

THE YEAR OF THE NURSE

PARKVIEW NURSE 2019-2021

ANNUAL REPORT

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Message *from the* Chief Nursing Executive



Juli Johnson, MSN, RN
Chief nursing executive
Parkview Health

At Parkview, our nurses treat their patients as their top priority.

During this unprecedented time of the COVID-19 pandemic, Parkview nurses have shown exemplary commitment and compassion in the face of one of — if not the most — challenging and potentially life-threatening clinical experiences of their careers. Parkview nurses have displayed bravery and relentless determination. Whether our nurses worked at the bedside, in the hospital, in a Parkview Physicians Group office or in the Parkview Access Center answering calls from patients around the clock, they have been an integral part of Parkview's response to the pandemic.

But, we did not do it alone. Alongside our nurses were other frontline heroes: physicians, advanced practice providers, respiratory therapists, patient care techs, environmental services techs, and laboratory service team members as well as co-workers from nutrition services, facilities and other key support areas.

Nursing is and always will be a privilege where we are given the opportunity to share the beginning of life and often the end of life with our patients and their families. Our nurses treat their patients as their top priority. They are instrumental in listening to and supporting patients who are anxious and afraid of their health conditions. Many nurses spend countless hours away from their own families to care for other peoples' loved ones who are hospitalized. They are supported by an environment that values nursing and encourages collaboration with leaders to set the highest standard for quality care, safety and patient outcomes. Our nurses are guided by Parkview's mission to improve the health of our communities through innovation. They take pride in providing excellent care to every person, every day.

Throughout this report, you will find stories of Parkview nurses who are practicing at the highest level and achieving amazing outcomes. At Parkview Health, we strive to provide growth and opportunity for our nurses to become their best. Whether it's through the ever-growing commitment to nursing research, professional certification or our continued drive to achieve clinical outcomes and a patient experience that exceeds expectations, each year our nurses show great resiliency while continuing to deliver compassionate and innovative care to our community and patients.

With warm regards,

A handwritten signature in black ink that reads "Juli Johnson".

Nursing at Parkview Health



Vision

The Parkview nurse exemplifies excellence through compassion, engagement, innovation and leadership.

Mission

Touching lives through innovation, caring and excellence.

Values

Trust, quality, flexibility, teamwork and stewardship.

Professional Practice Model

Our Professional Practice Model (PPM) supports nurses with a shared vision of excellence through interprofessional collaboration and strong teamwork. The model illustrates how our nurses live our mission and vision every day using evidence-based practice, holistic care, transformational leadership and shared governance to guide our care and promote optimal outcomes for our patients. While focusing on building caring relationships and supporting holistic nursing care, a Parkview nurse understands the complexities of the nursing practice environment.

Parkview nurses strive to come together with one voice to enhance patient care. Nurses are satisfied at Parkview Health because they are part of the planning, reviewing and delivery of the mission, vision and values of nursing and the organization. Our nurses promote excellence and the use of knowledge to improve care for our patients.

Our practice model is graphically depicted as an ever-dynamic, evolving double helix with the representative DNA strands supporting foundational structures and actions. It is the framework that binds nurses together in teams to deliver on the promise of optimal outcomes.

Parkview Health is committed to excellence in nursing practice through education and research. In our goal to always provide the highest level of care for our patients, we maintain a health system Magnet® designation. Magnet® designation is not a prize or award, but a recognition of nursing excellence by the American Nurses Credentialing Center (ANCC). This designation is based upon Parkview Health hospitals achieving the components of the Magnet® model framework and sustaining excellence in patient care and outcomes.

RNs Collaborate on a Smart Innovation for New Moms

For Ashli Pershing and Pam Sprowl, moms and babies are top priority. Each day, they strive to promote healing and help maintain their patients' confidence, spirit and sense of normalcy after one of the most life-changing events a woman can experience: delivering a baby.

So, when they noticed an issue that was interfering with their patients' healing, both physically and psychosocially, they came together to find a solution. The ice packs that are currently available for women after delivery do not absorb or provide enough coverage. Because they don't absorb, mothers are immediately concerned by their perception of "lots of blood" in the pad.

