet-recognized organization.



Following a few document edits, we heard the news that we met the ANCC threshold to move to the ANCC site visit! The purpose of the site visit is to verify, amplify, and clarify the content submitted in our Magnet application and gives us a valuable opportunity to demonstrate how the five Magnet model components are truly embedded in our organization's culture.

On July 22, 2025, we received the notification call from the Commission on Magnet and hosted a watch party to hear the results which were later shared on Daily Dose, social media and a press release. Salem Hospital & Clinics officially achieved its fourth Magnet® Designation by the American Nursing Credentialing Center (ANCC) — the highest and most prestigious recognition a health care organization can receive for nursing excellence and quality patient care. Even more extraordinary, we earned 8 exemplars, highlighting areas where we exceeded expectations and set the standard for excellence.



From May 13 to 15, 2025, we completed an extraordinary ANCC Magnet site visit that highlighted the dedication and excellence of our nursing team. Over three impactful days, the appraisers conducted 30 interprofessional sessions with 208 participants, including 17 community members; toured 31 departments, engaging with 99 front-line nurses; and interviewed 159 staff nurses during meal sessions.

Presentations on wellbeing, cardiogenic shock, and length-of-stay initiatives were described as “extremely sophisticated and impressive.” The appraisers’ feedback was overwhelmingly positive.



In August 2025, we held a hospital-wide celebration for achieving the fourth Magnet designation, as this was something truly worth celebrating. To put this into perspective, only 10% of U.S. hospitals — just 624 in total—have achieved Magnet® designation. Of those, a mere 2% have reached this milestone four times. With this accomplishment, we now stand proudly among the elite — the best of the best.

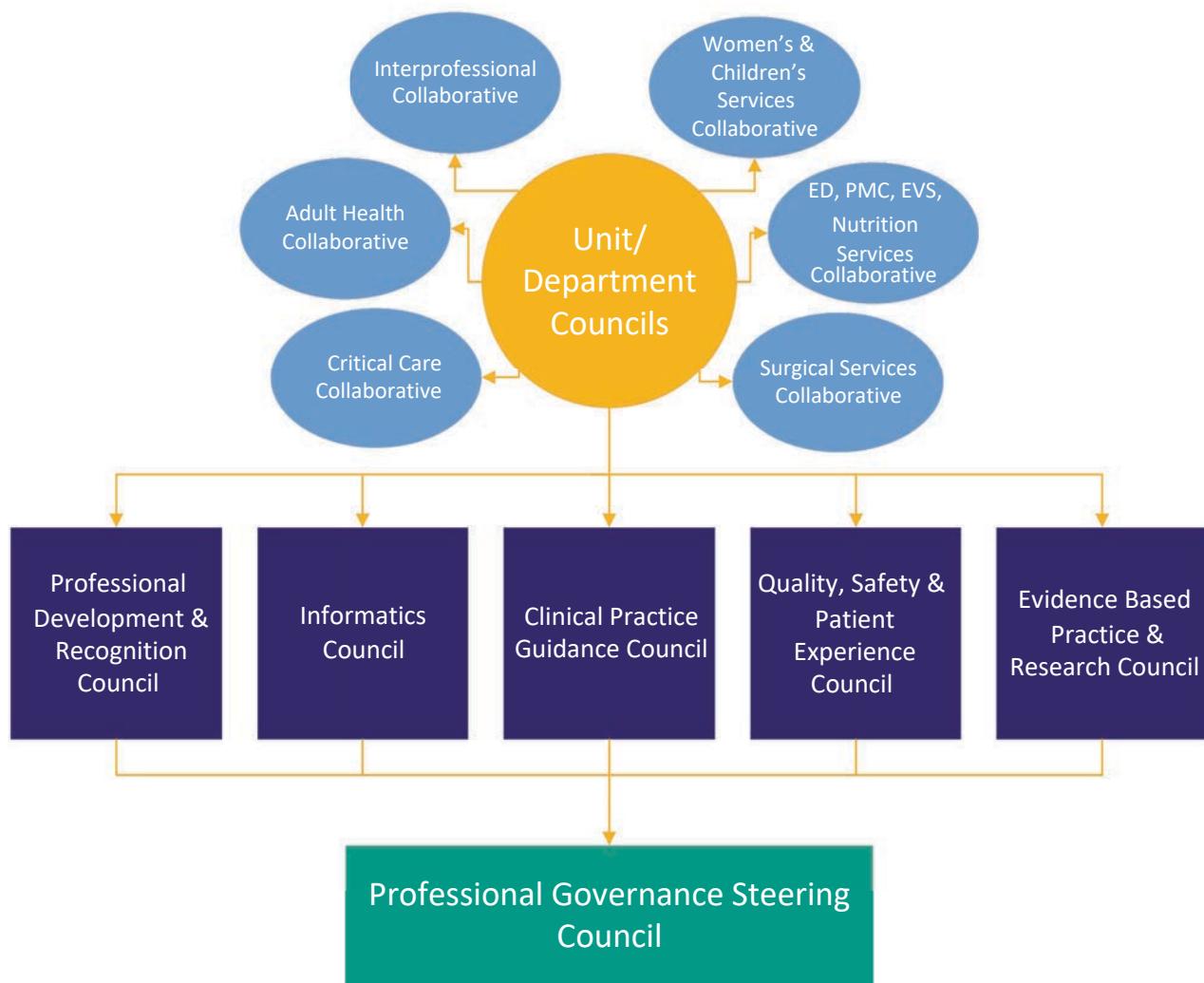


This marks the beginning of our next chapter — the road to our fifth designation. Let's keep doing what we do best — high-fives all around.



Professional Governance structure

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, work experience and patient care.



Professional Governance system council reports



The following section highlights the work and achievements of what are known as system councils within Salem Health. 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 and roles, as well as our allied health care partners from interprofessional specialties. All of the Magnet Domains are represented in the work of these councils.

- **Clinical Practice Guidance Council (CPGC)**
- **Evidence Based Practice & Research Council (EBP&R)**
- **Informatics Council**
- **Professional Development & Recognition Council (PD&R)**
- **Quality, Safety & Patient Experience (QSPE)**

Clinical Practice Guidance Council

After newly forming in FY24, the Clinical Practice Guidance Council is finding its stride in FY25. The council has made significant contributions to clinical practice and processes through their review and focused work on multiple topics. The following highlights key work from the council and its Retroactive and Proactive sub-groups.

Chairs:
Miranda Hennan, BSN, RN, CEN, PCCN
Maddie Pelley, BSN, RN, CCRN



The main FY25 goal for the retroactive subgroup was to provide education on the tools and resources available to staff related to respiratory care and monitoring. Through this, it was discovered that units outside of ICU only have SpO₂ probes that are approved for placement on fingers, not other alternate locations like toes, ears and foreheads that are commonly used when accurate readings cannot be obtained on the fingers. A 4SPS was initiated to evaluate how accurate SpO₂ measurements can occur 100% of the time. This was accompanied by a literature review related to best practices in SpO₂ monitoring and a review of Salem Health's current policies. Work then began on an algorithm that guides staff through steps for improving poor SpO₂ signals. This work led to the creation of algorithm "Oxygen Probe Decision Tree" which was placed in the Vital Sign Flowsheet sidebar in Epic after review by Joint Managers meeting and the Adult Health/Critical Care Collab.

The proactive subgroup reviewed a total of 14 submissions to the proactive project submission form (PPSF), which is how anyone in Salem Health can submit recognized or potential systems gap to CPGC for review, guidance, support and collaboration. Some highlights include:

- Oral intake documentation: Submission from inpatient dieticians reflected a gap in consistent and accurate documentation of oral intake meal percentage. CPGC facilitated collaboration with CNA house-wide council, Clinical Education, and Clinical Leadership Group to ultimately see an updated Epic tool, HealthStream Module, and Daily Dose article come to fruition.
- Illicit Fentanyl Exposure: Submission identified a potential gap in operational process for hospital clinical staff dealing with instances of patient or guest illicit fentanyl or methamphetamine use on the premises and uncertainty around environmental exposure risk. Council review led to identifying stakeholders, obtaining input, reaching out to industry experts and developing a policy draft. Ultimately, environmental exposure risk was significantly lower than initially thought.
- Patient Care Attendant (PCA) awareness of approved tasks: Submission highlighted a recurring issue of PCAs and especially nursing staff not fully understanding PCA approved tasks or knowing of resources. Resulted in large project spanning multiple months including interventions to raise awareness of approved tasks and reference document (flier, huddle topic), Gemba rounding to measure impact of interventions, check and adjust to create education module, interview with PCA to be daily dose article for PCA awareness, etc.

Evidence Based Practice & Research Council

The EBP&R Council provides a forum to educate and mentor all members of the Salem Health team to appraise evidence for use in practice. EBP&R members support our team to generate new knowledge using clinical research, to guide our practice and positively influence the health outcomes for our communities. The EBP&R 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.

Projects & Accomplishments FY25

- Research Education Series
 - Recorded a five-class research education series now located in HealthStream with Nurse Scientist Consultant Margo Halm, PhD, RN, NEA-BC . Each session included didactic and experiential learning for students as they navigated the research process.
 - The series was associated with a small, but significant increase in research knowledge among interprofessional staff based on pre- and post-series self-assessments.
- Practice Surveillance Day
 - Seeking best practices and practice guideline changes in various areas of health care. Searched online for updates and validated accuracy of our list for future surveillance days.
- Invited and supported multiple ongoing and completed projects from staff.
- Bedside safety checks – Jennifer Beitel .
- Dietitian enteral feeding tube project – Dani Knight.
- Completed projects shared insights and pearls of wisdom (Lily Schott, Ellie Butsch & Eliza Burkholder, Caitlyn Wells).
- Created a Request Form: Council members identified protected time as a barrier for completing tasks outside of PG Day. We created a form for council members to ask for additional paid time and leadership support for council tasks and projects.
- Revised the Clinical Inquiry Challenge: Reformatted to be administered at the unit level to support the annual UDC evidence-based practice projects. Goal for PICO(t) submissions to help discover potential EBP projects, while still encouraging a spirit of inquiry and practicing PICO skill building. EBP Council supporting UDC chairs by providing education and mentoring at monthly meetings.
- Flowchart for Problem Submissions: created a visual guide for vetting clinical inquiry questions through the professional governance system
- Onboarding: Closed a gap in our annual Council Health Assessment results by developing standardized council onboarding with a new brochure.

FY 25 Council Co-Chairs:

- Kim Vachter, BSN, RN, CCRN (Clinical Nurse, B4N)
- KyLee Bowers, MSN, RN, CCRN (Clinical Practice Specialist, Critical Care)

FY25 Council Guidance Team

- Kelly Bodnarchuk, MBA, BSN, RN, CNML, CENP, Director Clinical Practice Support, Magnet & Pathways
- Nancy Dunn, MS, RN, Clinical Practice Advisory
- Brianna Revard, MBA, Clinical Practice System Supervisor, Clinical Excellence
- Margo Halm, PhD, RN, NEA-BC, Nurse Scientist



Informatics Council

The Informatics Council (IC) is an interprofessional team that evaluates and approves changes in electronic documentation, workflow tools, and processes to optimize, standardize and maintain electronic documentation tools while supporting Epic Foundation functionality. IC is also a consultation and collaboration venue for other technologies and workflow changes.

