

We Are Magnet Strong

2021 NURSING ANNUAL REPORT



KootenaiHealth



Joan Simon, CNO

An extraordinary accomplishment during an extraordinary time: “Nurses at Kootenai Health achieve its fourth Magnet® designation during a global pandemic while under crisis standards of care”.

You might ask yourself the question, “How can this be?” In times of extraordinary stress, is it the principle of magnetism that allows a structure to hold, or is it the structure itself – combined with the commitment to self-gov-

ernance and professional practice – which allows a magnetized culture of excellence to exist even in times of unprecedented stress?

The strength of Kootenai Health’s Magnet culture was validated for me in learning about the many triumphs of our nurses in the face of struggle. No matter how unfortunate, no matter how challenging, they carried on to care for this community. I am convinced our nurses’ response was not in reaction to the challenges we faced, but rather from our culture and the foundational work of our professional nursing staff and nursing leaders.

Surviving the last two years in a pandemic became both a reflective time and a call to action. It emphasized the importance of sharing our experiences and learnings with others. In 2022, we will have much to do to restore our workforce and our health care system. The work of nurses will not be easy, but it is essential to ensuring a healthy and thriving organization that is ready to serve. I could not be more hopeful of the opportunities ahead; our nurses have the knowledge, experience and strength to leverage the vitality of our workforce and actualize our vision of being **one connected team**.

In 2021, as we have come to expect, our nurses continued their work on improving professional governance and also added new programs to support our community. I am proud to share those accomplishments with you in this annual report.

In order to ensure a stable nursing workforce during a time of national crisis, our Nursing Education Specialist (NES) team developed and implemented innovations to help supersize our nursing pipeline. They expanded our existing nurse residency and nurse fellowship programs and started a new program for nurse apprenticeships. This allowed student nurses to gain clinical hours toward graduation while also supporting our nursing staff on the clinical units. Enhancing our numbers of available preceptors was critical to the success of these programs. Many of our experienced nurses rose to that challenge taking on the additional work necessary to support the pipeline of newly graduated nurses.

Another nurse-led innovation was offering monoclonal antibody infusions to ensure our patients had early access to therapies

that could keep them out of the hospital. Being a novel therapy, our nurses quickly organized the tools and secured the knowledge they needed to offer this service in advance of it being available at other community-based locations.

As the pandemic raged on, staffing shortages impacted specialty teams across the country including our dialysis partner, Fresenius. To solve the problem, our already stretched critical care nurses took on learning a new technology called Tablo in order to provide dialysis in the critical care unit. Taking on this work has allowed us to safely care for this vulnerable population and ensure timely access to care.

Our Professional Nursing Council (PNC) continued its work to further expand professional governance. Our Director of Advanced Practice Professionals, has helped draft new job descriptions and bylaws providing for an expanded role of APPs in medical governance. NPs and PAs now have voting membership roles in nursing and medical committees which govern their practices. Several ambulatory nurse leaders are now embedded in each of the Kootenai Clinic divisions to help our ambulatory nurses in the design of their practice by specialty.

Additionally, our night shift nurses now have a voice of their own to address their unique needs with the launch of the long awaited, Night Shift Council.

Our nurses and nurse leaders also helped to stand up many new services for our community including the Acute Care Surgery model that is integral to our Level II designation as a Trauma Center by the American College of Surgeons. Also, great progress has been made by our Geriatric Nurse Specialist in bringing best practices to bedside nurses for our aging patient population.

It is important to note that during our Magnet visit, in which we were awarded this prestigious designation for the fourth time, we were also recognized with five exemplars for extraordinary accomplishments, a comparison made solely against other Magnet hospitals. This is the highest number of exemplars ever awarded to Kootenai Health!

It is often said that when teams are faced with a challenge that appears insurmountable it can serve to separate those who will merely survive from those who will thrive. Our professional nursing staff has shown others what it takes to thrive. They have remained a connected team even when external forces beyond their control sought to pull them apart; proof that **Kootenai Health IS Magnet!**

Without the support of our community, providers, colleagues, administration and our board, this work would be insurmountable. Thank you for your continued trust and unwavering support, which allows us to do our best in caring for patients.

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

Magnetism is the class of physical attributes that are mediated by magnetic fields. Electric currents and the magnetic moments of elementary particles give rise to a magnetic field, which acts on other currents and magnetic moments. The most familiar effects are when materials which are strongly attracted by magnetic fields can be magnetized, producing permanent magnets, producing magnetic fields themselves.

Kootenai Health Achieves Magnet® Re-designation - THE GOLD STANDARD FOR NURSING EXCELLENCE

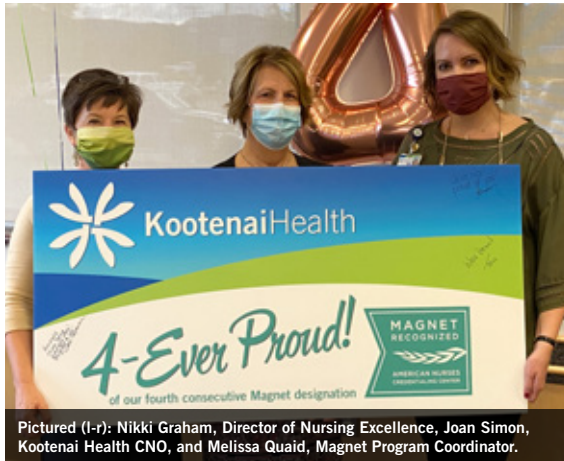
This year marks Kootenai Health's fourth consecutive Magnet® designation by the American Nurses Credentialing Center (ANCC) recognizing nursing excellence. Only 563 hospitals have achieved Magnet® recognition world-wide, and even fewer – just 137, have achieved Magnet®

four or more times. Kootenai has held Magnet® status since 2006 and is one of only two Magnet® hospitals in the state of Idaho. Magnet® designation is the highest and most prestigious international distinction a health care organization can receive for nursing excellence.

The Magnet Recognition Program® recognizes health care organizations for quality patient care, nursing excellence and innovations in professional nursing practice. To be recognized as a Magnet® hospital, health care organizations must pass a rigorous and lengthy review process demanding widespread participation from leadership and staff. "I am incredibly proud of our nursing staff and the entire health care team that made this achievement possible," said Kootenai Health Chief Nursing Officer, Joan Simon.

This re-designation is particularly well deserved. Our nurses have remained

vigilant throughout the pandemic. They ensured exemplary care endured despite the challenges, which is a truly amazing achievement! Without a doubt, our positive culture defined by the engagement and empowerment of nurses was the catalyst to ensuring the delivery of safe, high-quality care resulting in this prestigious award.



Pictured (l-r): Nikki Graham, Director of Nursing Excellence, Joan Simon, Kootenai Health CNO, and Melissa Quaid, Magnet Program Coordinator.

In order to retain Magnet® status, organizations must reapply every four years. The process includes the submission of an electronic application, followed by written documentation and evidence regarding patient care and outcomes. Following the documentation review, qualifying organizations must undergo an intensive site review by Magnet® appraisers. This application cycle, there were 94 required examples, which demonstrated Kootenai's commitment to improving patient satisfaction, nursing satisfaction, and quality patient care. Five of the examples submitted received additional accolades from the Magnet® review committee:

"Magnet® is the highest honor in nursing. This recognizes nurses for the exemplary outcomes of care delivered each day here at Kootenai Health."

– Joan Simon, CNO

1. Structural Empowerment:

Nursing at the organizational level achieved greater than 51 percent in professional nursing certification.