This led to nurses creating makeshift solutions involving multiple pads and homemade remedies, such as "ice diapers" and "ice gloves," which might not be the safest options. These solutions can also be hard to manage, compromise modesty and independence, and become messy quickly. Though they'd found workarounds, Ashli and Pam weren't satisfied.

The pair took it upon themselves to design a safer, more reliable product for their patients in their time of need. They came up with a T-shaped pad that has an opening to insert ice chips or a breakable chemical pack. Their product would boast better absorbency, cost less, provide protection, feel more comfortable and support modesty for the patient.

The pad was designed to follow the current evidence-based practice, which is to apply ice packs for 10 to 20-minute intervals. Cold packs may cause skin breakdown or freezer burn, but localized cooling can improve pain relief and decrease edema. Designed with a pouch for these cooling mechanisms, this new pad design would support safe pain relief for new moms.

Ashli and Pam presented their idea to Parkview leaders, who immediately saw the value and potential. "The whole process was new and foreign to us," Pam said. "We worked on the design of the product — what it should look like and



Left to Right: **Sue Ehinger**, chief experience officer (2014–2019), Parkview Health; **Ashli Pershing, BSN, RN, CLC,** birth planner/lactation consultant, Parkview Wabash Hospital; **Pam Sprowl, BSN, RNC-OB**, clinical nurse, Family Birthing Center, Parkview Huntington Hospital; **Mike Packnett**, president and CEO, Parkview Health

what it should do. Parkview helped us develop the product and work through the patent process."

The idea of being true inventors is still setting in for the pair. "Entrepreneur is a funny word for both of us, and I don't think we've really attached that to our names," Ashli shared. "When we filled out the patent application, we were listed as 'inventor' and that was fun for us. We just want to take care of patients and love people."

The momentum behind their idea has sparked a spirit of innovation among others in their area as well. "People have ideas to improve patient care. It's empowering to have buy-in from your employer," Pam said. "I love working for Parkview. I don't know what it costs to get a product out there, but I couldn't have done it on my own, so I appreciate everything they've done."

And for her part, Ashli is encouraging others to share their observations around improving the patient experience. "Have confidence. Don't be afraid to put it out there and collaborate," she said. "The worst thing that can happen is people say they don't like your idea."

The T-pad is currently patent pending and has received its provisional application serial number assignment. What an exceptional innovation within the organization for new mothers by members of the nursing team!

Nursing *at* Parkview Health

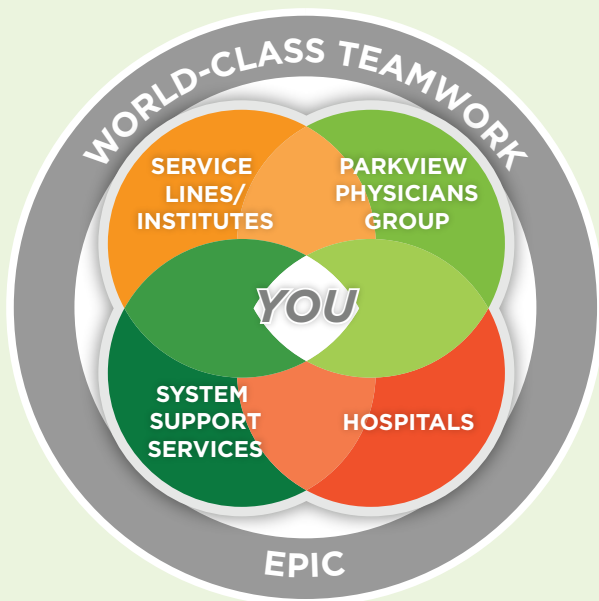
Transformational Leadership

Parkview Health nurses are leaders in the hospital, office, community and administrative settings throughout the system. Supported through the transformational leadership of our chief nursing executive and chief nursing officers, they are led by our mission and vision to improve health and inspire well-being.



You are at the center of everything we do.