Chair: Lacey Geigle, BSN, RN
Co-Chair: Sarah Aulerich, BS, BS-N, RN, CMSRN



Key Work FY2025

- Nursing documentation reduction program
 - Using staff-lead suggestions, we implemented seven enhancements to reduce documentation and improve workflows, along with encouraging council members to round with staff to help educate the benefits of flowsheet macros.
- 42 Epic enhancements assessed by Informatics Council
 - As per our Charter, Informatics Council reviews clinician-submitted enhancement requests that would affect all the hospital units. Over the fiscal year, 42 of these submissions were assessed by Informatics Council and 38 were implemented during the fiscal year.
- Support of length-of-stay work, including:
 - Release Orders OPA: To decrease discharge delays, an OPA was created to promptly start patient care upon transfer from ED or OR/PACU to an inpatient unit.
 - PET Scan Order for Inpatient: To decrease length of stay an Inpatient specific PET scan order was implemented, that included appropriate process instructions and was built to notify pharmacy and RD's in an appropriate timeline.



Professional Development & Recognition Council

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

FY25 council co-chairs

- Chair: Tifani Erpelding, MSW, LCSW—
Care Management
- Mallery Gould, BSN, RN, CMSRN — A6E
Assistant Nurse Manager

Certification Study Courses held in FY25

- CNOR — October 2024
- CPAN/CPAP — January 2025
- CMSRN — February 2025
- PCCN/CCRN — May 2025

Key work FY2025

- Over 385 staff utilized digital study resources through our contract with Springer Publishing's ExamPrepConnect platform.
- Continued evaluation of preceptor engagement for students presence across units; collaborating with Clinical Education on Preceptor University initiatives.
- Hosted a Certification Day information table and celebrated during the March Professional Governance Day event.
- Developed "Daily Dose" posts recognizing health care appreciation days/weeks/months, along with signed recognition cards from PD&R delivered to units.
- Enhanced visibility of the DAISY Program through elevator signage in patient-facing areas, nurse manager business cards and patient room signs.
- Increased DAISY nominations from 49 in FY24 to 144 in FY25.
- Selected the PHIL award winner from 11 nominations for this annual respiratory therapy award.



Quality, Safety & Patient Experience (QSPE)

QSPE works towards ensuring that patient care and patient experience at Salem Health meets all regulatory criteria and professional organization guidelines. The council does this through monitoring quality indicators for inpatient, outpatient and interprofessional services, making recommendations on practice and process improvements as indicated, and assists in preparation for regulatory surveys. The council also focuses on the support of patient education, as it relates to patient experience, including the education materials used and the role of interprofessionals in patient teaching.



FY25 Council Co-Chairs

- Megan Schwabauer, ANM, DRU
- Amy Brown, CVCU Clinical Nurse

2025 Project Highlights:

- Purple Hands Pledge Event
 - In partnership with the Clinical Excellence Team and the Harmful Words & Actions Subcommittee, we hosted the Purple Hands Pledge this fall. This wonderful event brought together community leaders, including the Chief of Police and Mayor, with our frontline staff and executive team to take the pledge: “I will not use my hands or words for hurting myself or others.”
- Emergency Operations Plan (EOP) Updates
 - We collaborated with the Emergency Preparedness Department to update critical information in our EOP books, including department locations and contact information for those areas and others that may be needed, ensuring accuracy and readiness across the organization. We also suggested additions to the book and removed outdated areas or information.
- Patient Experience Score Review
 - Working alongside our Patient Experience partners we analyzed organizational trends in patient experience scores. These insights helped our council gain better understanding of what Patient Experience is, how it is analyzed and what we can do to help. We were able to disseminate knowledge gained to our individual departments and prepare them for the upcoming strategy work.



Unit-Department Council (UDC)

FY2025 summaries



Within Salem Hospital's Professional Governance structure, Unit-Department Councils (UDCs) are the foundation. This is where frontline staff are encouraged to elevate their voice and ideas with the support of their department leadership to collaborate on advancing unit culture and work experience as well as engage in quality improvement work in their areas. The following is a summary of key work accomplished by some of our outstanding UDCs in FY2025. All of the Magnet Domains are represented in the work of these councils.

A6 East General Medical Unit Council

- Projects:**
 - Refined new grad packet to better support our new nurses.
 - Contributed to unit initiatives to increase our nurse certification rate of 57%
 - Continued patient activity cabinet with the assistance of Salem Health Foundation
 - Defined clear CNA roles and expectations in unit work.
 - Robust staff communication: monthly unit newsletter & unit SharePoint site
- Caring beyond the bedside:**
 - Volunteered to cook and donate a meal to Polk County Warming Centers
- Sent two representatives to the 2024 Magnet Conference**
 - Jena Hendricks and Allie Purvine



Trauma Care Unit (A4E)

- Vision:** "To be the superhero squad of trauma care that delivers compassionate, innovative, and timely treatment, transforming lives and fostering resilience in our community — all while keeping a sense of humor and a steady supply of candy!"
- One of our goals was to get 25% of eligible nurses certified by the end of FY25. We discussed avenues for certification each month at our UDC meeting, shared flyers and emails for review course opportunities, and individually sought out nurses who were eligible to discuss barriers.
- We were able to get a unit gathering fully planned out and attendance was wonderful!

Medical Oncology (A7E)

- **A7E Mission Statement:** To improve staff retention and manage small tasks in the Oncology unit by creating a supportive work environment and finding practical solutions that promote staff well-being and patient care excellence.
- **FY '24 Project:** Based on the Nurse Satisfaction Survey results from 2023, A7E had an opportunity for improvement in nurse autonomy. UDC took on this project and sent out a short survey to all nurses and CNA's regarding their feelings of autonomy on the unit. We then divided up all A7E staff amongst the UDC members to provide all staff with a unit council member to have as a point of contact if they had any questions or concerns about the unit to encourage autonomy.
- **Unit Activities:**
 - Pumpkin Patch outing, Unit BBQ, Holiday Party, Food drive with Salem Cancer Clinic, A7E Staff Respite Room Update



Orthopedics (B6N)

Mission:

The Orthopedics Unit Department Council (UDC) is committed to ensuring evidence-based practice is used in the care of patients and in the support of our staff. Our UDC serves as a voice on unit for staff concerns and ideas to improve workflow and patient care.

Catch Phrase:

Ortho: It's a JOINT effort!

FY24 Goals/Project:

Our two main goals for FY25 were to increase compliance with pressure injury prevention methods and increase RN certification rates. We worked to increase compliance with pressure injury prevention methods by utilizing standardized visual cues and chart reminders for patients with a Braden score of <19. We have successfully had four quarters of PIP surveys without a pressure injury. For RN certification rates, our ANM regularly sends out emails to all eligible staff members with resources and study materials that have been acquired to help make staff members more successful. We have had multiple people test for their certification this year.



Medical-Telemetry (D5)

Mission: The D5 Unit Council seeks to empower and engage our colleagues to succeed and grow through the use of Evidence-Based Practice to improve patient outcomes and staff satisfaction.

Projects:

- Expected Charting Tipsheet for basic charting requirements during a “regular” shift developed by members for new hires, new grads, provided to ANMs in charge of new staff onboarding.
- Ongoing work with Distribution in order to reduce the number of nurse servers and pass-throughs required to be dumped due to exposure to isolation rooms. Unit Council collected data from Distribution to determine the total cost of supplies, and therefore the approximate wasted cost to the unit when a server needs to be thrown away. Pass-throughs are being zip-tied from inside the rooms in order to prevent access to supplies for all rooms since Distribution is not able to reliably stock rooms with so many fluctuations in patients requiring isolation.



- Based on floats to other units, the variety of snacks being stocked in nourishment rooms was noted to be different on other floors. A list of additional snacks was compiled and submitted to Nutrition Services to allow for those items to be regularly stocked and available to patients.
- Increased focus on staff engagement outside of patient care with more regularly planned potlucks, as well as a biannual activity outside of work (holiday party and spring/summertime activity outside).

Clinical Nutrition Council

The Clinical Nutrition Council (CNC) is dedicated to supporting optimal patient outcomes and staff engagement through collaboration, shared leadership and shared decision making about professional practice directly related to the clinical nutrition team of registered dietitians. We are focused on nourishing lives one patient at a time. One of the big projects we worked on this year was our PO intake project. This was initiated to help clarify and provide more information to ensure accurate documentation of foods and fluids. Handouts and proposed changes were taken to CNA council and gemba rounding was completed to understand barriers. We coordinated with clinical education to create a new HealthStream for all staff to complete.

This new HealthStream will be required for all new hires moving forward. Some upcoming and ongoing work in our council is our NGT placement project, as well as our patient menu development. Kira Nesser, RD, has done incredible work to make menu options available to inpatients and has made menu edits that align with nutrition recommendations from the Academy of Nutrition and Dietetics and governing bodies to be sure patients are getting the best nutrition available.



Pharmacy Unit Council



Vision Statement

The Clinical Pharmacy Council (CPC) is dedicated to enhancing patient safety and pharmacy department goals through shared decision making. This committee seeks to provide optimal clinical and pharmaceutical solutions within our scope of practice, and support the overall well-being of our community through medication management.

Projects

- Evaluation of heparin protocol effectiveness/ August 2024 to May 2025
 - A retrospective chart review that assessed the effectiveness of Salem Health's heparin protocol by evaluating the time to first therapeutic PTT. Three indications were evaluated (acute coronary syndrome, atrial fibrillation and deep vein thrombosis/pulmonary embolism) and had average times to first therapeutic PTT of 25, 23.5, and 29 hours, respectively.
- Impact of pharmacist-led fluid stewardship on length-of-stay and all-cause mortality in sepsis patients / November 2024 to June 2025
 - Assessed the impact of pharmacist-led fluid stewardship on length of stay and all-cause mortality in critically ill patients with a diagnosis of sepsis. While overall hospital stay was not statistically significant, pharmacist-led IV fluid stewardship showed a trend toward lower mortality, reduced fluid overload and fewer readmissions, supporting its potential value in ICU fluid management.
- Comparison of phenobarbital monotherapy and phenobarbital combined with adjunctive dexmedetomidine in managing alcohol withdrawal syndrome (AWS) in the intensive care unit / November 2024 to June 2025
 - Evaluated the impact of adjunct dexmedetomidine to phenobarbital therapy on clinical outcomes in critically ill patients with AWS in comparison to the use of phenobarbital alone. It was found that there was a statistically significant difference in the overall ICU length-of-stay with the adjunctive use of dexmedetomidine with phenobarbital for AWS. Although dexmedetomidine was associated with higher cumulative phenobarbital dosing, it did not reduce the need for mechanical ventilation or improve withdrawal symptom control compared to phenobarbital alone.



Improvements and quality work FY25

- IV fluid shortage mitigation and production
- Improved IV room pharmacist dispense prep/check rates
- Improved PSA follow up time
- IV Poppers changed to Mini Bag Plus
- Take home packs dispensing from ED Omnicell
- TNK workflow changes to improve drug administration time in stroke patients
- Update to pharmacy standard work organization, storage and maintenance
- Training competency checklists created for all pharmacy staffing areas
- Medical-surgical and medical pharmacist workload improvements
- ICU swing pharmacist workload improvements
- Beacon protocol review

Posters, publications, awards, and recognition

- Stephanie Cassidy:
 - Resident Mentor of the Year – 2025
 - Star Award – 2024
- Danielle Britt:
 - Salem Health Service Excellence Award (Stop-The-Line) – 2025
 - OHA Gold Award for Oregon Antimicrobial Stewardship – 2025
 - CME Lecture at SH Sepsis Day – Less is More: Re-Evaluating Empiric Anaerobic therapy – 2024
 - ASHP Midyear Presentation – Evaluation of Dalbavancin Therapy for the Treatment of Moderate Skin and Soft Tissue Infections in a Community-Based Emergency Department – 2024

Discharge Ready Unit (DRU)

Chair: Lisa Nguyen, LPN

Co-Chair: Rolanda Davis, BSN, RN

This past January, the Discharge Ready Unit (DRU/B4South) proudly launched its very first Unit Department Council! Our dedicated council is composed of LPNs, RNs, and CNAs, all working collaboratively to enhance patient care and strengthen our team culture while continuing to define who we are as a unit. Our average UDC attendance has remained about one-quarter of our staff with representation from all roles on our unit, leadership and staff from both days and nights. We regularly invite other disciplines as needed based on different project topics as well.