2. Exemplary Professional Practice:

The organization demonstrated a positive impact in their region with the involvement of their patient and family advisory council. There are 34 trained Honoring Choices Advance Care Planning (ACP) facilitators from 11 regional agencies providing ACP support for patients and community members. As of August 2020, the facilitators held 1,522 ACP conversations of those 58 percent resulted in a completed advance directive.

3. **Unit-level data for catheter associated urinary track infection** outperformed the vendor's national mean and comparison cohort for the majority of eight quarters on 100 percent of the units.

4. **Ambulatory Care - Return to Care** data outperformed the median for the majority of eight quarters on 100 percent of the clinics.

5. **Unit-level data for Care Coordination** outperformed the national mean and comparison cohort for the majority of eight quarters on 100 percent of the units.

Magnet® recognition has been shown to provide specific benefits to hospitals and their communities, such as higher patient satisfaction and higher job satisfaction among nurses.

We are honored and excited to receive Magnet® status," said Kootenai Health

CEO, Jon Ness. "This achievement is a validation of the professionalism, teamwork, and compassionate patient care Kootenai Health is known for."



Magnet4Europe

As a Magnet® designated hospital, Kootenai Health enjoyed yet another honor when it was selected for Magnet4Europe, a project funded by the European Union to improve mental health and wellness among nurses, doctors, and other medical professionals in European hospitals. Just one percent of U.S. hospitals are chosen for this prestigious opportunity.



“We’re one of only 70 hospitals chosen to do this, when the opportunity came, we said, ‘Heck yeah, we want to do that.’”
 – Nikki Graham

Our involvement in Magnet4Europe provides an international platform for Kootenai Health nursing professionals to be recognized as leaders of innovation and excellence in the delivery of evidence-based care across the health care continuum. Kootenai nurses’ have the opportunity to mentor and role model the transformative nursing practices that make our nursing work environment successful one-on-one with a clinical nurse at our “twinning” hospital in Belgium through virtual meetings, emails exchanges, and inviting them to attend unit and hospital wide nursing councils. Our twinning hospital, Algemeen Ziekenhuis Vesalius, known as AZ Vesalius,

is comparable in size to Kootenai Health with 326 inpatient beds for the Tongeren community of 60,000 and is one hospital in a small system of three. Their primary interest in the Magnet4Europe Consortium is to improve their nurse’s work environment and wellbeing. Through Magnet4Europe, Kootenai Health and AZ Vesalius have been performing a gap analysis to determine what steps are necessary to improve their nursing structures, as outlined in the Magnet® Model. The goal of this mentorship collaboration is to improve both Kootenai Health’s and AZ Vesalius’ work environment and patient outcomes through evidence-based practice and making their bold nursing voices heard.

Building Future Nurse Leaders

Nursing leadership roles continue to increase in scope and complexity in the face of changing workforce demographics, healthcare settings, and regulatory requirements.

The Kootenai Aspiring Nurse Leader (ANL) Program mentors nurses who are interested in transitioning from the bedside into future leadership positions and is designed to build essential skills necessary to thrive in diverse nursing leadership roles.

High-performing BSN prepared RNs who demonstrate natural leadership skills are selected for program participation based on application essays and manager recommendation.



Mallory McConnaha

Mallory has been an active member of multiple committees at Kootenai Health, including the Professional Governance Steering Committee, Nursing Practice Council, and the Kootenai Clinic Nursing Practice Council. “Mallory is a natural leader and demonstrates honor, patience, kindness, and intelligence every single day in her role. Her character, nursing skills, and natural leadership ability will make her a solid leader, and the kind of leader that Kootenai Health would want in the organization” said Kayla Gant, Supervisor, Internal Medicine, Post Falls Clinic. While in the ANL program, Mallory took on a new position as an Ambulatory Nursing Practice Specialist (ANPS). She has a passion for professional governance and is working with clinical nurses and the ANPS team to overhaul the council structure in Kootenai Clinic.



Travis Samsky

Prior to his acceptance into the ANL program, Travis was a member of the Specialty Procedures team and advanced quickly as a leader on the unit. He joined the department’s unit practice council and became their representative for the Nursing Work Environment Council. “Travis has demonstrated great leadership qualities as one of the unit charge nurses – promoting patient centered care, problem solving, developing relationships with team members, and navigating challenging work flows” said Gina McCloskey, Nurse Manager, Specialty Procedures Area. Since

graduating from the ANL program, Travis has become the nurse manager for 3N and is currently tackling quality improvement around nurse sensitive indicators and patient care outcomes.

Leadership Awareness

- Leadership at the Foundation
- Change Management
- Leadership Resilience
- Emotional Intelligence
- Effective Communication
- What Motivates Me

Developing Others

- Effective Performance Feedback
- Motivate With Meaning
- Professional Practice
- Robust Process Improvement

Nursing Operations

- Financial Stewardship
- Budget & Staffing Fundamentals
- Project Management
- Strategic Thinking
- Just Culture
- Applied Project

Hillary Harmon, RN Magnet Story



Hillary Harmon

I had the honor of being selected to attend the National Magnet Conference for nurses this year. As I think back on my experience, I have an inspiring feeling. The conference included many breakout sessions which I had the opportunity to attend based on my individual interests. The other Kootenai nurses and I gathered in a few general sessions throughout the conference that included all 6,500 nurses in one auditorium. We listened to inspirational speakers from across the country. During one evening towards the end of the conference, the Kootenai nurses gathered with our leaders Joan Simon and Nikki Graham. We each shared what we had learned and experienced in our breakout sessions. This was my favorite part of the entire conference. As all 19 nurses began to share, I sat in awe of their intelligence and dedication to our organization. Through all the turmoil and stress of COVID we have endured over the last one and a half years, they are still inspired to improve, grow, and dedicate themselves to Kootenai Health. These nurses I sat with that evening are our future leaders and as an “older” nurse they inspired me to see hope for our hospital, care of patients, and innovations/growth to come. The spark is still in us nurses and this experience re-assured me of this. If you have an opportunity to attend National Magnet Conference, I guarantee you will have a positive experience.

Ambulatory Nursing Practice – A New Team Structure!

Nearly every patient admitted to the hospital or seen in our procedural care areas spends the vast majority of their lives being cared for by our team members at Kootenai Clinic! These highly specialized clinics employ a diverse group of nurses, providers, medical assistants, and other amazing healthcare associates. In fact, Kootenai Clinic is growing continuously, just as all ambulatory care settings throughout the healthcare industry. This trend will most certainly continue in the future! To adequately support our nurses and all care providers in Kootenai Clinic, a new team was created in our Nursing Excellence department in 2021! Nikki Graham, Executive Director of Nursing Excellence, worked with the executive leaders at Kootenai Clinic to design and develop a novel practice oversight structure to support excellent patient care throughout our clinics. They designed and advocated for a team of five highly qualified nurses to align with the divisions of Kootenai Clinic. One Ambulatory Nursing Practice Specialist (ANPS) is assigned to each of the divisions: Primary Care, Medical Specialties, Surgical Specialties and Hospital Services, and Cardiovascular Services.

During 2021, Graham filled all five positions (which includes a manager). This team was instrumental in successfully coordinating the Magnet site visit for Kootenai Clinic, which involved visits to each clinic location. Other exciting accomplishments include launching a Clinical Excellence Program for licensed practical nurses and medical assistants, establishing routine rounding with all clinic locations, launching ambulatory-specific “Education you Can Chew On” series, drafting of a medical assistant scope of practice, and beginning a professional governance refresh in ambulatory care so that all nurses in the organization have the opportunity to participate in practice reflection and owning their practice. Future work includes standardizing onboarding and precepting, increasing student clinical placement, and opening ambulatory positions to nurse residents!

