# 2019 Nursing Annual Report









#### **Extraordinary Nurses**

The 2019 annual report for nursing celebrates the extraordinary role nurses at Kootenai Health play in caring for our community and the outcomes that have been achieved as a

result of their commitment to excellence. As our community has grown in size so has our labor force. Our nursing workforce has grown in both size and scale while learning to care for more complex patients.

#### Some highlights to note in 2019 include:

Our Professional Nursing Council (PNC) refreshed our vision statement for nursing and our professional practice model, reinvigorating our commitment to professional governance as the way we do our work. The Nursing Work Environment (NWE) sub-council planned and celebrated our first ever Team DAISY Award in which we honored multiple providers AND multiple units that came together to provide the best care for a patient and family that experienced an unusual but significant event.

Nurses were trained to care for patients as the organization sought to deliver more complex care to our community including the opening of the **Epilepsy Monitoring Unit** (EMU), **Extracorporeal Membrane Oxygenation** (ECMO), **Transcatheter Aortic Valve Replacement** (TAVR), **Infusion Center** for non-oncologic therapies and worked to expand our bed capacity to 330 by opening our 3 East unit, which will house our **Dedicated Transition Unit** (DTU) for nurse residents starting in 2020.

Continued efforts to ensure our nursing pipeline remains strong was highlighted by our **New Graduate Ahead** program allowing nurse managers to hire ahead when students are graduating and looking for their first job, ensuring we get the most talented new hires. We celebrated three new graduates from our **Aspiring Nurse Leader** (ANL) program in 2019 ensuring our staff with an interest in leadership will have the capacity to take on new roles as we continue to grow.

Our community health prevention efforts introduced the **Stop the Bleed Program** in an effort to train volunteers how to save a life should a mass casualty occur in our community. Disease prevention through screening was also a priority in our ambulatory clinics increasing diagnostic rates for both colon and breast cancer.

Ensuring our workforce feels safe to speak up and supported by leadership is an organizational priority. We were thrilled to see remarkable gains in nearly every domain for our **Nursing Work Environment Survey**. Significant effort has been placed on increasing situational awareness and access to leadership through the introduction of learning boards and daily executive rounding on our inpatient units.

As we look ahead to 2020 in the second quarter we will be preparing our submission documents to **re-designate as a Magnet** organization for the fourth consecutive time. There are less than two percent of hospitals nationally that have achieved that level of distinction. Magnet recognizes our shared commitment to improving the health of our community by investing and supporting the caregivers across Kootenai Health that come together, day in and day out, to provide that care.

I am forever grateful all of our nurses and caregivers for their steadfast commitment to our patients, to our board of trustees and organizational leaders for their support ensuring our ability to continue provide exceptional care for our community and to our community for the trust they impart to us by allowing us to care for them - we are honored to serve those who choose us for their care.

**Joan Simon**, MSA, BSN, CENP, NEA-BC, FACHE *Chief Nursing Officer* 

## Aspiring Nurse Leaders

Another excellent group of **Aspiring Nurse Leaders** (ANL) completed the program in 2019. This innovative, exciting, and evolving program is for Kootenai Health clinical nurses who have a sincere interest in professional development with the intent to become nurse leaders at Kootenai. 2019's graduates are Melinda Chambers, BSN, RN; Shannon Duncan, BSN, RN, CNOR; and Christina Johnson, BSN, RN. Congratulations to the Class of 2020, comprised of Matthew Douglas, BSN, RN, CMSRN; Jennifer Miller, BSN, RN, RNC-NIC; and Lindsey Pacotti, BSN, RN.



Congratulations Aspiring Nurse Leaders, Class of 2020







### **Leadership Transition**



## **Professional Governance**

As part of the normal ecocycle seen in Professional Governance, 2019 was a year of moving from a rigidity trap in our **Shared Decision Making Model** to creative



destruction and renewal. A delegation of nurses went to AONL's Shared Governance Leadership Conference in May. The team, now called Professional Governance Steering Committee, worked long and hard to bring a brand new workshop to Kootenai. The first set of these workshops was offered in December and received glowing reviews!

The workshop is mandatory for all UPC chairs and chair-elects, the goal being foundational training on professional governance concepts, how to hold effective meetings, and business/computer basics. A parallel nursing research study is also underway, which will measure the effectiveness of the workshop in improving the health of our Shared Decision Making councils and ultimately our



## Thank You Jan Moseley

After dedicating over 40 years to Kootenai Health, **Jan Moseley**, MBS, BSN, RN, NEA-BC retired in 2019. She was a visionary, a practice champion, and a challenger of the status quo. Many Kootenai nurses weren't sure how life would go on without her. While her presence is missed, Jan earned her retirement and is enjoying it thoroughly!