Over the past year, we successfully implemented several tests of changes (TOCs) on our unit that were led by our Unit Council, including:

- Oral care expectations SW
- Comfort care cohort work
- Shower schedule SW
- Care team huddle
- CNA walking rounds
- Increasing patient mobility
- Reducing tray delivery time
- Patient visibility board
- Star of the month & kudos boards
- Bed alarm audit
- Unit engagement activities
- Supply par level adjustment project

Our primary goal has been to help foster a stronger sense of unity as we continued onboarding a high volume of core staff over a very short period. We focused on increasing engagement across the unit and creating a supportive teamwork-oriented environment for all our staff in several ways. As a new unit and innovative care model we continue to find areas of improvement in our workflows that keep our council very busy.

We're proud of the progress we've made, the team we have built, and we are excited to continue building on this momentum in the year ahead as we continue to define what DRU is and what exactly our role in this organization is.

Care Management (Inpatient)

Mission: Our mission is to support the care coordination and transition planning of care management staff as they navigate patients through a complex system of services, coverages and dispositions

FY25 Key Work:

The CM UDC has had a busy FY25. We formed our unit council after a period of not having one and did so with overwhelming interest and support from the staff. As of August 2025, there are now 12 council members and two co-chairs. One of our biggest accomplishments was an all-hands-on-deck project where the entire UDC worked to review and revamp our new employee resource binder. Later in the year, we updated the Care Management Initial Assessment workflow to account for Medicaid services — facilitating more in-depth charting on our patients. Our current, ongoing efforts are aimed at building a mentorship model to see if this is something that can be used to benefit new and future care managers.



Inpatient Rehabilitation (B4N)

At the start of FY25 our unit council consisted of a chair and co-chair. With leadership support, we held multiple sessions to encourage staff to join and welcomed seven new council members from nursing, care management and therapy. Our first big project was around falls in our unit. Over the year, our census has increased, we have multiple new staff, and an increase in leadership. Our falls project consisted of standardizing our whiteboard items to decrease confusion, extra time and patient falls. We have a process in place for identifying patients at high risk of falling. As an interprofessional team, we utilized all staff input and worked together to decrease our fall rates.



Intermediate Care Unit (IMCU, A6W)

IMCU began the fiscal year by completing the Bedside Safety Check Project. This initiative was highly successful and was later adopted by one of the Adult Health/Critical Care collaboratives. Bedside safety checks are now a house-wide standard.

Our Unit Council worked closely with management to support all of the SCAI work throughout the year. Key milestones included:

- All staff completed SCAI education.
- We cohorted all SCAI B and C patients to IMCU/CVCU.
- Charge RNs screened and staged all A-fib, NSTEMI, and CHF patients.
- We utilized the Shock Board to trend labs, assessments, and vital signs to help recognize early decompensation. This collaborative effort contributed to a decrease in CMS 5-Star AMI Mortality, lowering the baseline from 5.5% to 4.5%.

Other Celebrations:

- IMCU remained CAUTI-free for FY2025!
- CMS Communication about Medications scores improved from 51.63% to 62.1%, using a medication tool originally created by our Unit Council.
- Our team strengthened connections outside of work through baby showers, bridal showers, fun runs, painting nights, and other celebrations.

We closed out the year by saying a heartfelt “Happy Retirement!” to our manager, Sheila Loomas, who dedicated many years of leadership to IMCU and 37 years to Salem Health.

Wound & Ostomy

Fiscal year 2025 has been one of restructuring and reorganization. A staff member from the outpatient Advanced Wound Care clinic stepped into the role of council chair at the start of the fiscal year. With the help of unit leadership, the Wound & Ostomy UDC has been meeting regularly at the end of each Professional Governance Day. Current council members represent both the outpatient Advanced Wound Care clinic and the inpatient wound/ostomy team.



This fiscal year, council members from both the inpatient and outpatient wound care teams developed educational binders for newly hired staff for their respective departments. Each binder contains a calendar with daily and weekly goals to keep both the preceptor and preceptee on track. There is also a section to monitor competencies specific to wound and ostomy care. Further tabs in the binder provide a wealth of information on proper wound assessment, compression wrap application, pathophysiology of negative pressure wound therapy, and offloading techniques.

In addition to the binder project work, members have been engaged in various process improvement projects in their respective departments.

Interventional Recovery Unit (IRU)

Amy Crain, BSN, RN, PCCN; Sara Wargnier, BSN, RN, PCCN – Chair; Victoria Bernhard, BSN, RN; Chelsea Armentano, BSN, RN, PCCN – Co-Chair; Molly McGuirk, BSN, RN; Angie Clemens, RN

Cardiac Nurses focused on excellent patient outcomes based on evidence-based practice and shared decision making; creating a positive work environment through teamwork and laughter.

2025 Accomplishments

- Antiplatelet medication PCI patients: Process created to assure patients who have had PCI get their antiplatelet medication prior to discharge home, referral to cardiac rehab and additional education associated with cardiac stents and new medications.
- Standard Work: Lazer Lead Extraction* EVAR* EPS*
- Standards of Care Review/Updated
- Staff Team Building: Holiday Party gift exchange/Summer BBQ/Happiness Project
- Birthday Month potlucks/Pet Therapy Board



Labor and Delivery (L&D)

Vision Statement: The L&D UDC aims to ensure that our unit is utilizing evidence-based practice to provide safe, supportive, high-quality, cost-effective care to achieve optimal health outcomes while maintaining open communication among the interdisciplinary team and creating a patient- and family-centered environment.

FY25 Project: Sterile Conversations Project

SMART goal: If we implement sterile conversations in the OR from room time until uterine closure, then we will decrease our OR times by 10% and PPH rate to <10% for C/S by June 2025.

The sterile cockpit rule was implemented in L&D ORs from room time until uterine closure with the goal of limiting distraction in the ORs.

Conversation was limited to that that pertained to the patient or the case. Six months post-implementation, our average OR times did not change, but the average postpartum hemorrhage (PPH) rate decreased to 10.3% from 17% average the six months before implementation.

Additional unit improvements/quality work:

- Hypertension in Pregnancy initiative
- A-OK standing order set for amniotic fluid embolism treatment
- Perinatal loss and bereavement process update
- Krames education updates for patients
- Pain reassessment timer Epic enhancement



Pediatrics

The primary UDC project focused on expanding the range of laboratory tests permitted to be drawn from a peripheral intravenous line (PIV) in pediatric patients aged 12 months to 17 years. Previously, the standard practice allowed only basic metabolic panels (BMP) and complete blood counts (CBC) to be collected via PIV in this age group. A comprehensive literature review, along with consultation with peer institutions and physician interprofessional partners, provided the necessary evidence to support this change. As a result, both the standard work and the hospital-wide policy were updated to reflect the revised practice, and staff received appropriate education and training. This initiative has led to improved staff and patient satisfaction while upholding the highest standards of quality and safety.



Other projects and achievements include:

- Revised the pediatric diabetic ketoacidosis (DKA) policy and implementation of new clinical guidelines, enabling the pediatric unit to care for patients with mild to moderate DKA.
- Implemented point-of-care (POC) testing for urine ketones, allowing bedside testing to be performed directly on the unit for improved efficiency and patient care.
- Drafted a standard work document outlining best practices for the management of neutropenic patients presenting to the Emergency Department with fever.
- Developed age-appropriate toy boxes for pediatric patients aged 1 to 5 years, including two toddler and two preschool boxes, to promote play and provide distraction during hospitalization.

NICU

Vision statement: Providing high-quality family centered care to critically ill newborns while placing a strong emphasis on safety and evidence-based practices. Our multidisciplinary team is dedicated to improving the health and well-being of infants while supporting and empowering families through every step of their journey.

Projects FY25:

CPAP to 34 weeks: NICU has implemented a new standard to use continuous bubble CPAP on neonates requiring this level of respiratory support until 34 weeks gestation for improved lung function.

Early skin-to-skin: Skin-to-skin immediately following delivery for (stable) infants 32 to 33.6 weeks gestation for improved transition for infants and improved overall skin-to-skin time with parents throughout hospital stay.

Small baby and golden hour simulations: Quarterly simulations for staff lead by both providers and floor staff in order to improve care of our micro preemies, improved confidence of staff and better collaboration of team members.



Noteworthy happenings

- Trialed and implemented new CPAP head gear
- Micro-preemie feeding protocol alignment to decrease extended use of central line nutrition
- PAL (peripheral arterial line) implementation

West Valley Hospital Emergency Department Unit Council

The West Valley Hospital Emergency Department UDC uses evidence-based practice to engage in process improvement, team collaboration and advocacy to empower our peers to optimize the function of the department. Our unit has had a year of growth and change, with increased staff and new leadership, we continue to prioritize staff satisfaction and retention.

FY25 key bodies of work:

- Wellbeing: Held bimonthly teambuilding activities driven by staff requests and suggestions, some activities included: axe throwing, game night and a river float.
- Leadership: Developed process for Press Ganey feedback, increased visibility and awareness for staff. Developed scripting for addressing pain.
- Quality: Direct bedding, triage at the bedside, and decreased length-of-stay and left-without-being-seen metrics.
- Safety: Standardized process for prescription drug destroyer use. Met expected metrics, now in sustain and operate.
- Shared Decision-Making: Held our first unit council elections and onboarded new unit council members.
- Professional Development: Increased CEN rates on the unit, coached staff and provided resources.



Structural Empowerment (SE)



SE

Interprofessional shared decision making, influential nurses, lifelong professional development, and strong community partnerships.



Magnet Conference 2024 New Orleans

SE

Salem Health sent 30 staff from diverse clinical and professional roles and specialties to New Orleans for the 2024 ANCC Magnet and Pathway to Excellence Conference. It was an excellent conference this year, including Salem Health's own Nancy Bee and Tricia Shoun delivering an outstanding presentation on the Salem Health Staff Engagement & Resiliency Advocate (SERA) program to a standing-room-only crowd of over 1,600.





Nancy Bee and Tricia Shoun made Salem Heath proud with their exceptional presentation and standing ovation from the packed theater. See page 64 for the full write-up.



Oregon's first Nurse Honor Guard started at Salem Health

SE

The Salem Nurse Honor Guard (SNHG) honors nurses who have dedicated their lives to caring for others. At the end of life's journey, the Guard pays tribute to these professionals through a ceremony that includes reciting the Nightingale Pledge, laying a rose of respect, performing a final call-to-duty, and, when the call goes unanswered, ceremonially releasing the nurse from service by extinguishing a Nightingale lamp and presenting both the lamp and rose to the family.