Advance Practice Nurses Turn Their Bold Voices Into Action

In 2021, the advanced practice registered nurses (APRN) of Kootenai Health, led by Angela Youmans, Director of Advanced Practice Professionals, developed and implemented the Advanced Practice Professionals Council (APPC) which includes all APRNs and physician assistants (PA). The council has been instrumental in elevating practice and giving advanced practice professionals (APPs) a voice within the organization. In 2021, as a direct result of the council’s work, four APPs were appointed as voting members on each of the medical staff committees (credentials, multispecialty peer review, medical executive committee, and provider wellness).

“We have worked very hard in completely re-writing the Kootenai Health APP policy document. Re-writing our privileging documents has allowed us to elevate our practice and work at the top of our scope, education and licensure,” – Angela Youmans

“In doing this, we are increasing access to care for patients, allowing APPs to work at the top of their scope and practice as well as improving satisfaction in their work,” said Youmans. Many Kootenai APPs including Megan Strowd Baar, Faith Krull, Connie Keibler, Sarah Pierce, Tyler Marshall, and Char Harris, have been an integral part in the development of the council and assisting with this elevation of advanced practice work.

Future council work includes hiring of division lead APPs within Kootenai Clinics to solidify APP directed leadership and practice throughout the organization.

Our Nurses Get Recognized



Nikki Graham

Association for Nursing Professional Development Change Agent Award

Nikki Graham is the Director of Nursing Excellence at Kootenai Health, an ANCC Commission on Magnet® Recognition designated healthcare system in Northern Idaho. Nikki has oversight of nursing practice, nursing education, professional governance, the Magnet® program, student services, and patient education. She is an active member of Association for Nursing Professional Development and is board certified in Nursing Professional

Development, Nurse Executive-Advanced and Psychiatric Mental Health Nursing. She is also an active member in American Organization for Nurse Leaders and Nurse Leaders of Idaho.

Since her arrival in the fall of 2019, she has built a strong nursing education team, redesigned and implemented transition to practice programs, and initiated significant improvements across the Kootenai Health Professional Governance structure. Nikki is passionate about nursing practice and strives to empower nurses in practice ownership, specifically evidence-based practice, professional governance, and practice reflection. She is excited to go to work every day knowing her job is to make things better for nurses. Through her enthusiasm and ability to set a common vision, she inspires others to embrace change.



Ann Ealy

Daisy Nurse Leader Award Winner

Ann Ealy, Director of Nursing Operations and Specialty Teams, has been an inspiration to others as she demonstrates her true passion for enhancing patient care and staff engagement. Ann has successfully completed many projects and work-flows systems to improve patient care delivery at Kootenai Health. She has contributed to many successful initiatives including implementation of the Rapid Response Team, activation of the labor pool, operationalizing of the bed management system and

improvements efforts related to staffing/scheduling. These initiatives have assisted in early interventions focused on stabilizing patients in rapid decline, decreased wait times for placement, and enhancement of patient throughput allowing improved capacity, patient satisfaction, and a decrease in wait times. In addition, she has done focused efforts regarding outlying facility partnerships allowing our community to receive care in our region through the success of the Transfer Center.



Ann Ealy and Joan Simon, CNO

Soroptimist Woman of Distinction Award

Ann also has the distinction of being named a Soroptimist Woman of Distinction. For the past 39 years, Soroptimist has presented Women of Distinction awards to women whose dedication to community service and achievements in their respective fields of work and interest set them apart from others. Ann was nominated for her efforts to support our community during the COVID-19 pandemic. She helped make vaccination available to interested community members. She built a creative workforce through an internal and external labor pool and navigated complicated hospital capacity issues to support the greatest number of community members who required hospitalization.



The DAISY Foundation, created to express gratitude by a family that experienced extraordinary nursing, is the international leader in meaningful recognition of nurses. Since 1999, The DAISY Foundation has been honoring nurses who provide above-and-beyond compassionate care to patients and families. Expressions of gratitude from patients and families go a long way in helping nurses cope with their high-stress work and help keep burnout at bay. DAISY proudly honors Nurses wherever they practice, in whatever role they serve, and throughout their careers.

Individual DAISY Award Winners

Adriane Albertowicz, Cancer Services
Betsy Boyer, Behavioral Health
Alex Brewer, Women's & Children's
John Clements, Critical Care
Eric Cliff, 3N
Crystal Cronoble, Critical Care
Rebekah Davis, Pediatrics
Kerstin Ellison, PACU
Cindy Hale, Wound & Ostomy Care
Jessica Khosravi, Critical Care
Cheryl Shaw, 2CCU



RN Residency Program Redesign

Kootenai’s Nurse Residency Program bridges the gap from novice nurse to competent professional nurse by providing a support structure using evidence-based practices such as extended orientation, socialization, enculturation, and supplemental workshops/trainings.

Current literature on nurse residency programs demonstrated residence-prepared nurses have increase job satisfaction and retention compared to their non-residency counterparts.

The Sparks That Now Burn Strong, Nightshift Council Ignites

It is no secret that night shift comes with many unique challenges. “The staff not only have to contend with limited resources, but working this schedule often leads to a feeling of disconnect from the everyday hospital operations” stated Nicole Bates, Nursing Education Specialist. To optimize Kootenai’s commitment to strong shared governance through all nursing voices, Natalia Summers, and Jacob Loe worked with Nursing Excellence Leadership to develop the scaffolding for a nightshift council with the aim of fostering a sense of connectedness, provide a platform to enact change, and encourage professional development in our mission-critical night shift nursing team. Through the work of night shift council, challenges were identified regarding nurse to provider communication and utilization of resources. The members worked together to foster interprofessional relationships and created tools to be able to provide the best quality of care in a timely manner.

Additional accomplishments include:

- Determined the purpose and responsibilities that culminated into council charter.
- Increased employee participation from seven members in July to 16 in December.



Pictured (l-r) front row: Taylor Nowlin, Amy Anderson, Kaydah Parker, Savannah Howie, Brianna Suto, Nikki Graham, Maura Cash (middle row): Joan Simon, Lexis Walthall, Brett Kralman-Shoemaker, Brittney Baylor, Amy Cederquist, Mallory Urban, Madison Johnson, Alex Hagar (back row): Brad Nelson, Breanne Beale, Heide Miranda, Ashley Zych, Tara Dunkerson, Darby Litzko, Anni Boudro, Allyson Patterson (not pictured: Laura Regan, Brooke Finlay).

In 2021, 42 RN residents graduated from the program with a 91 percent one-year retention rate compared to the national first-year RN retention rate of 70 percent. Along with four residency cohort graduations in 2021, 73 nurse residents started in five new cohorts. RN residents and residency alumni are working in medical surgical departments, the Nursing Resource Team (NRT), Behavioral Health Youth, Behavioral Health Adult, Addiction Recovery Services, emergency department, operating rooms, Critical Care, and Women’s and Children’s service line.



RN Fellowship Program Grows

Kootenai Health’s fellowship program provides support to experienced nurses transitioning into a new practice setting by ensuring nurses are offered both practice-based experience and supplemental activities to promote professional growth and development. Nurse fellowships are not common in the United States and an organization willing to invest in a fellowship indicates a high level of support for experienced nurses. Kootenai Health started the first nurse fellowship program in critical care (CC) in the fall of 2020 with four nurses. The fellowship program has seen substantial growth over 2021 with fellowship opportunities expanded into the emergency department (ED), adding 24 new nurse fellows into this specialty setting. Unique this year, ED and CC fellows spent time shadowing in each other’s departments to gain exposure focusing on the care needs of patients transitioning out of the emergency department and into critical care, strengthening collaboration between the critical care units and the emergency department.