## Welcome Nikki Graham



Nikki Graham, MSN, RN-BC, NPD-BC joined Kootenai Health in November 2019 as Director of Nursing Excellence and is thrilled to be part of our journey.

Our strong professional governance structure and highly engaged clinical nurses excited her from day one and she has found herself with no shortage of opportunities to be immersed in Kootenai culture!



FOR EXTRAORDINARY NURSES

IN MEMORY OF J. PATRICK BARNES

In collaboration with:



**Fourteen DAISY Award honorees** were recognized at Kootenai Health in 2019. These honorees were selected from over 80 nominations by our Nursing Work Environment sub council. These nominations are submitted by patients, families, and co-workers in honor of nurses who demonstrated excellence through their clinical expertise and extraordinary, compassionate care. These nurses were recognized as outstanding role models in our nursing community.

## Daisy Award Winners









- 1. Sharon Funkhouser, MSN, RN, CBCN, 1 North
- 2. Erin Fay, DNP, RN, CCRN, ICU
- 3. Tabitha Dole, BSN, RN, 2 South
- 4. Daniel Kasza, BSN, RN, NRT
- 5. Charlee Magnus, BSN, RNC-OB, OB
- 6. Robyn Walters, BSN, RN, CBCN, 1 North
- 7. Tara Avriett, BSN, RN, 2 South
- 8. Wendy Grassman, BSN, RN, ONC, 2 East and Karen Bryan, BSN, RN, 2 East
- 9. Windy Manzardo, BSN, RN, Heart Services
- 10. Kim Beckman, RN, CAPA, PACU
- 11. Karen Wilson, BSN, RN, VA-BC, VAT
- 12. Claire Hessing, BSN, RN, NRT
- 13. Leo Awag, BSN, RN, 2 East















Team Daisy

2019 was another year of growth for Kootenai Health. As we grow, nurses at all levels can feel some internal discord between meeting organizational performance goals and meeting the individual needs of their day-to-day nursing practice. In late July 2019, Heart Center, Emergency Department, and Critical Care demonstrated a particularly moving example of how our nurses and non-nursing staff come together to take care of patients. While one spouse was undergoing a routine procedure in the Heart Center, the other spouse experienced a sudden and life-threatening health event. The three departments worked together seamlessly to provide the best care for both patients as well as facilitating the spouses being together as much as possible, working well outside their normal departmental workflows to improve the experience for both patients. Ashley Miller, Stroke Program Nurse Coordinator nominated this large group for Kootenai's first ever DAISY Team award, which was presented in December 2019.

## **Critical Care & Emergency Dept.**

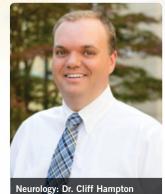
Living the Kootenai Health Way

Kootenai Health's Emergency **Department** and **Critical Care** were recognized by one patient's caregiver/ friend for the care they provided at the turn of the year from 2018 to 2019. Joan Simon received a letter from this caregiver/friend that was moving to the point of bringing tears. As recognition and thanks, a beautiful video was created and shown at several events, eliciting emotional responses at each venue. These nurses were individually called out in the letter for their care and compassion, recognizing the powerful relationship they established with their patient and support system and the caring values of this compassionate team of nurses living the Kootenai Health Way.



**Heart Center Team** (front row, I-r): Wanda Condon, Shane Walden, Ashley Miller, Belinda VanDitto (back row, I-r): Lisa Winget, Susan Dahlberg, Dianne Pinkert, Beth Stern, Stephanie Hollibaugh





Critical Care Team (I-r): Rachel Otey, Mike Little, Katie Whitt, and Sean White (not pictured: Dr. Todd Hoopman)





## **Injury Prevention in our Community**

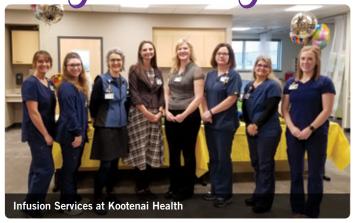
2019 was another successful year of Kootenai Health nurses volunteering in our community to prevent injury. Over 500 hours were donated by our incredible

nursing staff! This year, over 1,200 children were educated on helmet safety and over 800 free helmets were distributed. More than 2,000 adults, teens, and children were educated on basic bleeding control measures. Kootenai Health nurses demonstrate that we ARE nurses, whether we are on the clock or not.