Although more than 250 honor guard chapters existed nationwide in 2023, none were in Oregon or Washington. That changed in the fall of 2023, when Dana Hart contacted the National Honor Guard Coalition for guidance in delivering a tribute for an Emergency Department colleague at Salem Hospital. The ceremony was so meaningful that Dana partnered with retired SH RN Lori Phillips to pursue funding from the Salem Hospital Foundation. Their efforts provided resources for capes, printed recruitment cards, and a gathering to recruit nurse volunteers.

Fiscal year 2025 proved highly productive for the SNHG. In the first two quarters, Dana, Lori and Nancy Dunn built the infrastructure needed to recruit and onboard 22 nurse volunteers. They filmed a video to introduce the tribute to new volunteers and to help families understand what the ceremony entails. On Feb. 25, 2025, they officially launched Oregon's first Honor Guard chapter at the Professional Governance Congress. By the end of the fiscal year, the Guard had conducted three tributes. On May 31, they celebrated this milestone with a luncheon and presented each member with an SNHG logo pin.

Every tribute has generated deeply meaningful testimonials from families, churches, and attendees, often accompanied by photos and videos that serve as treasured memories. Nancy also publishes each tribute on the intranet communication "Daily Dose," and through social media venues, ensuring the stories of service and compassion reach others.





Pictured above, from left: Mindy Close, Lorna Dryden, Kelly Bodnarchuk, Taylor Sherbrick, Katie King, Kelly Peterson, Lori Phillips, Nancy Dunn, Dana Hart, Lisa Burk, Elizabeth Brown, Tami Wheeldon, Ginger O'Reilly, and Jill Munger. Not Present: Britni Young, Brittaini Hawthorne, Cris Hatzenbibler, Jackie Chandler, Melissa Bosvert, Jennifer Chanthalangsy, Kristie Lawrence, Lori Erni and Lisa Haddock.



First Tribute, March 2025

From left: Tami Wheeldon, Katie King, Nancy Dunn, Kelly Peterson, Lori Phillips, Ginger O'Reilly, Brittaini Hawthorne, Lisa Burk, Jackie Chandler



The SNHG Tribute Table

Scan QR code to view the
Salem Nurse Honor Guard
Mock Tribute Video:



Caring Beyond the Bedside

FY25

Caring Beyond the Bedside is a donation and volunteerism effort amongst our Unit Department Councils (UDC). Each year, participating UDCs are given the opportunity to select a local charity to support with a money donation, volunteerism or both. This program originated in 2010 when Salem Health nurses were inspired by a 2009 Magnet Conference learning resulting in unanimous agreement to forego the traditional Nurse's Week gifts and instead use that money for donations to local charities. Over the years the program evolved from being nurse-centric to now being inclusive of all interprofessional groups with active UDCs that wish to participate.

In FY25, the program further evolved to put more resources into a smaller number charities, thus maximizing impact on those selected this year along with reducing administrative burden on the individual UDCs. A total of nine charities were selected by the UDC Collaborative, and each UDC was then allowed to choose which charity they wanted to support. With 30 UDCs participating and combining their resources, many of the charities received large money donations and significant volunteerism.



The councils supporting Salem Harvest saved 242 pounds of blueberries from waste through their volunteer harvest. That fruit was then donated to Marion Polk Food Share and distributed to recipients in need throughout the community.





Camp Odakoda



CASA Marion County



Marion Polk Food Share

Unit Council	Charity
Imaging	Camp Odakoda
Pediatric	
Float Pool/Vascular Access	
Cath Lab	
Inpatient Rehab	
General Surgery	Habitat for Humanity
Respiratory Therapy	
Clinical Nutrition Council	Marion Polk Food Share
Rehab Coordinating Council	
Med-Tele	
Wound & Infusion	
Operating Room	
Clinical Decision Unit	Salem Harvest
Med-Surg	
Neuro Care Unit	
IMCU	
ED	
Medical Oncology	ICU Comfort Care Quilters
ICU	
Psychiatric Medicine Center	
CVCU	
Labor & Delivery	
Interventional Recovery Unit	CASA Marion County
Clinical Pharmacy Council	
NICU	
CNA Housewide Council	
Mother Baby Unit	
PACU	Family Building Blocks
West Valley Hospital	
General Medical	

Caring Beyond the Bedside provides clinical staff the opportunity to connect with and support the community in unique ways that differ from their usual work in patient care. The charities selected are all local to the the greater Salem region and/or exist to provide a service or benefit to the local community.



SE

The DAISY Foundation was established by the family of J. Patrick Barnes after he died from complications of an autoimmune disease in 1999. During his hospitalization, 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.

The DAISY Award was started at Salem Hospital in 2011. Since then, we have honored a registered nurse nearly every month (dependent on nominations received). To date, more than 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 Development & Recognition 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 on the second floor of Building B.
- 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.

FY25 DAISY Awards: July 2024 through June 2025



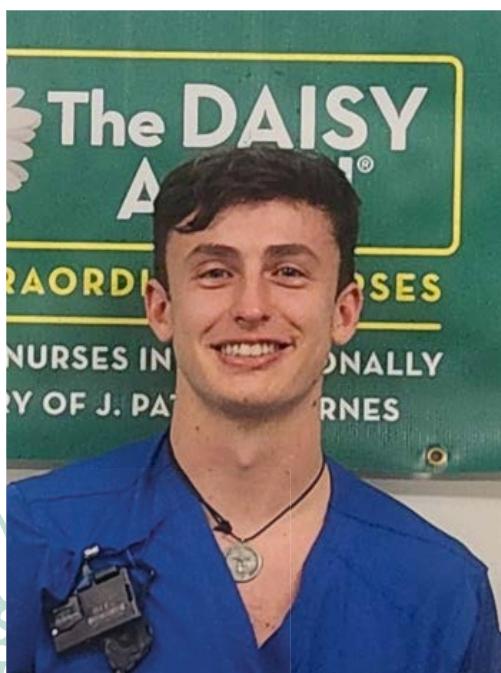
July 2024
Malachi Teague, ICU



August 2024
Sarah Garcia, L&D



September 2024
Tiffany Karnaghan-Wirt, CVCU



October 2024
Hayden Scott, D5 Med Tele

FY25 DAISY Awards



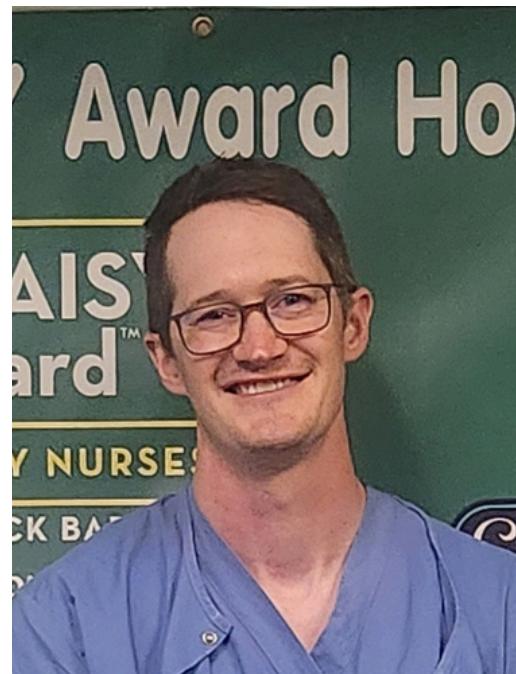
November 2024
Tyler Gayheart, CVCU



December 2024
Mary Jo Pflaum, MBU



January 2025
Elisabeth Rodman, House Ops



February 2025
Jeremy Togstad, IRU

FY25 DAISY Awards



March 2025
Mary Jo Pflaum, MBU



May 2025
Jeanette Palomionos, Float Pool



FY25 DAISY Awards



Trillium Awards

SE

The Trillium Award was created in 2012 by the CNA Specialty Practice Team (now the Unit/Department Council) to honor certified nursing assistants who go above and beyond in caring for patients and their families. CNAs play a vital role in patient care — building strong relationships and communicating closely with families, coworkers and the broader care team.

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.

The Trillium Award is presented 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 Housewide Council.

An award presentation is organized but kept a secret from the awardee. The person who nominated the awardee and unit staff are all invited to attend. Each quarterly winner is honored with a surprise celebration.



Janet Zhang, CNA A3E
Spring 2025 Winner



THE PHIL AWARD

Honoring Outstanding Respiratory Therapists™

SE

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. Matt Stone was selected from amongst many nominations to receive the 2025 award. Congratulations to Matt!



2025 PHIL Award winner
Matt Stone, RRT

Service Excellence Awards 2025



The Star Award program was created in 2009 to provide Salem Health staff an opportunity to recognize their peers: employees, medical staff and volunteers.

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.

Nominees

Patrick O'Herron
Tim Lamberson
Mandy Graham
Curt Hawkinson
Bryan Mansell
Emily Day
Amy Hoke
Jaswinder Kaur
Brittany Smith
Nathan Tucker
Katherine Hart
Christina Clement
Heather Krupicka
Joanna Peterson
Yuko Iwanaga
Laura Aspinwall
Estephania Palacios Gomez
Gayle Rodriguez
Oliver Morris
Webb Wilson
Kelsey Knupp
Shelly Keller
Diana Woods
Rosalva Isiordia
Cadie Fery
Emily Sweet
Amber Rouleau
Larry Gerig
Sean Sickler
Misti Shilhanek White
Catia Garibay



First annual Golden Heart Award

SE

The Golden Heart Award recognizes individuals and teams who have made a lasting impact on patients and/or colleagues through their outstanding contributions to cardiac care. This is the first of what will be an annual award, presented during Heart Month.

Anyone who provides cardiac care within Salem Health could be nominated, regardless of job title or specialty area of practice. After an astounding number of beautifully written nominations showcasing the incredible work being done across our organization in cardiac care, we decided to recognize all of them in our awards ceremony! (Not all are pictured.)

Here they are, in no particular order:

Cardiothoracic Surgery operating room team

- Lori Bauke-Way, RN, assistant nurse manager
- Molly Chapman, RN, clinical nurse BSN
- Erik Fender, certified surgical technologist
- Julie Harveaux, certified surgical technologist
- Aaron Jeffries, RN, clinical nurse BSN
- Amy Laursen, RN, clinical nurse BSN
- Jennifer Nelson, RN, clinical nurse BSN
- Allison Pond, RN, clinical nurse BSN
- Karis Shalashov, RN, clinical nurse BSN
- Debbie Sund, RN, clinical nurse
- Tamara Herrmann, certified surgical technologist



Physician health care heroes

- Nervin Fanous, MD, Cardiothoracic Surgery
- Nimeshkumar Mehta, MD, pulmonary medicine
- Brandon Tieu, MD, Cardiothoracic Surgery

Health care heroes team

- Cardiogenic shock committee
 - Ivan Arenas, MD, PhD, Cardiology
 - Allie Adelman, RN, Kaizen clinical nurse consult
 - Sydney Allen, supervisor Information Services
 - Nancy Bee, RN, Nursing director
 - Emily Day, RN, clinical nurse BSN
 - Amanda Griffith, RN, nurse manager
 - Katherine Landen, MD, emergency medicine
 - Renee Martizia-Rash, RN, director of cardiovascular service line
 - Nimeshkumar Mehta, MD, pulmonary medicine



Unsung heroes

• Switchboard team

- Emily Barron, solution center operator II
- Stacey Bobacher, solution center operator I
- Angela Bradely, solution center operator I
- Robin Birr, solution center operator I
- Ashley Decker, solution center operator I
- Barbara Donovan, solution center operator I
- Mary Ellis, solution center operator III
- Lex Farias, solution center operator III
- Jory Gale, solution center operator III
- Allie Hussey, manager solution center
- Janet Lui-Hansen, solution center operator I
- Janet Mougne, solution center operator I
- Holly Pruett, solution center operator III
- Viry Rios, solution center operator III
- Angelica Salazar, solution center operator III
- Kameron Schadt, solution center operator I
- Lindsey Swettman, solution center senior
- Clinton Thalman, solution center operator III
- Kardena Velasquez, solution center operator III
- David Watson, solution center operator III
- Jim Bouse, senior biomedical service technician
- Amanda Early, operations specialist II
- Jared Montgomery, cardiovascular business manager
- Hannah Tamayo, RN, clinical nurse BSN

Acts of bravery and compassion

- Madeline Cappel, RN, clinical nurse BSN
- Max Rothenberger, RN, clinical nurse BSN
- Jenna Shiferaw, RN, clinical nurse BSN

Caregiver of distinction

- Debbie Sund, RN, clinical nurse

Community impact champions

- Scott Todd, RN, clinical nurse BSN
- Kelsey Truong, RN, cardiac care coordinator

Educators and mentors

- Alana Bailey, RN, clinical nurse BSN
- Rita Giles, RD, specialty practice registered dietitian
- Erin McGinnis, RN, clinical nurse BSN
- Caitlyn Wells, RN, professional development specialist



Preceptor recognition event 2025

Honoring our many outstanding preceptors



On May 13, with generous sponsorship by the Salem Health Foundation, our organization proudly hosted the annual Preceptor Education & Recognition Event 2025, to say thank you to the amazing staff who help guide and mentor the next generation of health care team members.