Curriculum was redesigned to address patient care from the emergency department through a stay in critical care and collaboration between the units was fostered with simulation, group discussion and reflection, and an opportunity for RN fellows to shadow in both the ED and CC.

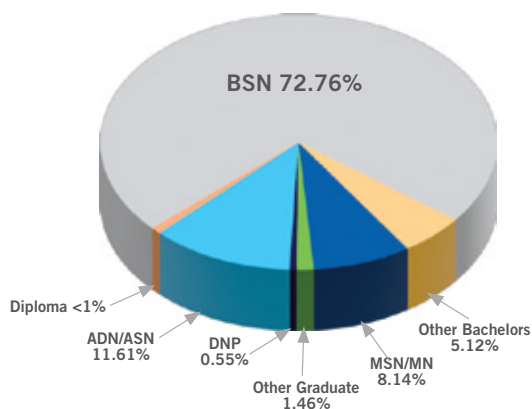
This year a total of 27 RN fellows have successfully completed the combined ED and CC RN fellowship programs in addition to the program’s 86 percent nursing fellow retention rate since inception!



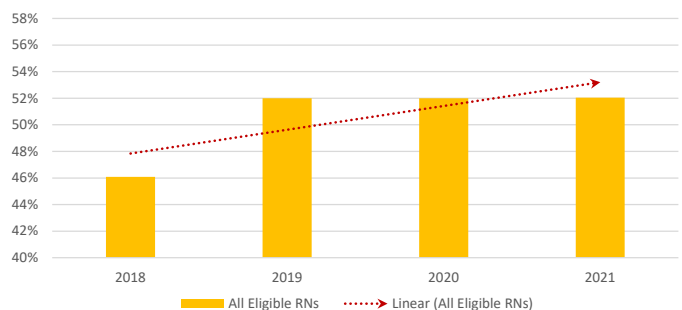
Raising the Bar on Professional Development

Kootenai Health continues to advocate and financially support nurses continuing their education through specialty nursing certification and academic degrees. Based on empirical evidence from the Institute of Medicine (IOM), Kootenai Health strives to meet the call for 80 percent of our nurses to hold a BSN degree or higher. In 2021, **84.1** percent of Kootenai nurses met this challenge, surpassing the IOM’s recommended goal. Additionally, our year-over-year increases in the number of specialty-certified nurses strengthens our nursing performance and builds the clinical expertise our patients expect.

2021 Nursing Workforce Educated at a BSN Level or Higher



% Specialty Nursing Certification Held by Certification Eligible Nurses



Kootenai Health certification goal $\geq 50\%$ for all certification eligible nurses

Trauma Program

The Trauma Program started 2021 forward-focused and worked collaboratively with a newly developed trauma steering committee and trauma consulting firm to achieve Kootenai Health’s goal of becoming an American College of Surgeons (ACS) Verified Level II Trauma Center. Among the recommendations from the gap analysis was overhaul of the trauma performance improvement process.

The new process starts with primary review of all trauma patients by trauma performance improvement (PI) coordinators, nurses with experience and education in evidence-based trauma practices.



Chart review by the trauma PI coordinator is the first step in identifying trends or opportunities to improve the process of care delivery to future trauma patients and is the foundation of a strong trauma performance improvement and patient safety (PIPS) program. When nursing identified issues that warrant multidisciplinary actions, cases are escalated to the multidisciplinary trauma program peer review committee for review and action-oriented loop closure.

Additionally, the trauma program nursing leadership reviewed and redesigned trauma revenue operations in efforts to increase revenue and promote compliance to optimize reimbursement. Trauma program nurses worked collaboratively with the Emergency Department (ED) Nursing Education Specialist to develop and implement mock traumas for the ED nurses and physicians.

The Injury Prevention Program continued to offer preventative services through an innovative delivery method, aligned with continued COVID restriction, through the use of in-class offerings, hybrid offerings, and drive-thru events. Utilizing these measures, they were able to serve 1,433 community members. Impressed by this unique approach, the American Trauma Society Injury Prevention Symposium and Montana EMS and Trauma Systems invited the Injury Prevention Coordinator to present at their annual conferences.



Trauma Program Team



Dershi Bussey,
Director of Emergency
and Time Sensitive
Emergencies



Ashley Miller,
Trauma Program
Manager



Luke Emerson,
Trauma Performance
Improvement Coordinator



Shirley Miller,
Trauma Performance
Improvement Coordinator



Wendy Ferguson,
Injury Prevention
Coordinator



Jennifer Rennison,
Trauma Data
Analyst/Registrar

Geriatric Care Program

Kootenai Health Geriatric Nurse Practice Specialist, Linda Henrich, and the dedicated nurses and occupational therapists on 3 North (3N) have been working to



Pictured (l-r): Ashley Haug, Linda Henrich, Geriatric Nurse Practice Specialist, Rachel Ferraro, Hospitalist.

improve the care our older patients receive. Henrich, who is a certified Positive Approach to Care trainer and coach, has been active in dementia care training to educate staff on how to improve communication and understanding of behaviors in older patients with dementia. Despite COVID, the team on 3N has embraced the process and have gone above and beyond. The 3N nurses, in concert with suggestions from our traveling nurse staff, organized cognitively appropriate group activities for patients with dementia, to increasing their social time and interactions with staff, and then shared the new strategies with other units facing similar

challenges to really engage and more effectively care for this unique population. Previously, our elder patients have been kept mostly in their rooms which can lead to a lack of socialization, boredom, and ultimately to disruptive behaviors. Patients with dementia can lose the ability to communicate effectively and may demonstrate behaviors to make their need known. One of the new activities includes “circle time” which provides opportunities for socialization and gets patients out of their rooms and moving.

Henrich and the 3N team are constantly striving to improve the experience for our patients with dementia and the care team who interact with them, with the goal of reducing clinical violence, the use of antipsychotics medications, and shortening the time to placement in a post-acute care unit or discharge home.

Henrich and the staff of 3N would also like to extend a warm thank you to the Kootenai Health Foundation without whose support in funding this dynamic work would not be possible. “We are really proud to be able to help promote the work Linda and her team are doing,” said Foundation President, Julie Holt. “It’s programs like these that help us continually improve the patient and care team experience”.

“It is such a joy to see the staff excited to be providing great care and seeing a reduction in some negative patient behaviors. We look forward to sharing the lessons we have learned and continuing to improve upon our quality care.” – Linda Henrich

You Called... Patients Count On The Rapid Response Team

The Kootenai Health Rapid Response Team is a group of experienced critical care nurses using their skills to reduce “failure to rescue” rates and improve patient outcomes. Rapid response nurses round on inpatient units throughout the hospital and collaborate with bedside nurses to quickly assess patients experiencing hemodynamic instability or mental status decline. The development of our dedicated rapid response team program came directly from a request by the bedside and charge nurses throughout the hospital. The program was developed as a nurse-led, nurse-driven program with administrative support from Debbie Callins, Director Critical Care and Pulmonary Services and Ann Ealy, Director of Nursing Operations and Specialty Teams, along with several other stakeholders.

“ We are there to support the patients, nurses, and providers throughout the hospital.”

**–Jamie Myler, Rapid Response Team
Clinical Coordinator**

The rapid response team also collaborates closely with the stroke coordinator to improve stroke recognition, timely imaging, and rapid administration of tenecteplase (TNK) for stroke patients. In addition, this team is working to improve timely recognition and intervention for patients experiencing an acute myocardial infarction (heart attack) as well as analyzing Kootenai sepsis data and how the rapid response team can continue to improve sepsis care within the hospital. The rapid response team is that extra set of eyes for the nurses whose nursing intuition is telling them something is not quite right with their patients. They are also the nurses that respond when the patient is rapidly deteriorating, and help is needed immediately.