Della Jenkins, Samantha Keppler

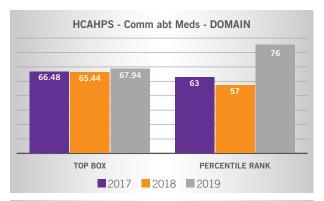
# Kootenai nursesdoing new and great things!

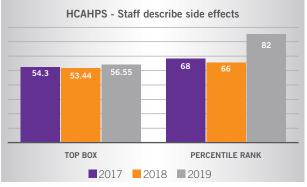


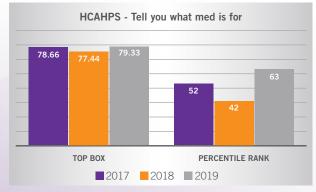


## **Patient Education**

Patient education is one of the most important components of healthcare today. It is nursing's honor and duty to carry this responsibility. Kootenai's patient satisfaction scores reflect all of the hard work that has gone into improving the education that nurses provide to patients! Our year over year HCAHPS Top Box and Percentile Rank have shown great improvement in the "Medication Communication" domains and this could not have been achieved without the diligence done by frontline caregivers, each and every day. Suzanne Burk, BSN, RN, RN-BC, NRT clinical nurse and Interactive Patient Care (IPC) Champion adds. "I would like to encourage you to continue to utilize Get Well to further educate your patients by utilizing the patient-specific education videos. RNs, CNAs and PSAs are encouraged to offer to "put on a video" for patients and families anytime that it can readily be squeezed into their workflow...like after doing vitals, after helping a patient order a meal, after proactive rounds, or when tucking patients in for the night." Our IPC Champions are huge proponents for using the GetWell system and their excitement and engagement is greatly appreciated! If ever you wonder what goes into our patient education materials, definitely check out the Patient Education Committee, where an interprofessional team from all over Kooteai Health, along with patients and family members from our community review every new patient education tool to make sure they are understandable and effective. For any questions, feel free to contact Julie Hoerner, Patient Engagement Specialist at jhoerner@kh.org or your local IPC Champion.







A Focus On Safety

Did you know that our performance in protecting patients from harm is measured continuously? Kootenai submits safety data every quarter to the **National Database of Nursing Quality Indicators** (NDNQI). This ongoing measurement helps us to quantify whether we are on-target for patient safety and other quality measures compared to other organizations with similar characteristics. **Patient safety is foundational to excellent nursing care** and 2019 saw a huge focus on safety here at Kootenai Health.

Quarterly house-wide HAPI prevalence studies and monthly focused prevalence studies are accomplished by our **Skin and Wound Assessment Team** (SWAT). In the 2nd Quarter, our prevalence study showed 0% of surveyed patients had hospital acquired pressure injuries at stage II or greater! This incredible achievement demonstrates the care Kootenai Health nurses strive to provide for every patient, every day of the year.

Another major priority focus was Falls, particularly Falls with Injury. 4th Quarter, Nikki Graham, MSN, RN-BC, NPD-BC, Director of Nursing Excellence, called for "All Hands on Deck" to eliminate falls. This has resulted in many unit-level improve-

ment projects and weekly leadership huddles specifically to brainstorm how to accomplish this lofty, but necessary, goal. If you haven't heard about what Kootenai is doing about Falls, please talk to your peers and leaders ASAP!!!

Not only do we want and need to protect patients from harm, we want to keep our nurses and all staff safe from harm! Our **Safe Patient Handling and Mobility (SPHM) committee** is very much alive and well and meet regularly to identify any barriers to employee safety and come up with solutions. We also have a dedicated Safe Patient

Handling and Mobility
Coordinator,
Justin Yu, who is always looking to partner with nurses, therapists, and any staff who are interested in this very important work. The work of SPHM has resulted in great improvements: over 50%

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Safe Patient

5.1%

2017

Kootenai Health work-

3.12%

2018

related injuries for

every100

full-time

employees

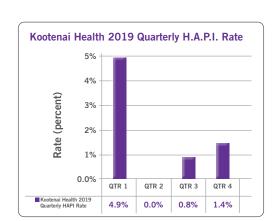
3 North Medical Unit received the Safe Patient Handling and Moblity Award. Pictured (I-r):
Mike Montreull, Mickey Shirly, Jeannie Rickert, Janna Clifton, Carney Yeager, Rachel Ross

reduction in work-related injuries! 3 North was recognized for the 2019 Safe Patient Handling and Mobility award. Great work 3 North!