With more than 80 attendees, the event brought together preceptors, leaders, and supporters in a lively atmosphere filled with fancy lights and music, gratitude, and camaraderie.

After the welcome from the clinical education team, the audience were treated to a series of amazing prize drawings and a special video segment that highlighted the impact and dedication of our preceptor community.

A standout moment of the afternoon was an inspiring presentation by Fred Preston, our Lead Staff Engagement and Resiliency Advocate. Fred delivered a powerful session on emotional intelligence, highlighting how self-awareness and meaningful recognition can strengthen team cohesion, inspire others, and in turn lead to an even more impactful precepting experience. His message resonated deeply with attendees.

One of the most anticipated moments of the day was the Preceptor of the Year Award Ceremony, where outstanding individuals were honored for their exceptional mentorship, leadership, and dedication to the development of the skills and professional character of our Salem Health team.

This event was a celebration of the exceptional standard that our preceptors set for our organization. Congratulations to all 69 individual nominees and your incredible contribution to a continued tradition of excellence.



Nominees

Aubrey Applegate-Castanon
Esmira Arcos-Piedra
Eleanor Arnett
Alana Bailey
Carrie Bandtel
Jeremy Blackwell
Stacy Bliss
Jessica Bondaug
Erin Bracht
Luke Buchovecky
Xochilth Chavez
Michael Clark
Zaldymar Cortez
Shiree Doran
Eduardo Fuentes-Sotelo
David Galis
Erica Gandolfo
Heather Gatchet
Elizabeth Gershwin
Michelle Gillespie
Jamie Glendinning
Nicole Gray
Nicole Greinier

Christopher Hammons
Madelyn Hanes
Christian Hargraves
Kenneth Harrison
Katharine Hasselman
Sabina Helmer
Ashlynn Helms
Margaret Hernandez
Allyson Hodam
Brett Honyak
Jason Kennedy
Jason Kintz
Bethany Kleiber
Benjamin Kostenko
Katherine Kuhnast
Renae Largent
Christopher Martinez
Erin McGinnis
Delia Mendez
Steven Miller
Berenice Montes
Jessica Morales
Chance Nash

Angelica Navarrete
Nichole Nelson
Lisa Nguyen
Martha Padilla
Shannon Paprocki
Sergio Perez Dominguez
Katherine Perez
Anastacia Ratajczak
Jared Rentz
Savannah Ross
Ruby Rubio
Pamela Rud
Susa Russo
Stefan Sicard
Yara Simyachko
DaNeaka Tate
Scott Tisler
Emily Veneman
Anya Vignolle
Abigail Villagomez
Kristin Vincent
Regina Weber
Denise Ziak

The following Preceptor of the Year awards were given to:

- Student Preceptor of the Year – **Renae Largent, RN (CVCU)**
- Interdisciplinary Preceptor of the Year – **Christopher Martinez, Lab Assistant Lead (Lab Specimen Management)**
- Clinical Preceptor of the Year – **Xochilth Chavez, Patient Care Attendant (Float Pool)**
- RN Preceptor of the Year –**Eleanor Arnett, RN (Medical Telemetry Unit)**



We extend our gratitude to all preceptors for the dedication and commitment to training staff. Their efforts play a vital role in shaping the future of our health care system and ensuring the delivery of an exceptional experience every time for Salem Health patients.

March of Dimes Nurse of the Year Awards 2024

SE

The March of Dimes Nurse of the Year Awards celebrate extraordinary nurses who demonstrate excellence in their fields and serve as champions of quality care, compassion and innovation. Nominated by peers and selected by a panel of health care leaders, recipients are recognized in various categories, including education, direct care, leadership and research. The March of Dimes, a nonprofit organization founded in 1938, is dedicated to improving the health of mothers and babies through research, advocacy and education. The Nurse of the Year Awards are part of its broader mission to honor the essential contributions of nurses, who are often the unsung heroes behind healthier communities and better health care outcomes.



Amy Stokes is the Nurse of the Year Award winner in the Educator category, honoring her outstanding leadership and impact as a Professional Development Specialist at Salem Health. This prestigious award recognizes Amy's commitment to advancing nursing practice, improving patient outcomes and shaping the professional growth of nurses.

As a Professional Development Specialist, Amy Stokes plays an important role at Salem Health by designing and delivering vital training programs, supporting onboarding and continuing education and mentoring nurses at all stages of their careers. She is known for her kindness and willingness to explain concepts in ways that are meaningful to the individual learner. Amy's approach builds both confidence and competence among nursing staff.

“Amy’s contribution to the quality of care delivered at Salem Health has benefited countless nurses, patients and our community,” said a colleague who nominated her. “She’s a driving force behind a culture of clinical excellence. Whether she’s teaching a class, developing a training module, or advocating for staff development, Amy ensures our nurses are prepared, supported and empowered to provide the highest standard of care.”

Amy Stokes’s recognition as March of Dimes Nurse Educator of the Year is a powerful testament to the critical role of nurse educators in hospital settings. Please join us in congratulating Amy on this well-deserved recognition and thanking her for the profound impact she has had on the quality of care at Salem Health!

Amanda Griffith is the Nurse of the Year Award winner in the Nursing Leadership category, in recognition of her zealous advocacy and her strategic approach to change. Amanda is a role model to all. She is known for her intense passion and was nominated for her efforts related to one of her greatest passions, cardiogenic shock. What started in September 2023 with her idea to host an organizational ‘Cardiogenic Shock Day’ event led to the development of the CVCU Cardiogenic Shock Committee. The committee has met regularly since to focus on nurse-driven education strategies and the adoption of the SCAI Shock classification system and the ‘Shock Board’ to help track and trend patient changes. These changes improved interdisciplinary communication and led to an improved survivability rate from the primary diagnosis of cardiogenic shock from 47% before implementation to 62% after.

As one of her nominators stated, Amanda helps others to toggle up: “Amanda has always talked about challenges as opportunities. An opportunity to support our staff, an opportunity to improve culture, morale, burnout, resiliency, — it’s an opportunity to be better.”

Congratulations on this well-deserved recognition, Amanda!



Laurie Geist is the Nurse of the Year Award winner in the Pediatrics/Neonatal category, in recognition of the exquisitely detailed expert care she provides to the sickest babies in the Neonatal Intensive Care Unit. As an experienced NICU nurse, Laurie demonstrates excellence in all aspects of nursing care. As her nominator stated, “the most strikingly superlative element of Laurie’s nursing practice is her clinical acumen. Through a combination of her breadth of experience and innate skill, she has an almost preternatural ability to detect clinical decompensation in our hospitalized infants, which has had the net effect of saving actual patient lives.” Laurie is often sought out by others for her expertise, ranging from providing support to those with less experience, providing advocacy for an intervention when needed, or by a neonatologist to see if she has any clinical concerns about a patient. It is a privilege to work with an outstanding nurse such as Laurie — congratulations!

Erin McGinnis is the Critical Care Nurse of the Year Award winner: Erin is an amazingly talented CVICU RN, but one of her greatest attributes is her desire to help build up nurses and prevent their burnout. Erin helped create the CVCU Mentorship Program, where a new grad RN, new RN, or new ICU trained RN is paired with an experienced RN to help them transition into their new role and have a go-to support person. She also created the Burnout Recovery Workshop to help build resilience and prevent/treat burnout. The workshop proceeded to expand beyond CVCU and reach many others throughout Salem Health. Her nominator shared, “Erin has done many amazing things as a CVICU RN. She does the charge- and resource-nurse roles, she is a preceptor, a mentor, an educator, and an overall great human.”

Congratulations on your well-deserved recognition Erin!



NICU's Baby Talk Parent Support Group

SE

The Neonatal Intensive Care Unit (NICU) at Salem Hospital is a state-of-the-art Level III NICU committed to providing the highest quality and safest care for their patients and their families. Even with the best care and outcomes, experiencing the premature birth of a child and weathering the first days, weeks and months of a child's life in the NICU can have a profound impact on parental confidence and mental health.

This understanding led the NICU to develop a new form of education and support for NICU families, the NICU Baby Talk Parent Support Group. The goal of this group is to support parental well being, promote connections among families facing similar challenges, and bolster families during their NICU stay by preparing them for life beyond the NICU through peer support, education, and information sharing.

These sessions are led by a NICU staff member and a NICU parent volunteer, and have received excellent feedback from NICU families.

Sharing Lean with the City of Salem

In December 2024, six leaders from the City of Salem, including City Manager Keith Stahley were welcomed to campus by Pam Reznicsek and Whitney D'Aboy of the Kaizen Promotion Office and Lean Consultant Andre DeMerchant to learn more about Salem Health's Lean Management System as the city looks to launch their own Lean journey. The group toured the Visibility Room; Cardiovascular Critical Care Unit; and Inclusion, Diversity, Equity, and Learning (IDEAL) visibility boards. Department leaders and frontline staff shared their learnings and successes using the Lean Management System to create visibility and engage frontline staff in problem solving. The City of Salem team was impressed with the genuine engagement in Lean at Salem Health as well as the Strategy Deployment process that creates a shared vision for large work across the organization. The extent of Lean integration into all roles and levels of operation throughout the organization is indeed noteworthy, and unique amongst health care organizations.

Partnering for success: Improving student nurse placements

SE

Hospitals play a vital role in hosting student nurses throughout their academic journey to gain sufficient clinical experience to enter the workforce upon graduation. While an important part of community partnership and sustaining the profession, hosting student nurses is not without its challenges. The Professional Development and Recognition (PD&R) council recognized there was widespread confusion regarding the differences between cohorted and precepted nursing students and the extent and type of support Salem Hospital clinical nurses should provide to both.

This uncertainty led to nurses providing excess support to cohorted students that would otherwise be provided by faculty, causing unnecessary staff burden and burnout. Through investigation and collaboration, Clinical Education and PD&R determined that the placement process for cohorted students would often lead to a clinical faculty's eight students being spread out through various buildings and floors, to where they were physically unable to fully support all of their students when needed. After meeting with partnered schools, it was determined that the placement model needed revision.