Our nurses, in alignment with the Magnet® model, are transformational leaders who share a vision of nursing excellence throughout all of our facilities. They advocate and lead change for nursing and their patients. Nurses are empowered through unit-based councils to have a voice in their practice every day, and nursing leaders advocate for nursing at all levels of the organization and in the community.



Nursing at Parkview Health

Structural Empowerment

At Parkview Health, we strive for excellence in nursing practice and the care of patients across the continuum of services. Nurses are provided with the opportunity to grow professionally in meaningful ways to support both their personal goals and the care of our patients and their families. We support lifelong learning and professional nursing growth through academic program support, financial support for educational programs, professional certification and support of our new nurses through nursing transition to practice programs.

Nurses are engaged through shared governance across the health system and are partners in decision making within the organization and throughout the community and areas we serve. Parkview nurses have a voice through innovation, clinical expertise and knowledge that translates in the provision of excellent care every day to our patients, families and communities.

Parkview Health provides the overall organizational and nursing governance structure that represents the voice, practice and growth of the Parkview nurse. They are supported and surrounded by the unit-based Nursing Clinical Action Team and Nursing Coordinating Council

who meet to conduct the business of nursing and ensure that the nursing voice is heard. We enable nursing engagement through interprofessional participation and increased access to knowledge through academic preparation and professional certification.

Empowerment is present in a work environment when nurses are provided information, resources, support and the opportunities they need to participate in their own growth and development goals. Nurses who are empowered demonstrate accountability for their profession and their patients. They are better able to help fulfill — and often exceed — the strategic goals of the organization and its commitment to the community.

The Parkview nurse's voice is important to our success!



Nursing *at* Parkview Health

Exemplary Professional Practice

Parkview Health nursing staff provides exemplary nursing care to our patients, their families and our community every day! Exemplary professional nursing practice is the essence of a Magnet® organization.

This includes:

- Focusing on what nursing can achieve. It is based upon the successful integration of the Professional Practice Model incorporating the five key components of the Magnet® model.
- Focusing on how nurses interact with patients, families and the interdisciplinary team to impact positive patient outcomes.
- Allowing nurses to work in an environment where autonomy and accountability help define quality patient care and best practices.
- Offering a care delivery system that is family-centered, efficient and collaborative, with nurses having a voice in their professional practice and outcomes. This includes budgeting, staffing models and practices to support excellence in nursing-sensitive clinical and patient experience outcomes.



EXCELLENT CARE, EVERY PERSON, EVERY DAY!

New Knowledge, Innovations & Improvements

Nursing research is essential for transforming the healthcare practice environment. It can change how care is delivered as well as how care impacts patients' quality and safety.

Parkview Health nurses actively participate in research and evidence-based practice (EBP) initiatives every day, with a focus on innovation and developing new knowledge. Parkview nurses have support for EBP and research from a full-time professional research nurse who is dedicated to supporting research and EBP at every level of nursing and at every facility in Parkview Health.

The Nursing Research and Evidence-based Practice Committee (NREBPC) continues to support nursing in their EBP and research endeavors. The committee is well represented with clinical nurses, advanced practice nurses, managers and faculty from local nursing schools who have an interest in helping drive EBP and research

at the bedside. The NREBPC designs classes for all nurses, develops processes related to nursing research and reviews all nursing research proposals.

Committee members also serve as mentors for nurses who have an interest in research or evidence-based practice projects. There have also been numerous EBP initiatives at the unit and system levels, and nurses have been active in the dissemination of knowledge through local and national presentations and publications.

By actively participating in and conducting research across the system, Parkview nurses are adding to the body of nursing knowledge. When nurses understand the value of research and evidence-based practice, patient care is transformed, patient outcomes are improved and nurses are empowered to provide exceptional care to our patients.

Nursing Excellence and Outcomes *Across* Parkview

Parkview Huntington Hospital



Alison Pershing, MSN, RN, CNOR
Chief nursing officer
Parkview Huntington Hospital

“*...delivering caring, compassionate, high-quality nursing care...*”

If there was one word to describe Parkview Huntington nurses, it would be “resilient.” Our nurses have been delivering caring, compassionate, high-quality nursing care during volume surges throughout our hospital. When times have been stressful and even uncertain, our nurses have remained optimistic and focused while fully committing to their patients and the nursing profession. They have been silent leaders choosing faith over fear to tackle the adversity COVID-19 has brought into their lives, and they have grown professionally by engaging in solutions related to record-breaking increases in census and quickly adapting to safety-related process changes.