#### Skin and Wound Assessment Team



Pictured (back row, I-r): Jesse Anderson, Kevin Stansberry, Lo Tuthill, Tabitha Rocha, Gina Faggion, Cindy Radavich, Tanna Moore, Colleen Clayson, (front row: I-r) Michele Goode, Desiree Manifold, Nikki Peters, Ashley Corensides, Ana Urbina





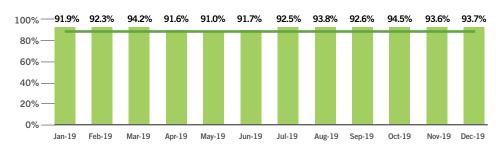
represent a large majority of Kootenai's staff. A huge shout-out goes to everyone for the impressive hand hygiene compliance statistics in 2019! Kootenai exceeded the goal of 90% for every month of the entire year.

"In March, the **PACU trialed a new hand hygiene** program called **All Hands on Deck.** A nonverbal cue was selected by the marketing department and the Nursing Quality Sub Council that was used as a reminder for staff to use proper hand hygiene. While auditing, nurses would use the nonverbal cue to give their peers real time feedback on hand hygiene. PACU's 2018 average for hand hygiene was 77.9%. Since the end of the pilot in June 2019 PACU has been above their goal of 90% every month!" – *Mia Mcrory, BSN, RN, CPAN, PACU* 



"Stickers and posters were placed throughout our units to educate staff. We had drawings as incentive for nurses who reminded care providers to wash their hands. We also had hand washing audits monthly by staff members and identified hand hygiene champions. Why: patient safety! By implementing the All Hands on Deck we have raised our handwashing rates. This new implementation is just one change PACU has implemented that reflects Kootenai's mission statement by being committed to superior quality and patient safety." – Chauntae Peterson, BSN, RN, PACU

Hand Hygiene Compliance
Combined: Hospital + Clinics | Goal = 90.0%

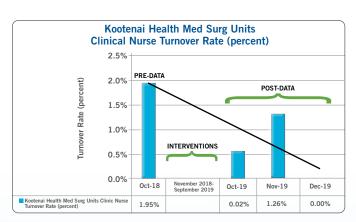


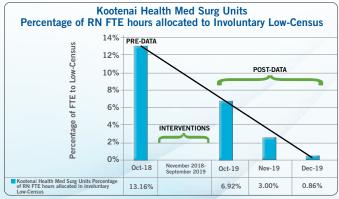
### patient salety. – Chauntae Peterson, BSN, KN, PAC

## **Learning Boards**

Healthcare organizations everywhere struggle to consistently and effectively **track nursing quality improvement** at the unit level and resolve issues from bedside nurses. In an effort to combat this, Kootenai's leadership team innovatively **combined Executive Rounding with Learning Boards**. In 2019, this grew from the original 5-unit trial to include many more units, with a goal of eventually having all nursing units included. Each unit must undergo extensive training prior to going live.

One project that came out of the Learning Boards was inception of an excessive involuntary low census policy. Alyson Peters, RN, 3 North, posted her concern to her Learning Board about how nurses were losing their PTO and/or wages due to excessive involuntary low census. Over the course of the following year, the Staffing Committee and Nursing Operations developed a brand new and very novel way to rectify this problem. The outcome has been a significant reduction in FTEs allocated to low census, and even a reduction in turnover! Additionally, the hours that staff spend doing non-direct-patient-care contribute great value to the organization by providing much-needed quality improvement data.





# Kootenai Heart Clinics

## Connecting with Cardiac Device Patients

"Health care is about relationships. How we connect with patients determines our long-term care, our patients' compliance,



and our business model success. At **Kootenai Heart Clinics**, we review these relationships periodically for the good of patient care as well as our business success. This review revealed that we were only 63% effective in maintaining patient device connectivity follow up at one year in our device implant population. In other words, we were losing roughly one in three patients to device follow up a year later. We needed improved patient connectivity to provide excellent patient care." – *D. Paul Kugler, RN, Kootenai Heart Clinics* 

A **Robust Process Improvement** (R.P.I.) project was completed, which involved nurses, physicians, medical assistants, schedulers, billers, arrhythmia techs, quality, I.T., device vendors, marketing, management, and facilitators. The entire process, from the decision to implant a device to the intended one-year follow-up appointment, was mapped out in "current" and "ideal" states. The whole pathway was rewritten so that each step became consistent, regardless of discipline or clinic location. At the time of R.P.I. Capstone report-out in September 2019, connectivity was 99%! A vast improvement and a huge success, and an attestation to what can be done when everyone is on the same page: patients get excellent care.