Monoclonal Antibody Clinic

As the Delta variant surged across Northern Idaho, Kootenai Health leadership identified the need to provide monoclonal antibody (MAB) treatments to our community until the community partnership between Heritage Health and Northwest Specialty Hospital could get their clinic operational. Monoclonal antibodies, targeting the spike protein on the virus responsible for COVID-19, are used to manage non-hospitalized patients with mild to moderate symptoms of the disease who are at high risk of developing severe illness. By standing up a community-based MAB clinic targeting patients early in their illness trajectory, Kootenai Health effectively provided hospital care in an outpatient setting, reducing the demand for inpatient beds.

The newly hired Ambulatory Nursing Practice Specialists (ANPS), who have extensive nursing experience and expertise in the ambulatory care setting, stepped up. “All hands-on deck” was the battle cry from executive leadership during the peak of the COVID Delta variant and the ANPS team was the perfect fit to head up the MAB outpatient clinic.

The MAB Clinic journey began with converting the large conference rooms in the Health Resource Center (HRC) into clinical patient care areas. The next order of business for the ANPS team was to create a standardized workflow to care for patients in a nonpatient-care area. “We accomplished this by using

makeshift patient dividers and adjusting appointment times so that the treatment room space was manageable,” said Lori Jackson, Ambulatory Nursing Practice Specialist. The next challenge was getting the actual medication from the inpatient pharmacy.



Pictured (l-r): Mallory McConaha, Sheila Burman, and Lori Jackson

“ Manufacturer’s guidelines required that pharmacy prepared the medication at room temperature, and due to the cost, each dose could not be prepared until the patient arrived” continued Jackson, “This created significant waiting periods for patients and staff, plus the pharmacy was tasked with transporting the MAB medication across campus”.

The most significant and serious hurdle the MAB clinic had to address was developing a system to safely and effectively treat patients having an adverse reaction to the medication. Jackson shared, “During the first days of the clinic, we were having much high-

er-than-expected medication related reactions, and there was no streamlined response because the MAB clinic is outside the main hospital building and did not have rescue medications readily available”. The ANPS team identified having a dedicated provider

in the clinic who could prescribe timely treatments to patients with adverse reactions would decrease the need to transfer those patients to the emergency room. Brooke Skurupey, a family nurse practitioner, joined the MAB clinic team. “By partnering with Skurupey and pharmacy, we

were able to obtain access to the COVID Recovery Unit Pyxis also located in the HRC, to treat minor allergic reactions and keep patients out of the emergency department by administering IV fluids to boost their low blood pressure. This workflow potentially kept over 110 patients out of the Emergency Room!” stated Jackson. A great positive “side-effect” was increased collaboration with other departments and staff. Kootenai Infusion Services and the Pre-Operative Clinic managed orders and scheduling of MAB patients. Nurses Sheila Burman, Terri Yoshida, and Linda Henrich, Geriatric Nursing Practice Specialist brought a wealth of expertise. This project wouldn’t have succeeded without them. Also, a big shout out to Val Carpenter, Director, Kootenai Clinic Surgical and Trauma Practices and Jeanne Atha, Executive Director, Surgical and Hospital Specialties, for their leadership!

COVID Care Team



Camey Yeager

In August 2021, Kootenai Health and our community found ourselves at the peak of the COVID pandemic. The emergency department (ED) and inpatient COVID units were at capacity and Kootenai Incident Command looked for novel approaches, utilizing existing resources, for a safe alternative to inpatient care for sick community members outside of the hospital. The Chronic Care Management (CCM) nursing team stepped up.

Our CCM nurses care for and manage the sickest patients in our community within the patient's own home environment, most of whom have multiple chronic conditions. Incident Command sought the expertise and unique skill set of the CCM team to follow-up and manage COVID-positive patients discharged from the ED with a new oxygen order or after the administration of Regen-COV, a medication used to treat COVID-19, and the COVID Care Team (CCT) was launched. Under normal circumstances, these patients would have been admitted to the hospital. However, during the peak of COVID, there were not enough inpatient beds or staff to accommodate the demand.

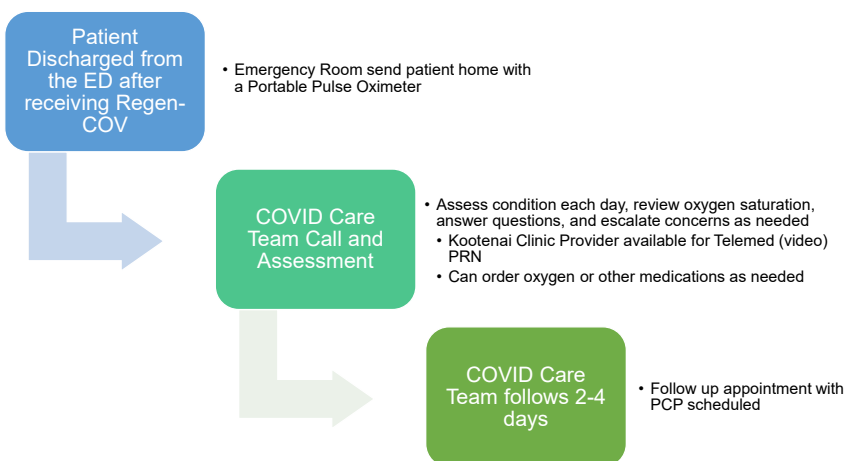
The CCT developed and implemented a precise workflow to care for the COVID-positive patient population at home utilizing a pulse oximeter and daily check-in phone calls. Many of these patients were scared and extremely ill but the CCT was able to keep 80 percent of patients from being admitted.

From August 2021 to February 2022, 368 patients made their way through the CCT program, equating to approximately 1,300 inpatient bed days avoided. The COVID Care Team made a vital difference for both the hospital and our community during this time. "If 368 patients had needed admission on top of the record census, I'm not sure what Kootenai Health or our community would have done" said Camey Yeager, Manager, Kootenai Care Network Nurse Care Management. "They worked seven days a week instead of their typical five and, on many occasions, saved lives". Many patients found this program invaluable, stating how thankful they were and how scared they had been. Patients took great relief knowing that someone was calling them and checking on them.

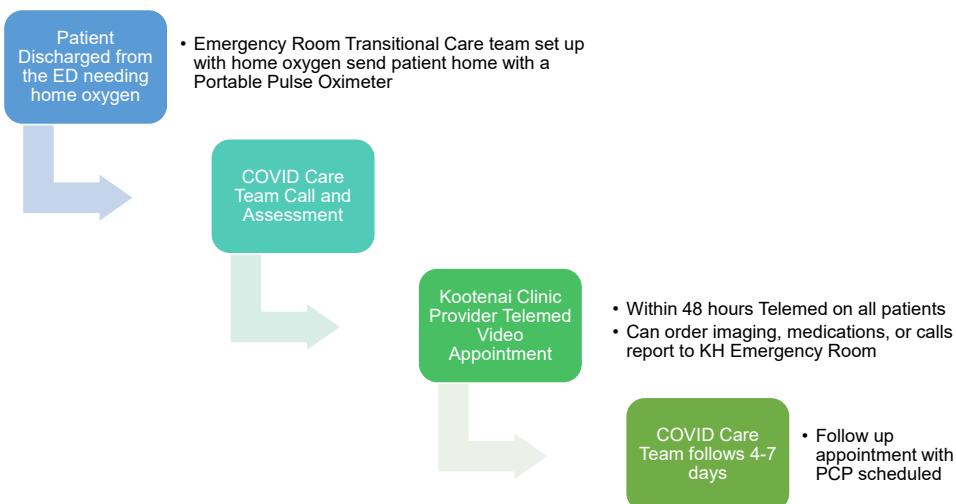
"I felt very secure and was educated on how to take care of myself at home. I was very closely monitored and had no hesitation to call if I needed to. My progress was checked every day with patience, professionalism, knowledge, and kindness. I felt very comfortable and safe with the follow up calls and my anxiety was reduced." -Program Participant

The Chronic Care Management nurses and the COVID Care Team exemplify Kootenai Health's mission of reliable, seamless, connected care and are role models of collaboration and teamwork. They have made a difference in not only the lives of our patients but their families, Kootenai employees and our community.