Through a months-long process, Clinical Education, PD&R, clinical nurses, unit leadership (managers, ANMs and charge nurses) and academic programs and faculty all collaborated to develop new placement models and supporting documents to both place students more efficiently and provide better clarity about the needs of various student types. This means more cohorted students are placed in the same area for a clinical day so their faculty can better directly support them, lifting the burden and uncertainty from hospital staff.





Exemplary Professional Practice (EP)



EP

Effective and efficient care services, interprofessional collaboration and high-quality patient outcomes.

CVCU Achieves Beacon Award Silver

EP



The Cardiovascular Care Unit (CVCU) was awarded the Silver Beacon Award for Excellence in January 2025, continuing their success with the same award from 2024.

“The Beacon Award is granted by the American Association of Critical Care Nursing (ACCN) and highlights our ongoing work toward achieving optimal patient outcomes, establishing a healthy work environment and providing exceptional nursing care,” said CVCU Assistant Nurse Manager Heather Rideout, BSN, CCRN-CSC. “The award is similar to Salem Hospital’s Magnet® designation, though just for critical care.”

According to the AACN, the Beacon Award signifies to patients and their families exceptional care in a unit that puts patients first. For nurses, this award can mean a positive and supportive work environment with greater collaboration, higher morale and lower turnover.

Applicants for the award are judged on quantitative components like CAUTI (Catheter-Associated Urinary Tract Infection), CLABSI (central line-associated bloodstream infections), scores on Healthy Work Environment Assessment, certification rates, length of employment as an RN on CVCU and more. These scores are benchmarked against all other applicants for the award. The award also looks at patient outcomes, nursing workforce and work environment/

This award demonstrates CVCU’s story of constant evolution and striving for excellence, and affirms that our CVCU team is doing the work that is needed to serve our patient population.



Our *Excellent* Centers of Excellence

EP

Salem Health is no stranger to prestigious designations. The Joint Commission (TJC) recently completed the Intra-Cycle Monitoring (ICM) assessment for the Advanced Primary Stroke Center, Joint Replacement Center of Excellence for Hip & Knee, and Spine Center of Excellence. All programs passed with flying colors!

The calls went extraordinarily well with the navigators and leadership speaking passionately about all the work they have done to meet and exceed TJC's standards. Excellence is almost not enough of a descriptive word for these programs as they shined so brightly with their evidence-based and data driven displays of how their programs care for our patients.

The Spine program was even called out by TJC on their process for patient education — so much that they will be getting a best practice award in recognition of their innovative educational pathways. The surveyor stated that she has only recognized programs in this way once or twice in the past two years, so this is very high praise!

Certifications from TJC aren't just for show; they reflect a deep, relentless commitment to high-quality, patient-centered care. And for these programs, the intensity of additional surveys for certification does not seem to induce stress — but instead fires passion and an eagerness to improve; always putting our patients' success and wellbeing at the forefront.

Congratulations to all our DSC certified programs!

Disease Specific Care (DSC) Certifications

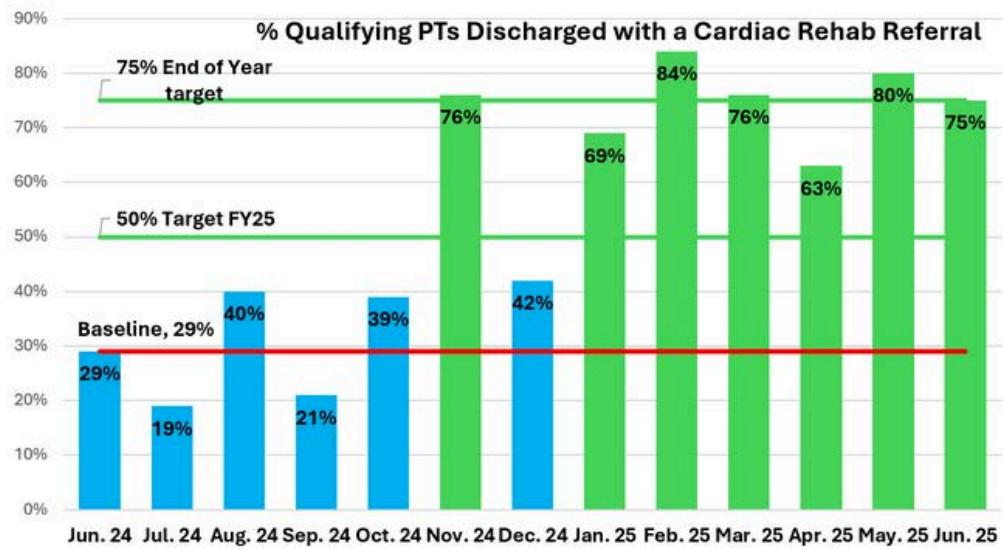
- **DSC Certified Program: Joint Replacement, Knee**
- **DSC Certified Program: Joint Replacement, Hip**
- **DSC Certified Program: Spine Surgery**
- **Advanced DSC Certified Program: Primary Stroke Center**



Cardiac Rehab Referral Improvement

EP

We are pleased to report a significant improvement in the rate of Cardiac Rehab (CR) referrals for our qualifying Heart Failure patient population in FY25. Beginning at a baseline of 29%, referral rates steadily increased, surpassing the FY25 target of 50% by November 2024 and consistently meeting or exceeding the FY25 end-of-year target of 75% through most of 2025 — reaching a high of 84% in February. This achievement is the result of focused improvement efforts, including key workflow changes with our navigator team and targeted Epic ordering enhancements. Data from the ordering provider analysis confirms that over 50% of CR referrals were placed by our navigators, followed by hospitalists. These improvements demonstrate the effectiveness of cross-disciplinary collaboration and system-level changes in supporting equitable and timely access to cardiac rehabilitation services for our heart failure patients.



Key contributors:

- Dr. Ivan Arenas, Cardiologist, Cardiology Medical Director
- Crystal Dryden, RN, BSN, CV Clinical Operations Manager
- Donna Thomas, RN, BSN, PCCN
- Paula Danielson, RN, BSN, PCCN
- Stuart Chauvin, RN, BSN, CV Clinical Data Abstractor
- Megan Hollingsworth, Clinical Informatics Coordinator II
- ...and many more!

Improvement through visibility: Achieving vascular procedure excellence

EP

Salem Health has a long history of successfully using objective outcome metrics to improve patient care. The Vascular Quality Initiative (VQI) is a national and regional patient registry developed and maintained by the Society for Vascular Surgery (SVS) and the American College of Surgeons (ACS). In 2020, it was found that Salem Health VQI data was being collected for some procedures, but that data was not undergoing regular review. Inspired by the orthopedic service line's data review process, a regular review of Salem Health VQI data was started, which discovered that many of our outcomes were less than optimal, and in many areas, we were in the lowest 25th percentile.

This opportunity inspired action which started a regular review of our VQI outcomes with a “report card” system for every surgeon and the vascular service as a whole along with a morbidity and mortality review process. Salem Health also began sending representatives to the regional VQI meetings to learn and improve data recording and analysis for the program. **Over time, outcomes steadily improved, and Salem Health is proudly now in the top three programs in the Pacific Northwest regional VQI group, and in some areas of reporting, we are first. In 2024, we were awarded the three star award for VQI participation, which is the highest award possible.**

Another discovery though the review process was that post carotid endarterectomy (CEA) patients were spending longer in the intensive care unit than national and regional metric expectations. To address this, a project was started to change the default of placing CEA patients in the intensive care unit, to developing criteria that would stratify patients who needed the ICU and others that could be cared for in the IMCU. This project required the input of many people including ICU nursing leadership, IMCU nursing leadership, PACU nursing leadership, changes in our order sets made by the Salem Health Epic developers, as well as collaboration with and education of the nursing staff. **As a result of this project, postoperative average length of stay in the intensive care unit for CEA patients decreased from 1.80 days in Q4 2021 to 0.17 days in Q2 2025. We now beat the national metric for length of stay in the intensive care unit. The large majority of our postoperative carotid patients are cared for in the IMCU and go home on postoperative day one.** This improvement means better utilization of ICU beds and hospital resources in general.

All of these successes exemplify the value of data visibility and analysis in identifying objective opportunities for improvement. When we see together and know together, great things can happen.

Cath Lab Enhances STEMI Care

EP

The management of ST-Elevation Myocardial Infarction (STEMI) is critical in improving patient outcomes. To ensure the highest level of care, a comprehensive STEMI Review Form was developed and implemented.

The STEMI Review Form serves as a standardized tool to evaluate the care provided to STEMI patients from the point of EMS contact through the treatment of the patient in the Cath Lab. This tool captures vital information regarding pre-hospital care, response times, success in meeting national standards, as well as providing insights for ongoing training/education for EMS personnel and clinical staff. It has also served to create a collaborative team approach to STEMI care between EMS and hospital staff.

Ensuring patients receive essential medications after AMI with “Meds to Beds” program

In alignment with their commitment to clinical excellence and reducing AMI mortality, the Interventional Recovery Unit (IRU) implemented a “Meds to Beds” program for all patients undergoing a PCI (Percutaneous Coronary Intervention). This initiative ensures that patients receive their prescribed antiplatelet medication before discharge, improving medication adherence, reducing readmission and enhancing overall patient satisfaction. Antiplatelet medication is essential to continue taking after being discharged home from coronary stent placement. Without these antiplatelet medications, patients risk having their newly placed stents clot and clog.

To reduce patient barriers to taking antiplatelet medication after discharge, IRU partnered with pharmacy to develop a process where prescriptions are sent to the outpatient pharmacy to be filled prior to discharge. This was integrated into the discharge workflow so that nursing staff provide bedside medication teaching in conjunction with pharmacy counseling to reinforce understanding of the importance of compliance with their antiplatelet medication and so that patients leave the hospital with medication in-hand.

Purple Hands Pledge

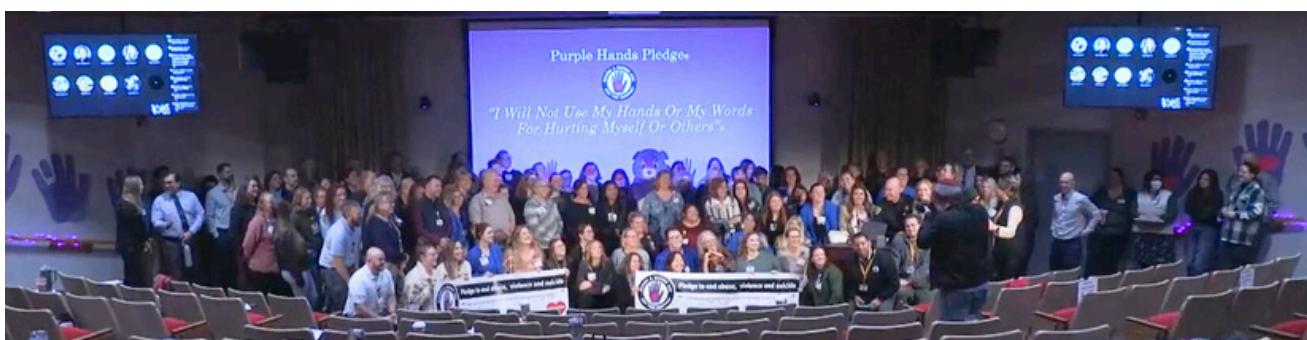


EP

In November 2024, the Quality, Safety, and Patient Experience Council, in collaboration with the Harmful Words & Actions Committee, IDEAL, and the Clinical Excellence Team, proudly hosted the Purple Hands Pledge event during Professional Governance Day in partnership with the Hands & Words Are Not For Hurting Project.