## Critical Care Culture Work

"On November 6, 2019 Critical Care

began meeting with Insights
(third-party consultants)
to see what could
be done better
and how the
team could
function more
dynamically.
These
meetings
were meant
to grow the

unit's members

individually and

the team as a whole to realize opportunities for growth and development. Critical Care identified that their current

culture included the ability to work

well together and nurses were very involved within the unit. It was noted that 'Critical Care

nurses are all actively committed to the unit and very passionate

about the patient population.'

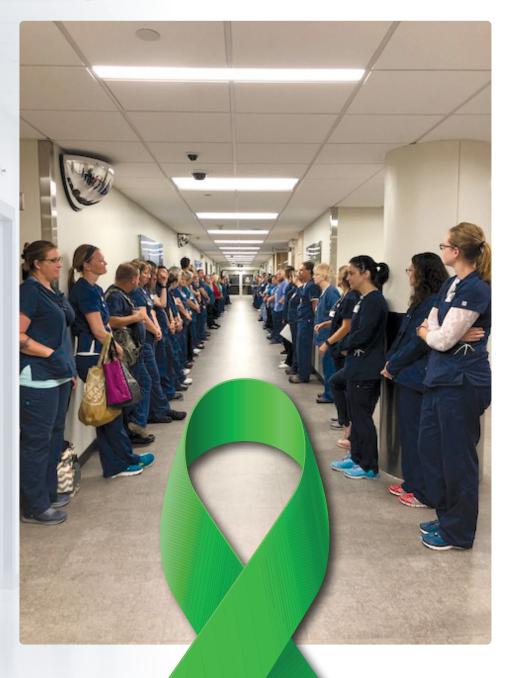
'The nurses are driven to improve our work environment as we grow.'

'The critical care team members are committed to our team and our community.' 'Critical

Care fully recognizes that there are many things to work on and appreciate this opportunity to redesign our future as an ICU.' Since the meeting with Bob and Scott from Insights, Critical Care has initiated cultural work that is taking place to grow our unit. Cultural work teams have been designed and each team has a different category of work. These categories are called 'The Buckets of Work.' A better culture doesn't just happen, it takes commitment and it takes work. A few examples of these buckets include streamlining processes, policies and procedures, hiring/retention/ celebration, education, and staffing. Many of the staff members have committed to these buckets and we continue to grow every day because of it."

- Greg Pedersen, BSN, RN, Critical Care

# How Recognizing those that donate life



"Kootenai Health is at the forefront of cutting-edge medicine in North Idaho, a designated Magnet hospital, a draw to the best and brightest medical professionals in our region, and a place where patients know they can receive safe and compassionate care. Consequently, progress is embraced—and often spearheaded—at Kootenai Health. Combining holistic, cultural, ceremonial and sentimental aspects of humanity into all that we do enables a recognition, and a furtherance, of the disparate but interwoven parts of the whole that make us humans. Such a comprehensive approach recognizes patients as they are, and as they deserve to be, as complex entities, entire beings-and not simply addressing the pure physicality of illness or injury.

Part of this mindset at Kootenai Health is our tribute to those that give even when it seems there is nothing left to give—namely, our organ donors. For those who've selflessly become organ donors due to forethought, compassion, pragmatism or awareness, and have suffered catastrophic trauma from which there is no recovery, their kindness and selflessness is made practically manifest as they save and heal others' lives and liberate frightened families of recipients through

organ donation. To instill life into fading hopes, to regenerate hope itself, the effects of such acts are immeasurable. This is the powerful nature of designating oneself as an organ donor—it is not lost upon those who become recipients, or their families, nor should it be on the rest of us.

To esteem the sacrifice of these individuals, the solemn sanctity and dignity of human life lost, and the piercing grief of loved ones left behind, Honor Walks are held. Hospital employees form two rows of admirers, and fellow grievers, and silently salute the organ donor as his or her last selfless procession plays out. The destination is an OR where the organs will be harvested while there is yet time, but the journey marks something even more profound – a spotlight on humanity. Throats tighten, chests constrict, eyes moisten, tears fall, and staff know—bearing solemn witness to the proceeding—a bit more of the essence of humanity than perhaps they did when they arrived for their shifts. The families of the donors are also honored, their sadness is not lessened, but a purpose is engendered deep within the pit of their souls—to know that their horrible loss was not entirely in vain. Even as the donor, no longer cognizant, is rolled to that hallowed room, we are

made aware of things unquantifiable and precious. We all do what we do, in part, for the sake of compassion and delivery of quality care to those in need. It is incumbent and natural upon us to acknowledge similar acts in others, even as their lives are ended in this world, and their decision enables others to reside here a little longer." - Christina Treller, BSN, RN, CPAN, PACU