COVID + Regen-Cov Workflow



COVID + Oxygen Workflow



Bring It On: Critical Care Nurses Tackle Inpatient Dialysis

Kootenai Health Critical Care Nurses are used to pivoting in the face of adversities when it comes to providing

resources, was no exception. Historically, Fresenius Medical Care (FMC) provided all inpatient hemodialysis

services at Kootenai Health. Shortly after the onset of the COVID Delta surge, FMC informed Kootenai Health that they would no longer be able to provide hemodialysis coverage for our critical care units (CC2, CC3, and 3E Critical Care) due to their own staffing constraints resulting from the pandemic. In order to meet the ongoing demands of our sickest renal patients, the decision was made to bring critical care hemodialysis inhouse with the use of Tablo from Outset Medical. Tablo is a preconfigured hemodialysis machine that incorporates

critical care nurses stepped up to the challenge and volunteered to be the first group of nurses to be trained on the new device: Reese Isherwood, Matt Dingman, Hailey Martin, Adam Wabbs, Carly Collinson, Kellie Lyons, Sidney Wilson, Sean White, Brad Nelson, Karen Rutzen, Annie Moser, Annie Laker, Kriston Crisler, Trista Higgins and Fallon Jolley.

Matthew Queral, Tablo Program Coordinator, attended his first meeting concerning the Tablo project on September 8, 2021 where a go-live date was set for October 18, 2021.

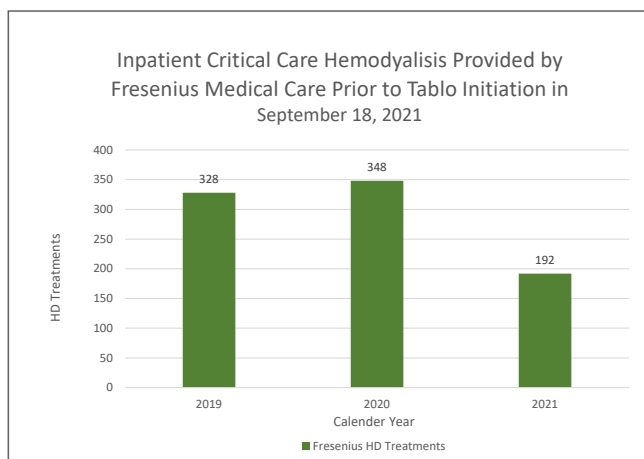
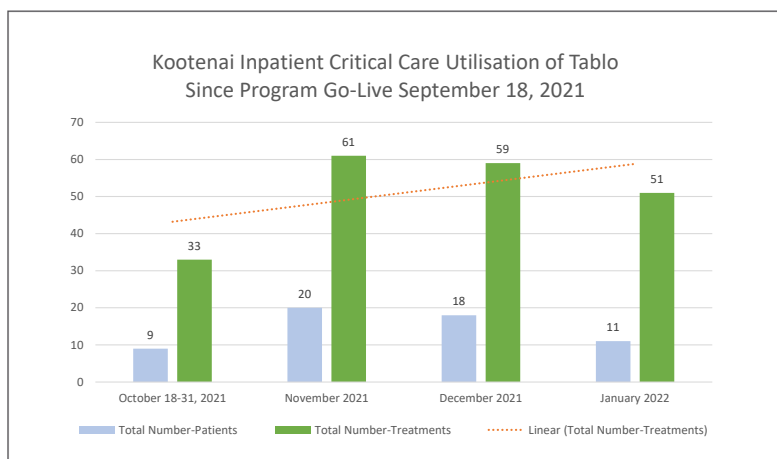
“It was a tight timeline for getting policy and procedures created, validating machines, and educating the nurses” says Queral who spent a lot of time on the units and WebEx chat answering questions and troubleshooting bedside needs. With some time and experience under their belt, the original 15 critical care nurses have been able to pivot again and focus on onboarding the next round of critical care nurses joining the inhouse hemodialysis team. The Tablo program currently covers the needs of patients in CC2, CC3 and 3E Critical Care.



Pictured (l-r): Scott Bieber, Medical Director of the Critical Care Dialysis Program, Kriston Criler, and Matthew Queral, Tablo Program Coordinator.

outstanding inpatient nursing care. The COVID Delta surge in 2021, with scarce

water treatment and dialysate proportioning into one machine. The following



Developing Kootenai's Future Nursing Workforce



Linda Brotcke

This year Kootenai Health adds a Nurse Apprentice Program to provide another step in the pathway towards nurse development.

Idaho State Board of Nursing has made provisions for a nurse apprentice program. A nurse apprentice is a currently enrolled nursing student who is employed for pay in a non-licensed capacity by an Idaho Board of Nursing approved health care agency. Kootenai Health was approved as a Health Care Agency by the Idaho State Board of Nursing in 2021. Within the provisions of the program, the nursing student must be in good academic standing in their nursing education program and have completed a basic nursing fundamental course. As an apprentice partnered with one RN, students are able to provide basic nursing cares to the group of patients assigned to the registered nurse. In addition, they can utilize other learned skills based on their program progression as governed by the nurse apprentice skill scaffold.

The benefits of such a program are multifold. For apprentices, there is greater exposure to clinical application and critical nurse thinking while in direct partnership with an RN. They experience flexible work hours which allows them to balance school and other life responsibilities. After graduation, an apprentice should have an easier transition to practice as they enter nurse residency. The employer gains assistance with the increased demand for nursing assistive personnel, and the provision of an additional step in the nurse development pathway. This also translates into an opportunity for earlier socialization to organizational vision and values and a means of

enhancing the nursing pipeline flow. Employers are needing to implement innovative means to fill the increasing demands for nurses due to vacancies, population growth in community, and higher patient acuities. The potential for reduced orientation time translates to long term savings and a greater return on investment. There are benefits to the schools of nursing as well. As nursing schools face the challenge of competing for valuable clinical spots for their students, one potential means of easing this challenge is the utilization of the nurse apprentice role to help meet clinical requirements. For certain, more students could directly benefit from this robust opportunity to apply learning to practice.