Founded in 1997 by Ann Kelly, the Hands & Words Are Not For Hurting Project has deep roots in our community. The Kelly family has a long-standing presence here at Salem Health, with both Ann's husband and son serving as physicians here for decades. What began as a local initiative in Marion County has since grown across the globe, now active in all 50 states and over 25 countries, spreading awareness of abuse, violence and suicide in homes, schools and communities as a whole.

This event brought together frontline staff, community members — including the Salem police chief and the mayor of Salem — as well as members of our executive leadership team. Community leaders expressed their appreciation for Salem Health's ongoing commitment to reducing violence and fostering a safer, more compassionate community for all.



IDEAL Team

Inclusion, Diversity, Equity and Learning

EP

IDEAL and HWA initiatives

In FY25, the IDEAL team made significant strides in cultivating the organization's commitment to inclusion, diversity, equity and learning (IDEAL), as well as in fostering a respectful and safe work environment through the Harmful Words and Actions program. The team worked closely with a variety of departments and teams, reflecting the organization's ongoing commitment to building a more inclusive, respectful, and safe culture for employees and patients alike.

IDEAL monthly calendar: Celebrating diversity and educating the workforce

A hallmark of the IDEAL team's work is the IDEAL Monthly Calendar, which highlights key holidays, commemorative events and awareness days relevant to employees and the communities they serve. In FY25, more than 348 holidays and commemorations were featured, including 70 educational articles shared via Daily Dose to help employees learn about these observances. Some of these dates were also highlighted through staff events at Salem Hospital, West Valley Hospital and the Salem Health Medical Clinics.

The IDEAL team also made improvements to the IDEAL calendar by introducing a new format. Rather than continuing to work with an external vendor, the IDEAL team created a new IDEAL calendar, including a weekly calendar. The weekly calendar allows us to provide more context for each date on the IDEAL calendar in a format that makes sense.

We continued publishing IDEAL monthly calendar highlights on Leadership Link a few days before each new month, ensuring that leaders could preview and share them with their teams.

This year, the team also conducted IDEAL-specific trainings for 262 members of the workforce at the request of area specific managers. These trainings are available through the IDEAL Training Catalog. Participant feedback was overwhelmingly positive, citing increased engagement, learning, and motivation to be more inclusive.

Promoting Professionalism

In FY25, the promoting professionalism change leaders tasked the IDEAL team with implementing training for the entire workforce, more than 7,000 people. This included development of the training curriculum and materials, collaborating interdepartmentally, training other trainers, managing registration, assignment completion, conducting hundreds of training sessions, and the development and implementation of virtual training for new hires. We also created and maintained a SharePoint site that provides resources to health care team members on promoting professionalism.

- P** Pause: Take a moment to breathe and collect your thoughts.
- E** Express: Acknowledge shared commitment. Clearly state what you observed and express your feelings without making accusations.
- A** Ask: Seek to understand, inquire about the other person's perspective.
- C** Collaborate: Work together to find a solution and suggest alternatives for better future outcomes.
- E** Ensure: Ensure commitment to the agreed solution. Discuss the impacts and consequences if the conflict is not resolved.

HWA: Promoting a safe and respectful work environment

Salem Health continued to focus on preventing Harmful Words and Actions (HWA). The HWA Subcommittee, with twenty-seven members, met bimonthly to work with nursing leaders, frontline teams, clinical partners, security, and medical groups. Together, they continue to create a work environment that actively condemns harassment and violence.

In FY25 our team enhanced the HWA visual alert sign by adding helpful information to the back of the sign. Working collaboratively with clinical units and the QSPE council, our team developed a sign that will be better suited to keeping staff safe by bringing visibility to recent patient behaviors. It also includes universal precautions to guide staff in keeping themselves safe.

The culture at Salem Health has evolved to encourage reporting and addressing issues in the moment. Staff are empowered to act against workplace violence, echoing, “No more, no longer,” supported by executive sponsors like our CEO, who continues to advocate for employee rights and champions the importance of a safe work environment. Sustaining strong leadership commitments has been crucial in advancing the culture, providing the necessary support and resources to ensure that initiatives like the HWA program are successful.

Closing Systemic Inequity Gaps

In FY25, in response to guidance from the IDEAL Advisory Council to provide Trauma-Informed Care resources, the IDEAL team developed and launched a Trauma-Informed Care Resource Guide and SharePoint site. This resource is available under “Tools and Resources” and provides staff with centralized, easy-to-access tools and guidance to deliver trauma-informed, culturally responsive care — reinforcing our commitment to patient and staff well-being.

A Year of Growth and Impact

FY25 was a year of immense progress for the IDEAL and HWA teams. Their work not only strengthened organizational culture but also provided essential tools, resources and support for staff and leaders alike.



Laboratory accolades

To mark Medical Laboratory Observer's (MLO) 55th anniversary, MLO magazine introduced the "55 Under 55" recognition, spotlighting outstanding professionals in the laboratory industry who have made significant contributions to their organizations' success. Nominations listed professional achievements and how nominees are bettering their professional field. Winners were chosen by Medical Laboratory Observer's editorial team and staff.

We are proud to announce that two of our very own leaders, Kate (Kathleen) Hainsworth, MBA, MLS(ASCP), Manager of Salem Health Laboratories-Dallas, and Karl Kamper, MBA, MT(ASCP), FACHE, System Director of Clinical Support Operations, have been honored with this distinction.



Kate Hainsworth, Manager, Salem Health Laboratories – Dallas
Salem Health Hospitals & Clinics

Age: 47

Hometown: Danville, California

Alma mater: Weber State University

Number of years of experience: 19

Someone You Look Up to in the industry: So many! Dr. Jennifer Hayes, Michael Carney, Jamie Rouse, Jenny Clow, Izzy Rodriguez-Snowden, Karl Kamper

Favorite hobby: Reading

Favorite movie of all time: Gone with the Wind and Anchorman

Favorite band or musician: REM

Favorite thing about working in a lab: The people! We do the same thing every day, and every day is different. I get to work with some of the greatest people I've ever met and do it while striving to have a positive impact on patients' lives every moment of the day.



Karl Kamper, System Director, Clinical Support Operations
Salem Health Hospitals & Clinics

Age: 47

Hometown: McMinnville, Oregon

Alma mater: Brigham Young University and University of Utah

Number of years of experience: 22

Favorite hobby: Being a musician and gardening

Favorite movie of all time: Disney's Encanto

Favorite thing about working in a lab: I value that clinical diagnostics brings hope and healing by providing answers that support our patient's health and wellbeing

New Knowledge (NK)

Staff integrate evidence-based research into clinical and operational processes.



NK

SERA program gains national recognition

NK

Salem Health innovation was highlighted on a national stage on Oct. 31, 2024, when Nancy Bee, Director Critical Care, and Tricia Shoun, System Operations Supervisor, delivered an outstanding presentation about Salem Health's SERA (Staff Engagement and Resiliency Advocate) program at the 2024 Magnet® Conference in New Orleans. Their presentation session was delivered to a packed theater of over 1600 nurses and health care professionals from around the country, and received a standing ovation.

Being chosen to present at the annual conference is a tremendous honor that is reserved for a handful of noteworthy projects out of thousands of applicants each year, and to then deliver a presentation that fills an auditorium, resonates with attendees, and sparks enthusiasm is even more special.

“What’s so great about the Magnet conference is the sharing of information and innovation,” said Nancy Dunn, Clinical Practice Advisor. “A great new idea or practice can literally make its way around the world after being shared at the Magnet Conference, and the positive impacts that ripple out from that one presentation can be immense.”



In the audience were 30 Salem Health peers who attended this year's conference. "It was an incredibly proud moment for all of us at Salem Health to see our work and innovation featured at a national level, especially to see it receive thunderous enthusiasm, support and interest," said Sarah Horn, Salem Health Chief Nursing Officer. "It was extremely validating to see an innovative, original idea from our organization spark such interest, and we wish the feeling in that auditorium could have been bottled up and brought back to Oregon to share with everyone at Salem Health."

The SERA program started in 2019, as a means to try something new in supporting staff resiliency and well-being. What started as one position supporting the ED has grown to a team of six supporting all service lines with their only purpose being to proactively and confidentially support staff as they navigate the stress and challenging situations inherent within health care professions. The SERA team model has delivered impressive results in key metrics like emotional exhaustion and turnover, to say nothing of the countless anecdotal successes provided by the team.

Please take a moment to recognize Nancy and Tricia for so excellently representing Salem Health and spreading this great work, and the SERA team for their continued excellence.



The SERA Team is (from left):

Jeff Brown, ED/PMC, D5 SERA

George Escalante, Adult Health SERA

Carla Padilla, Womens & Childrens SERA

Heidi Schaap, Critical Care and Womens & Childrens SERA

Fred Preston, Salem Health Surgical Services and West Valley Hospital, Lead SERA

John Abraham, Critical Care SERA

Getting published: Big new steps in dissemination for happiness research study



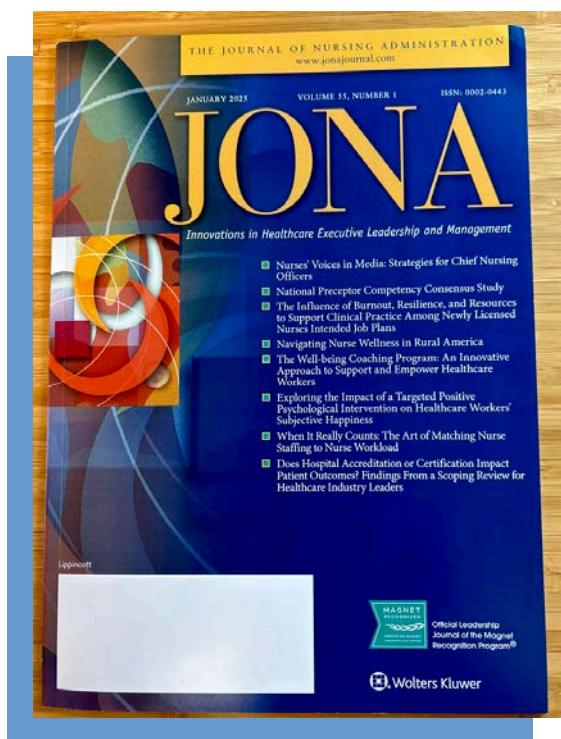
Our Happiness Advantage research team just added a big feather to their cap – getting published in the prestigious *Journal of Nursing Administration*, JONA.

But there's even better news.

Their study showed solid evidence that people can improve their subjective happiness. Participants in the intervention group increased their happiness by 17% compared to the control group over the six-month follow-up period. Then, subjective happiness was sustained by 70% in the intervention group at the 18-month follow-up.

“We proved that if you do two sequential things — first, understand how principles of positive psychology and neuroscience can rewire your brain to see through a lens of positivity,” said principal investigator Nancy Dunn. Second, engage in at least two science-based activities over a 21-day challenge; for example, practicing gratitude, increasing physical activity, random acts of kindness, etc.

“This experiential learning and the good feelings that result will become muscle memory for your future well-being,” said Dunn. Knowing this science leads to believing you can get happier. Collectively, this is called a positive psychology intervention (PPI).



About the research

Our research team began during the height of the COVID-19 pandemic in March of 2021 after receiving Institutional Review Board (IRB) approval. Health care worker burnout spiked during the pandemic, reaching rates of 49% to 69%, Dunn said.