#### **PUBLICATIONS**

Coogle, Carlana. What is your Role in Empowering Nurses to Implement Best Practice? RN Idaho Nov 2018 - Jan 2019 41(3); 6-13. (2p)

Wyatt, P., Coogle, C., Glenn, R. Increasing responsiveness scores with CNA care zones. Nursing Management 2019 Mar; Vol. 50 (3), pp. 50-53

Wilson, Marian; Permito, Regan; English, Ashley; Albritton, Sandra; Coogle, Carlana; Van Dongen, Hans P.A.. Performance and sleepiness in nurses working 12-h day shifts or night shifts in a community hospital 10th International Conference on Managing Fatigue: Managing Fatigue to Improve Safety, Wellness, and Effectiveness"., Accident Analysis and Prevention May 2019 126:43-46.

Laurie Hassell, Charlie Gregor, Ann Melvin, Christopher Goss, Robert H. Coker, Cindi Laukes, Sandra Albritton, Jeannine Brant, Paul Amoroso, Nichole Whitener and Katherine R. Tuttle (2020) Feasibility of connecting regional research programs to national multisite trials emanating from the CTSA Trial Innovation Network. Journal of Clinical and Translational Science http://dx.doi.org/10.1017/cts.2019.437

Elizabeth L Ciemins, Brenda L Mollis, Jeannine M Brant, Laurie A Hassell, Sandra Albritton, Paul Amoroso, Angela Lloyd, Jodi M Smith, Bethann M Pflugeisen, Katherine R Tuttle and Laura-Mae Baldwin (2019) Clinician Engagement in Research as a Path Toward the Learning Health System: A Regional Survey Across the Northwestern United States. Health Services Management Research, 1-10. https://doi.org/10.1177/0951484819858830

Ferguson, W., Coogle, C., Leppert, J., Odom-Maryon, T. (2019) Local Anesthetic Systemic Toxicity (LAST): Designing an Educational Effort for Nurses that will LAST. Journal of PeriAnesthesia Nursing, Vol 34, No 1 (February), 2019: pp 180-187

#### POSTER PRESENTATIONS

Moriah L. Cason, Samantha M. Riedy, Ashley F. English, Patricia Morgan, Maddy Himmel, Joshua Burton, Sandra Albritton, Marian Wilson. (2019) Survey of Health Care Workers' Break Use and Sleep Interruptions at Two U.S. Hospitals. Poster Presentation The National Institute for Occupational Safety and Health (NIOSH) 2019 Coeur d'Alene, ID

Teresa Bigand, Moriah L. Cason, Tullamora T. Diede, Marian L. Wilson. Dietary Intake of Registered Nurses Working Nights Compared to Days off Work The National Institute for Occupational Safety and Health (NIOSH) 2019 Coeur d'Alene, ID

Tullamora T. Diede, Marian L. Wilson, Moriah L. Cason, Carlana Coogle, Teresa Bigand, Josh Burton, Leah Furman Qualitative Interviews of Registered Nurses' Experiences Taking Breaks on Night Shift The National Institute for Occupational Safety and Health (NIOSH) 2019 Coeur d'Alene, ID

Mills, Ken, McIlvain, Sheri, Ealy Ann. Patient Throughput Redesign Mayo Clinic Leadership Conference April, 2019

White, Denise and Ogorek. Denise. Implementation of Post-discharge Phone Calls at a Youth Acute Behavioral Unit Sigma Theta Tau Gonzaga University. Abstract accepted.

Smith, Meghan, Anaya, Natalie. The Powerful Push That Brought Engagement and Joy to an Obstetrics Unit AWHONN June, 2019 Atlanta, GA JOGNN 2019; Vol. 48, Supplement 3S

#### **PODIUM PRESENTATIONS**

Carlana Coogle November 20-22, 2019 Awareness Matters: Improving Healthcare Workers' Self-Efficacy, Knowledge, Skills and Attitudes related to Mental Illness and Suicide Prevention Fuld Institute for EBP National Summit in Columbus, Ohio

Sandra Albritton May 7, 2019 Clinical Research Conference, Boston, MA: Conducting Research in a Community Hospital Setting: A panel discussion

Sandra Albritton October 9, 2019 ANCC Magnet Conference - Orlando FL: Using Research to Inform Clinical Financial Decisions

Wendy Ferguson April 29, 2019 Injury Prevention Professionals Symposium Annual Conference in Las Vegas "Stop the Bleed: Teaching and Collaboration in a Rural Setting Community"