Their resiliency has been truly awe-inspiring and incredible to witness!

QPR Training for Suicide Prevention

In 2019, suicide was the tenth leading cause of death for all ages in the United States. According to the American Foundation for Suicide Prevention, a Hoosier dies from suicide every eight hours. Indiana’s suicide rate has been higher than the national suicide rate since 2000, and its rate in 2017 was the highest suicide rate observed in Indiana in over five decades.¹

¹ CDC.gov

Nursing Excellence and Outcomes *Across Parkview*

Parkview Huntington Hospital

Q = *Question*

P = *Persuade*

R = *Refer*

More than 1,000 Hoosiers have been lost to suicide every year since 2016. In 2018, there were 26 suicides in Huntington County alone, along with an increase in psychological diagnoses and workplace violence within this community.

Recognizing a need to support our nursing staff dealing with the growing suicide problem, Katie Mitchell, BSN, manager, Parkview Huntington Hospital Emergency Department, and Jana Anderson, police lieutenant, discussed the importance of educating nurses on how to identify signs and symptoms through QPR suicide recognition training. QPR teaches the skills needed to recognize the signs of individuals who are at risk for suicide. Its mission is to reduce suicidal behaviors and save lives by providing innovative, practical and proven suicide prevention training.

Katie and Jana performed QPR training with clinical staff in the emergency department at Parkview Huntington Hospital. Using our mission statement as a guide, staff were trained through video, live presentation, role play scenarios and handouts on how to better help our community deal with suicide. Education included the common causes of suicidal behavior, the warning signs of suicide, how to get help for someone in crisis, and how to question, persuade and refer someone who may be suicidal.

Through Katie and Jana's support in adding QPR training to our frontline caregivers, staff can now better recognize the warning signs, clues and suicidal communications of people in trouble. The nursing staff is better prepared to use these tools in their practice and be able to act swiftly to prevent a tragedy.

This nursing initiative has helped our nursing team feel more prepared to intervene as needed to support the Parkview Huntington mission and improve the well-being of the entire community.

Nursing Excellence and Outcomes *Across* Parkview

Parkview LaGrange Hospital



Todd Klinedinst, MSN, RN

Chief nursing officer/VP of patient care services
Parkview LaGrange Hospital

Parkview LaGrange Hospital (PLH) is located deep in the heartland of Indiana. The culture of our rural community was forged by the simple joys and hardships of work, family and faith. PLH nurses are truly a reflection of that way of life.

Our nurses understand that even though resources in our community may be limited, we can have a positive impact on our patients' lives. They know that when faced with challenges and adversity, the best way to get through them is together. They are as strong and resilient as the circumstance requires.

“*...the same high-quality care found in larger urban facilities.*”

The entire nursing team is driven to provide exceptional, advanced care because they are committed to ensuring their families, neighbors and friends receive the same high-quality care found in larger urban facilities.

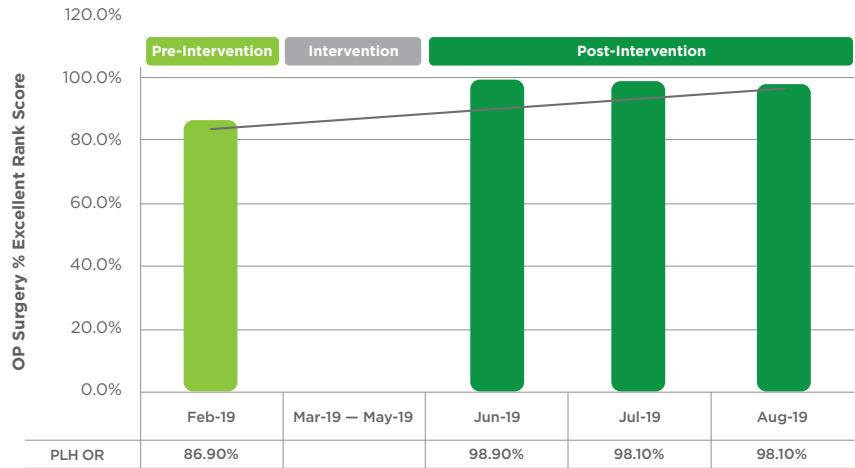
We live among and serve the third largest Amish population in the country. Our Amish neighbors choose to live a simple life as an expression of their faith. Parkview LaGrange Hospital is the ideal place for our nursing team to live out our shared mission of service and compassion in alignment with our beliefs.