CNA Apprentice:

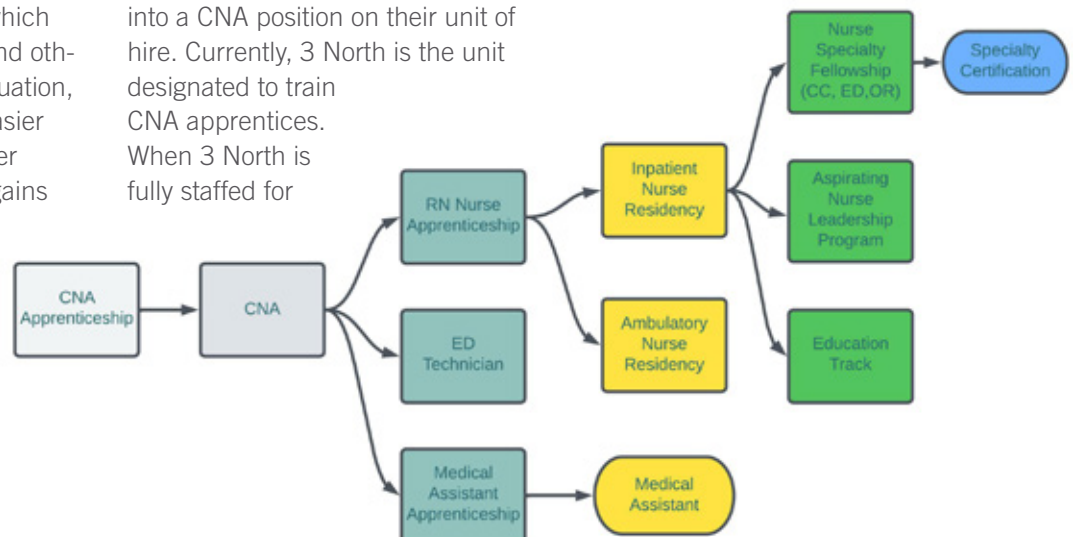
In addition Kootenai Health introduced a Certified Nurse Assistant (CNA) Apprentice Program as an introductory step in the pathway towards nurse development.

The nursing assistant apprentice is an individual hired by Kootenai Health and currently enrolled in a nursing assistant course at North Idaho College Workforce Training Center (WTC). This 12-week course ends with testing and certification. Program tuition is paid for by Kootenai Health. At the completion of the program the CNA is fully oriented to the role and ready to transition into a CNA position on their unit of hire. Currently, 3 North is the unit designated to train CNA apprentices. When 3 North is fully staffed for

CNAs, other medical surgical units may hire the overflow.

The orientation program for this apprenticeship is a tiered skills model. Because an apprentice does not possess the knowledge base for pairing with a CNA preceptor until the six week mark, the first level of orientation is to the role of the Patient Safety Attendant (PSA). Once the apprentice has been oriented to the PSA role and responsibilities and competencies are verified by the PSA preceptor, the apprentice can be utilized as a PSA. After successful completion of program didactic and skills check offs through WTC at week six, the apprentice progresses to level two and is paired with a CNA preceptor on the 3 North medical unit. Here they continue to orient and progress through the time allowed for program partnership as well as on the unit working with their preceptor. Hours worked count toward their clinical requirement.

Apprenticeships support and enhance community partnerships and build networks for greater opportunities to fill workforce gaps. The CNA apprenticeship program allows those seeking nursing related health care careers an entry point with little to no financial cost to the individual. When envisioning the ability of a health care organization to support and build its own nursing workforce, the addition of this entry point is vital.



Nurse Mentorship:

Next, Kootenai Health Department of Nursing Excellence initiated the beginning of a structured nurse mentor program for the professional growth and development of its nurses. Mentorship involves the formation of a collaborative relationship between two or more individuals who are accountable for assisting a mentee to achieve mutually defined goals. The mentor is an

individual who possesses expertise and knowledge in an area that is desired by the mentee.

The program utilizes evidence-based resources available through our affiliation with Mayo Clinic. Self-identified participants will engage in learning, goal setting, and building trusting relationships by participation in regularly scheduled meetings occurring over the

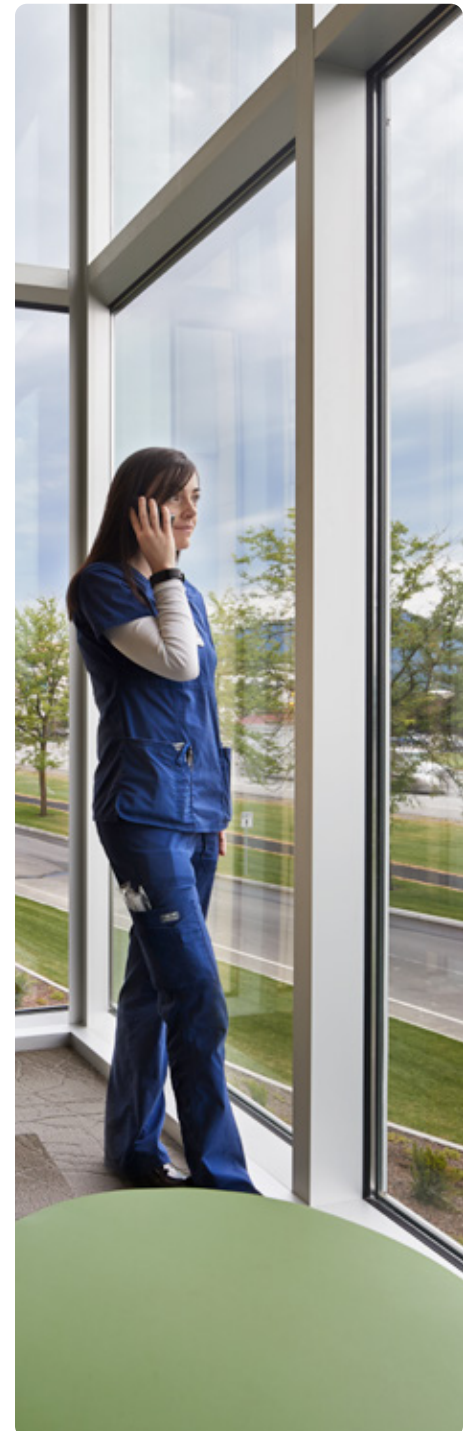
course of a 6–12 month partnership. Oversight will be provided by the Nurse Mentor Steering Committee whose member representatives include clinical RNs, nursing education specialists, nurse managers and directors, and the nursing development specialist. The steering committee in turn reports to the Professional Development and Continuing Education Council and the Director of Nursing Excellence.



We Support Nursing Resiliency and Wellbeing

During the last COVID surge of 2021, Kootenai Health recognized a need to accelerate efforts to help nurses and medical staff with resilience, burnout, and well-being. Several new programs were implemented by the end of 2021 to help promote well-being.

- **Three Good Things** – A simple exercise to help you recognize and amplify the positive in your life
- **Schwartz Rounds** – A grand rounds format session for caregivers to discuss the emotional and social impact of their work
- **Inclusivity Series** – An education series that examines the role of unconscious bias and best practices in caring for a variety of populations
- **Vital Worklife Peer Coaching** – In-the-moment counseling and one-on-one telephonic nurse peer coaches for discussing concerns
- **Headspace and Unmind** – Free access to two popular digital well-being apps with on-the-go tools
- **Well-Being Website** – Visit kh.org/health-care-provider-well-being to see all the new great programs and additional resources designed for you!



Recognizing our GEMS: Nursing Excellence Program

The Kootenai Health Nursing Excellence Program (NEP) is an evidence-based program founded on the five domains of magnetism; empirical outcomes, transformational leadership, structural empowerment, exemplary professional practice, and knew knowledge, innovation, and Improvement. This voluntary, peer-reviewed program recognizes clinical nurses for their professional achievements and contributions to improve patient outcomes and further Kootenai Health's mission to improve health one patient at a time, in a friendly and professional culture, with superior safety and quality. Congratulations to our 2021 Gems!