#### **AWARDS**

2019 - Sandra Albritton - University of Washington Institute of Translational Health Sciences Carlos de la Pena Award for Contributing to Advance Translational Science for Work with the Idaho Senate Bill 1097, Coverage for Participants in Clinical Trials

#### **2019 NEW DEGREES & CERTIFICATIONS**

Natalie G. Anaya, CEFM
Tara Avriett, BSN
Teresa Bandy, BSN
Nicole Bates, BSN
Jonathan Beecher, BSN
Brenda J. Boughton Mills, CCM

Eva Bradburn, RNC-OB Katiuska A. Brewer, RNC-OB

Sarah Byrne, BSN Chelsea Cameron, BSN Kristine Carr, BSN

Evelyn B. Considine, CNN
Crystal Cronoble, BSN
Ami Currie, BSN

Natalee A. Demers, CEN Alisha R. Dickey, LRN Sharon Dutton, BSN Jordan A. Fiorini, CMSRN

Hailey Foster, BSN

Teresa M. French, CHFN Greg L. Fullmer, PCCN Nicole Halby, BSN

Amanda K. Herzberg, CFRN

Hannah Hobart, BSN

Douglas D. Holcomb, CCRN Elizabeth N. Hubbard, RNC-OB

Chloe Hutter, BSN Daryn Jett, BSN

Klayton R. Johanson, CCRN Kristen M. Jordan, CMSRN Makayla Kaufman, BSN Kelsi Kemper, BSN

Deborah Kitselman, RN-BC

Stacey Krentz, BSN
Jessica M. Lenon, RN-BC
Karen D. Leoni, CWCN
Rachel Livingston, BSN
Ira Lopachuk, BSN
Taylor Lundy, BSN

Morgan Marshall, BSN Jenae Martin, BSN Snowy Martin, BSN Jennifer Manalis, BSN

Jennifer Manalis, BSN Windy Manzardo, BSN Mia I. Mcrory, CPAN Rene L. Miles, RN-BC Jennifer Miller, BSN Michael Montreuil, BSN

Hannah Mort, BSN Timothy A. Mroz, RN-BC

Alaina M. Muehlhausen, CEN Lydia Myers, BSN

Nikki Nicholson, BSN Jason Ollis, BSN Bailey Opsal, BSN Christine Oxenrider, BSN Brayden Panttaja, BSN

Chrissy Paul, BSN Lori A. Pegg, CPAN Kristine D. Perry, ACM Macie Peterson, BSN Sheena R. Ragan, RN-BC

Kara Rantala, BSN
Jace P. Robins. ACM

Julie A. Robinson, CNOR

Emily E. Roser, CEN Lisa D. Rubinsky, ONC

Rachel D. Sandford, CGRN

Hannah Schrader, BSN Katy A. Short, CCRN

Kristin J. Sims, OCN

Kari Sloat, BSN

Robert Smotherman, BSN Samantha Sperber, BSN Jane G. Spohn, CEN Caralea A. Tanner, CNN Abigail Taylor, BSN

Nicholas M. Taylor, RN-BC

Kristina L. Tessendorf, RNC-OB

Rhonda Thompson, BSN
Jessica B. Tith, RNC - OB
Kara L. Torgerson, RN-BC
Sherry L. Vogel, CEN

Cathy R. Waddell, RN-BC Jacque L. Walker, CAPA Payton Weakland, BSN

Rochelle Wiedenhoff, BSN Terri L. Yoshida, RN-BC

Sabina Young, BSN Sarah Young, BSN

#### **BSN Goals**

Organization-wide progress toward increasing the percentage of nursing workforce educated at a BSN level or higher continues. Based on empirical evidence of improved patient outcomes and the Institute of Medicine's recommendation, Kootenai Health is striving to meet the call for 80 percent of nurses to have a BSN or higher.

BSN Goals	2015	2016	2017	2018	2019	2020
Actual Achieved Year End - Clinical Nurses	52.0%	54.2%	57.9%	66%	70.8%	
Actual Achieved Year End - All RNs	54.7%	58.1%	61.6%	69.4%	74.3%	
Kootenai Health BSN Target %	48%	53%	58%	65%	70%	72%

Certification Goals	2018	2019	2020
All Eligible RNs	46.08%	57.9%	
Kootenai Health Certification Target %	NA	49%	≥ 51%

## Recognizing our GEMS: Nursing Excellence Program

The Nursing Excellence Program team used staff input to make enhancements to the program for 2019 and set a goal to increase participation in year three. 144 awards (up from 101 in 2018 and 60 in 2017) are being presented for the 2019 year. Not only did the individual awards increase but the number of units that participated also increased. This year 27 different units/departments participated compared to 21 units/departments last year. Once again, Nursing Excellence Program submissions demonstrated that Kootenai Health nurses are truly gems - doing inspiring work, delivering great care and contributing to the health of our community!