The study team, including co-investigators Sara Nash, Paul Howard and Frieda Ryan Anzur, recruited 200 Salem Health staff and physicians who were randomized into intervention and control groups. The intervention group took five months to do the PPI in two sequential phases: 1) Reading "The Happiness Advantage" book by Shawn Achor; and 2) participating in a 21-day challenge to adopt evidence-based happiness-boosting behaviors.

“Publishing in JONA is incredible – it shares our success worldwide,” said Dunn, noting that after they presented the project at the 2023 Magnet Conference, where they reached thousands of nurses, 20 more hospitals started the Happiness Advantage program.

When asked about her biggest “ah-ha” moment, Dunn said “Everyone benefits from doing this self-improvement work, not just health care workers. You can retrain your brain to feel happier. Do something new — something you like to do — 21 days in a row, and you end up with a new habit. It’s contagious!”

This works for all humans, not just health care workers. Dunn volunteers with the Community Health Education Center (CHEC) to help groups such as North Salem High School seniors understand and use the PPI. She works with other groups in the community to embrace the PPI for their employees.

Of the 113 professional nursing journals worldwide, JONA is ranked third for impact. Salem Health should be very proud of this team!

Research team and JONA article authors (pictured from right to left):

Primary Investigator:

- Nancy Dunn, MS, RN, Clinical Excellence Coordinator.

Co-Investigators:

- Sara Nash, MSN, RN, CMSRN, NE-BC, Infection Preventionist
- Paul Howard, PHD, MLIS, CHEC Librarian
- Frieda Ryan Anzur, BSN, RN, OCN, Assistant Nurse Manager, Medical Surgical Oncology

Additional authors:

- Margo Halm, PhD, RN, NEA-BC, FAAN
- Elizabeth Whitney Lora, BA
- Jeff Gau, MS



JONA
Happiness Advantage Article



Professional Practice Day



Salem Health Hospitals and Clinics celebrated Professional Practice Day (PPD) on Oct. 3, 2024. This annual event is an opportunity for staff to share new knowledge across the organization with their excellent quality improvement and clinical innovation projects, and engage in professional development by gaining experience with abstract writing, developing posters and presenting.

In 2024, there were nine projects that participated. Each participant went through the process of writing, refining and submitting a formal abstract to the PPD Committee for review and scoring, and then going through the same process with developing a professional poster. Additionally, a handful of top-voted projects were selected to provide podium presentations during Opening Congress in November. A sincere thank you goes out to all participants!

This year's event was held in Creekside Overflow at Salem Hospital as a poster session with hors d'oeuvres, raffle prizes, and information tables from professional governance councils and other groups that support professional growth, advancement of clinical practice, and innovation in the organization like Clinical Education, Kaizen Office, Library Services, The Foundation and Magnet. These changes brought record crowds and made for a great experience for those that participated.





FY2025 Projects

- ***Accelerating Access: The Power of Direct Bedding in the ED**
 - Lindsey Spencer and Tia Rodriguez
- ***Early Recognition of Cardiogenic Shock Saves Lives**
 - Emily Day, Kylene Bowers, Amanda Griffith
- ***One Stop Care for Paracentesis**
 - Miranda Schotthoefer
- Empowering Nurses: Providing specialty education results in increased comfort level for RNs in caring for their patients
 - Olivia Sund and Emily Allred
- Reducing Post Partum Hemorrhage Rates
 - Chelsea Lewellyn
- Decreasing Blood Stream Infections With Curos Caps
 - Deb Jasmer
- Nightmare on Ostomy Street: MacGyver Wound Ostomy Nurse Solves the Mystery
 - Mindy Close
- Residual Effect: Changes to Tube Feeding Practice Save Time and Improve Patient Care
 - Julie Hilliard
- Coming In First When Responding to LAST
 - Kim Mullins and Bernie Nichols

***These projects were the top three selected by the Professional Practice Day Committee and provided podium presentations to Professional Governance Opening Congress.**

ONRQC 2025



Salem Health is part of the Oregon Nursing Research & Quality Consortium (ONRQC), which includes leaders in research and evidence-based practice from Salem Health, OHSU, VA Portland Healthcare System, Providence Health & Services, Legacy Health and Peace Health.

Salem Health was proud to host ONRQC's annual evidence-based practice conference for the third year in a row. The conference, "Practical Approaches to Evidence Based Practice," was held on April 14, 2025 in the Wedel Auditorium. The conference engaged clinical staff using examples of evidence-based practice, to improve nursing care and patient outcomes.

Participant outcomes included:

1. Describe the essential components of an evidence-based practice model.
2. Recognize two ways to incorporate clinical inquiry into professional practice.
3. Identify three ways to decrease harmful patient events.



Brianna Revard, MBA, BS, Clinical Practice System Supervisor, Salem Health, welcomed over 100 nurses from across the state of Oregon and Washington with an opening message.

Elizabeth Bridges, PhD, RN, CCNA, FAAN, past president of the American Association of Critical Care Nurses and retired professor from the University of Washington School of Nursing/University of Washington Medical Center, delivered the opening and closing keynote speeches. Dr. Bridges is well known for her presentations on the integration of evidence into practice, and she shared her expertise in creating a culture of inquiry. She was very well received by the attendees and praised for her warmth, relatability and engaging presentation style.

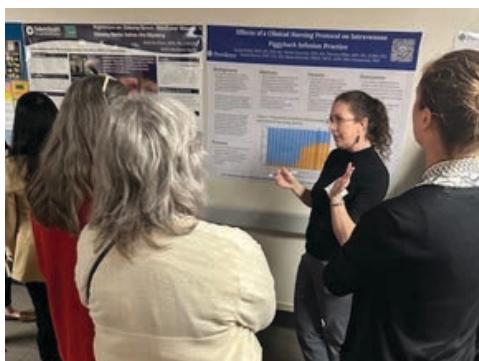
The conference included a session on the essential components of an EBP model, presented by consortium members, Katie Beam, DNP, APRN, ACNS-BC, of PeaceHealth and Kate Oppegaard, PhD, APRN, ACCNS-AG, of the VA Portland Health Care System. Additionally, Dr. Frances Chu, PhD, MLIS, MSN, RN, delivered a presentation on Implementation Science.

Six additional nurse speakers shared clinical inquiry examples from hospitals within the consortium, chosen by ONRQC's abstract review committee.



Podium topics included:

- Splash zone rollout decreases CLABSI in ICU — Crystal Pelgorsch, OHSU
- A diversion device to decrease blood culture contamination — Jamie Twyman, VA Portland Health Care System
- Refreshing RN workflows to reduce falls and improve patient care efficiency — Alex Ogren, Evelyn Schill, Kevin Richey, PeaceHealth
- Tiered orientation model for ambulatory staff — DeAnn Parsell, Kaiser Permanente
- RN coordinator role and increasing continuity in care in pediatric HF — Debora Burger, OHSU
- Standardizing antepartum screening for intimate partner violence — Leah Holmes, OHSU
- In addition to podium presentations, participants enjoyed meeting poster authors on-site to share information about their projects throughout the Pacific Northwest region.



Poster titles included:

- Is Mandated Nurse-to-Patient Ratio the Right Solution?
- Effects of a Clinical Nursing Protocol on Intravenous Piggyback Infusion Practice
- Nightmare on Ostomy Street: MacGyver Wound — Ostomy Nurse Solves the Mystery
- Low Volume, High Risk! Ensuring Pediatric Surgical Safety in a Non-Pediatric Medical Center: A Quality Improvement Project
- Stroke Survivor: A Tabletop Escape Room to Educate Both Novice and Experienced Nurses
- Decreasing Medication Errors Through Visual Management of Vaccine Standardization
- Controlled Documentation Healthcare Project
- Home peritoneal dialysis training practices and peritonitis rates in children on maintenance peritoneal dialysis
- Impact of PROVIQ Daily Management Systems on Catheter Associated Urinary Tract Infection Rates
- Increasing the Utilization of Intermittent Auscultation in Low-Risk Patients: A Quality Improvement Project
- Accelerating Access: The Power of Direct Bedding in the Emergency Department
- Human Papillomavirus Vaccine Campaign to Increase Veterans Vaccination Rates at VA Portland Health Care System
- Clinical RN Engagement in Advancing Nurse Preceptor Development
- Leveraging Technology to Improve Patient Safety with Port Deaccessing After Home-Infusion
- Improving Consistency in Midwifery Management of Inpatient Postpartum Anemia
- Intraoperative pressure injury prevention at VA Portland
- First Oregon Nurse Honor Guard Chapter Launched, Salem Health!

Presentations and posters are archived and available for viewing on the ONRQC webpage, hosted by Salem Health: salemhealth.org/ONRQC

Working Together to Address a Need: Healing Sexual Dysfunction After Prostate Cancer



In mid-2024, Ralph Yates, DO, recognized a need for prostate cancer patients. Prostate cancer is one of the highest incidence cancers in men, but standard treatments such as prostatectomy and radiation therapy can lead to a loss of sexual function. Results approximated from four large studies [ERSPC (Hugosson, 2019), ProtecT (Hamdy, 2023), PIVOT (Wilt, 2017), SPCG-4, (Bill-Axelson, 2011)] have shown that for men who undergo radical prostatectomy or radiation treatment, approximately 62% end up with impotence. Dr. Yates began to work with pelvic floor physical therapist Courtney Hanks, PT, DPT, and the Salem Health Clinical Research department to develop an investigator-initiated clinical trial here at Salem Hospital to address this need. This study aims to provide insight and a new treatment approach for postprostatectomy and/or radiation therapy erectile dysfunction with a focus on rebuilding central nervous system pathways and synaptic connections through patient education, partner connection, encouraging hope and neuromuscular re-education.

Through collaboration with Salem Health's Rehabilitation and Information Services departments, Clinical Research was able to open the clinical trial, *Healing Sexual Dysfunction After Prostate Cancer*, in early 2025. This study looks to enroll 55 participants with prostate cancer either before they start active treatment (prostatectomy and/or radiation therapy) or within a year of completing active treatment. This study is unique in that it is also open to interested partners of the participant who will receive education about what occurs to the pelvis following cancer treatment and support with home exercises.

With a grant from the Salem Health Foundation, participants in the study are able to receive seven to eight pelvic floor physical therapy treatment visits at no cost.

Team:

- Principle Investigator: Ralph Yates, DO, Family Medicine Provider
- Co-Investigator: Courtney Hanks, PT, DPT, Pelvic Floor Therapist
- Additional authors: Jeff Gau, MS
- Clinical Research:
 - Carey Uhlenkott, MS CCRC, Regulatory Coordinator
 - Cheryl LaBronte, BSN, RN, OCN, Clinical Research Nurse
 - Kellie Liudahl, RN, BSN, OCN, Clinical Research Nurse
 - Lea Ann Morrow, RN, BSN, OCN, Clinical Supervisor
 - Alex Staples, PT, DPT, Orthopedic Supervisor
 - Natalie Folkert, PT, DPT, Pelvic Floor Therapist



Salem Hospital facts

644 Licensed acute care beds

Part of Salem Health Hospitals & Clinics, the mid-Willamette Valley's largest private employer, with more than 6,400 employees

Four-time Magnet® designated

Salem Hospital 2024 statistics:

- Births – 3,024
- Diagnostic imaging procedures – 264,516
- Emergency department visits – 115,479
- Laboratory procedures – 1,862,600
- Patient meals and meal equivalents served – 717,798
- Surgeries – 16,167



Salem Health
Hospitals & Clinics