NAME	UNIT	AWARD	NAME	UNIT	AWARD
Alisha Dickey	Womens & Childrens	Opal	Matthew Douglas	3N	Opal
Amanda Johnson	3S	Opal	Maureen Finigan	Womens & Childrens	Opal
Angelina Faggion	PACU	Opal	Mia McRory	PACU	Opal
Bailey Larson	CVOR	Opal	Michele Goode	Critical Care	Opal
Barbara Richardson	PACU	Opal	Michelle Burton	Heart Services	Opal
Brayden Panttaja	NRT	Opal	Michelle Hixson	ED	Opal
Brenda Guy	PACU	Opal	Michelle Vogelsang	Womens & Childrens	Opal
Carolyn Dolan	KC Nephrology	Opal	Molly Preston	Womens & Childrens	Opal
Chauntae Peterson	PACU	Opal	Paul Kugler	KHC - CDA	Opal
Crystal McCown	ED	Opal	Rose Maros	ED	Opal
Darby Tingelstad	2S	Opal	Samantha Sperber	3E	Opal
Darrell Day	Womens & Childrens	Opal	Sarah Gonzalez	ED	Opal
Daryn Jett	Womens & Childrens	Opal	Sean White	Critical Care	Opal
Elizabeth Cameron	3N	Opal	Shelby Hanson	Heart Services	Opal
Emily Farness	Critical Care	Opal	Sherry Beno	Critical Care	Opal
Erin Ferraro	2E	Opal	Tammy Branom	OR	Opal
Kara Baron	Care Manager	Opal	Vanessa Albert	Critical Care	Opal
Karen Wilson	NRT	Opal	Wendy Ferguson	PACU	Opal
Katherine Stang	Heart Services	Opal	Wendy Smith	ED	Opal
Katherine Hurley	Critical Care	Opal	Alyson Houghton	PACU	Star Garnet
Lauren Petticolas	Womens & Childrens	Opal	Amanda Pringle	Critical Care	Star Garnet
Lillith Steed	2S	Opal	Aran Borgman	PACU	Star Garnet
Lisa Hughes	PACU	Opal	Bailey Camp	Critical Care	Star Garnet
Lynn Bui	NRT	Opal	Belinda VanDitto	Heart Services	Star Garnet
			Brooke Birsette/Carro	ER	Star Garnet

NAME	UNIT	AWARD
Caralea Tanner	KC Nephrology	Star Garnet
Cassandra Oddy	Transitional Services	Star Garnet
Cathy Waddell	Heart Services	Star Garnet
Christie Koziol	3E	Star Garnet
Cindy Hale	NRT	Star Garnet
Crystal Cronoble	Critical Care	Star Garnet
Dena Payne	3E	Star Garnet
Desiree Florea	2E	Star Garnet
Erica Andreson	NRT	Star Garnet
Hailey Martin	Critical Care	Star Garnet
Jaci Goldworm	3N	Star Garnet
Jamie Myler	Rapid Response	Star Garnet
Jeffery Sample	2E	Star Garnet
Jenna Cruz	Womens & Childrens	Star Garnet
Jennifer Miller	Womens & Childrens	Star Garnet
Jesse Anderson	NRT	Star Garnet
Jessica Daugharty-Sterner	Critical Care	Star Garnet
Jordan Fiorini	NRT	Star Garnet
Karen Rutzen	Critical Care	Star Garnet
Katelynn Weatherly	ED	Star Garnet
Kelly Ramus	Critical Care	Star Garnet
Kristie Hiiva	Womens & Childrens	Star Garnet
Lisa Kolenda	KC Cancer Service	Star Garnet
Megan Baker	SPA	Star Garnet
Megan Lorincz	Nursing Excellence	Star Garnet

NAME	UNIT	AWARD
Melissa Rix	ED	Star Garnet
Michele Brown	Heart Services	Star Garnet
Natalie Anaya	Womens & Childrens	Star Garnet
Rachel Pottenger	NRT	Star Garnet
Sabrina Mael	NRT	Star Garnet
Shannon Kline	Nursing Excellence	Star Garnet
Sidney Wilson	Critical Care	Star Garnet
Tabitha Rocha	ERU	Star Garnet
Teresa Deuling	SPA	Star Garnet
Whitney Phillips	Womens & Childrens	Star Garnet
Adam Wabs	Critical Care	Topaz
Anne Bear	Periop Infusion	Topaz
Dani Holle	3S	Topaz
Diana Rees	Womens & Childrens	Topaz
Eric Oscarson	KHC- Congestive Heart Failure	Topaz
Hillary Harmon	KHC - CDA	Topaz
Kaelianne Newbold	KC Neurology	Topaz
Katherine Gwin	KC Neurology	Topaz
Kelly Goertzen	PACU	Topaz
Kristin Wood	PACU	Topaz
Maria Richter	NRT	Topaz
Monica Stroemsvik	3E	Topaz
Rebekah Davis	Womens & Childrens	Topaz
Shannon Celentano	PACU	Topaz
Taylor Lundy	2S	Topaz

A Year in the Life at Kootenai Health, 2021

STEMI Activations **149**

Injury Prevention Volunteer Hours **414**

E.D. Admits From Ground Level Falls **518**



Stroke Alert Activations **631**
373 Stroke Diagnoses

Total Trauma Volume **3,579**

Large Sacrum Dressing Placed **8,674**

Urinals Used **26,252**

Boxes of Gloves Used (100 Gloves/Box) **55,534**



70,869
N95's Masks Used

Isolation Gowns Used **334,900**

Procedure Masks Used **548,159**

199 Patients Seen
In The E.D. In One Day



485 Nursing Students,
Completing 38,214 Hours Of Clinicals

533 RRT Activation, 2,688 RRT Consults

1,898 Cardiac Cathlab Procedures

4,035
Safety Goggles Distributed



9,252 Dressing Change Tray Dispensed

38,157 Emesis Bags Utilized

60,368 E.D. Visits, up from 48,551 in 2020

256,609 Ambulatory Visits

354,981
Gallons Of Coffee Consumed



Bold Transformation, 2021-2022 Nursing Strategic Plan

In 2021, the Kootenai Health Nursing Strategic Plan was redesigned by representatives from the Professional Nursing Council and sub-councils to align nursing goals with the organization’s 2030 vision: One connected team, boldly transforming the health care experience, to become a premier medical destination. Categorized by Kootenai Health’s core values of Safety, Compassion, and Engagement, this collaborative group identified goals for 2021 and 2022.

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



Safety	Compassion	Engagement
Decrease/eliminate avoidable harm to patients and workforce as evidenced by improved Nurse Sensitive Indicators and decreased injuries to staff	Enculturate patient satisfaction questions, “Responsiveness” and “Nurse Listening” into daily language as evidenced by improvement in patient satisfaction results	Increase clinical nurse engagement as evidenced by increase in completed NEP packets and membership on Professional Governance Councils
Foster an environment of professional inquiry and ensure awareness and access to organizational resources as evidenced by 25% increase in number of nurses who utilize Burning Questions Board	Incorporate empathic communication in nursing practice as evidenced by 25% inpatient Med/Surg nurse completion of simulations by the end of 2022	Connect employees to resiliency venues established by Kootenai Health Wellness Committee as evidenced by frontline caregiver membership
Decrease readmission rates	Increase RN satisfaction survey overall participation rate to >79%	Ease full adoption of technology as evidenced by full Epic implementation
Promote and support communication and safety between leaders, frontline staff, and amongst teams as demonstrated by an increase in Midas reporting	Enhance use of evidence-based practice throughout the organization as evidenced by 90% of Nurse Residents’ completion of EBP projects at the time of their graduation	Socialize and encourage utilization of career pathways as evidenced by Gallup Q 12 (opportunities to learn and grow) survey-over-survey improvement

Vision

One
connected team,
boldly transforming the health care
experience, to become a **premier medical destination.**

Mission

We **improve health** one patient at a time
in a friendly and **professional culture**
committed to superior
quality and safety.