NAME	UNIT	AWARD	NAME	UNIT	AWARD
Caralea Tanner	1N	Star Garnet	Mariah Toms	CCU	Opal
Christina Johnson	1N	Star Garnet	Matthew Owen CCU		Opal
Dena Payne	1N	Star Garnet	Muhammed Nizamani CCU		Opal
Lynn Bui	1N	Star Garnet	Philip King CCU		Opal
Irina Lopachuk	1N	Topaz	Wendy Roller CCU		Opal
Amanda Johnson	2E	Topaz	Alaina Muehlhausen	CCU	Star Garnet
Desiree Florea	2E	Topaz	Katie Barbera CCU		Star Garnet
Karen Bryan	2E	Topaz	Jenna Hall	CCU	Star Garnet
Rebecca Perry	2E	Topaz	Sara Olsen	CCU	Star Garnet
Samantha McMillan	2E	Topaz	Lex Silvrants	CCU	Star Garnet
Glesni Neall	2E	Opal	Michele Goode	CCU	Star Garnet
Jeff Sample	2E	Star Garnet	Rachel Otey	CCU	Star Garnet
Kim Martin	2S	Topaz	Jamie Myler	CCU	Star Garnet
Roxanne Gadberry	2S	Opal	Dylan Williams	CCU	Star Garnet
Jessica Wardak	E East	Topaz	Matthew Queral	CCU	Star Garnet
Katherine Gwin	3 East	Topaz	Michael Little	CCU	Star Garnet
Christie Koziol	3 East	Star Garnet	Sherry Vogel	ED	Opal
Elizabeth Cameron	3 N	Topaz	Katelynn Weatherly	ED	Opal
Matthew Douglas	3 N	Opal	Christopher Gibbar	ED	Opal
Rebecca Glenn	3 N	Star Garnet	Maddy Marinos	ED	Opal
Katherine Stang	3 S	Opal	Farrah Arneson	ED	Opal
Garrett Glover	CCU	Topaz	Crystal McCown	ED	Star Garnet
Gregory Pedersen	CCU	Topaz	Megan Lorincz	ED	Star Garnet
Katherine Whitt	CCU	Topaz	Stanley Foster	ED	Star Garnet
Kelly Goertzen	CCU	Topaz	James Lyons	ED	Star Garnet
Klayton Johanson	CCU	Topaz	Kacie Klein	ED	Star Garnet
Melissa Croft	CCU	Topaz	Jessica Lenon	Heart Center	Opal
Vanessa Albert	CCU	Topaz	Belinda VanDitto	Heart Center	Star Garnet
Adam Wabs	CCU	Opal	Michele Brown	Heart Center	Star Garnet
Bailey Camp	CCU	Opal	Lori Jackson	Infusion Services	Topaz
David Irving	CCU	Opal	Nancy Clough	Infusion Services	Topaz
Douglas Holcomb	CCU	Opal	Anne Bear	Infusion Services	Opal
Emily Farness	CCU	Opal	Jodie Miller	KC Endoscopy	Opal
Janelle Sladek	CCU	Opal	Kalie Buroker	KC Internal Medicine	Topaz
Jessica Daugharty-Sterner	CCU	Opal	Mallory McConnaha	KC Internal Medicine	Opal
Jessica Milholland	CCU	Opal	Carolyn Dolan	KC Nephrology	Topaz
Katherine Hurley	CCU	Opal	Rosie Willy K	C Plastic & Rec. Surgery	Topaz



# Nursing Vision Statement

Kootenai Health nursing professionals will be recognized nationally as leaders of innovation and excellence in the delivery of evidence-based care across the health care continuum.

### A Lot of Movement Happened in 2019!

After construction of 3 East was completed:

- March 28 3 South moved to 3 East
- May 31 3 South moved back to their newly renovated unit
- June 3 Four rooms opened on 3 East as NEW Epilepsy Monitoring Unit and 3 North moved to 3 East
- August 19 Pediatrics moved to 3 North
- October 1 Pediatrics and 3 North moved back to their newly renovated units

All of these coordinated moves required a lot of flexibility from nursing staff and their efforts are truly appreciated! Patients, nurses, and non-nursing staff agree that the 3 South, 3 North, and Pediatrics renovations were needed and now 3 East is fully operational!