**We are Parkview
LaGrange.**

Nursing Excellence and Outcomes *Across* Parkview

Improvement in Instructions at Home Through Nursing Collaboration with PFAC

PARKVIEW LAGRANGE HOSPITAL - AMBULATORY
OR IMPROVE "INSTRUCTIONS FOR CARE AT HOME" SCORE



In March 2019, surgical department clinical nurses Hollie Brewer, RN, ASN, and Corena Zolman, RN, BSN, met with Randy Bryant, MBA, BSN, CNOR, to discuss patient experience scores for "Instructions for Care at Home." The OR team was concerned that patients' perceptions of their instructions at home could be impacting their recovery.

Patient satisfaction and excellent outcomes using evidence-based practices are main goals we strive to achieve in our organization. Hollie, Corena and Randy attended the Parkview LaGrange Patient Family Advisory Council (PFAC) to get ideas on how to enhance the patient experience around instructions provided by the OR at discharge. Members of PFAC consist of former patients, family members of patients and community members.

The members of PFAC were asked to review a sample of discharge instructions to see how the surgical department could improve them. The NCAT team invited the PFAC members to tour their department in June 2019. Hollie, Corena and Randy guided them through the prep recovery area, endoscopy room, surgical suites and the recovery room, allowing them to experience the process first-hand. One of the PFAC members acted as their patient and was led through the registration, pre-op and discharge process. He participated completely by donning a patient

gown, lying while being transported on a patient cart and finally being transported in a wheelchair for dismissal. The PFAC members then gave ideas for improvement, including color coding pages of different sections of the discharge instructions and highlighting generic and brand names of medications and instructions. This meeting helped Hollie, Corena and Randy better understand patient needs and enhance patient understanding and compliance regarding instructions for care at home.

Following the implementation of the new discharge-to-home tools, the three clinical nurses presented the video that PFAC helped create along with an update on what has been happening in this process to demonstrate best practice and great ideas in action. This is a great example of partnering with our community to improve care!

Nursing Excellence and Outcomes *Across* Parkview

Parkview Noble Hospital



Erin Goldsberry, MSN, RN, NEA-BC
VP of patient care services/CNO
Parkview Noble Hospital

Being a nurse is rewarding. I hope all nurses would tell you so. They get to help bring new life into the world. They get to see a family take home a loved one who they thought they might lose. There are so many wonderful stories that nurses can share. What nurses may not tell you is that when they enter the hospital each day, there will be a new challenge. There will be a patient with a strange new symptom, a hospice patient without visitors, another cancer diagnosis, a baby without a safe place to go. No matter what area of nursing we are talking about, the trials are real.

I could not be more proud of these ladies and gentlemen. They are remarkable.

I am humbled to watch the nurses at Parkview Noble handle each situation with grace and composure, compassion and empathy. They are tough and resilient, though remain kind and caring.

I could not be more proud of these ladies and gentlemen. They are remarkable.

Nursing Excellence and Outcomes *Across* Parkview

PAUSSE Campaign for the Prevention of Employee Sharps Injuries

The Parkview Noble Hospital (PNH) surgery department saw a significant increase in employee sharps injuries. In December 2017, they reported five injuries, four of them being Occupational Safety and Health Administration (OSHA) recordable. At PNH, the goal for employee injuries for 2017 was less than 2.8. In December 2017, PNH had a 13.8 employee sharps injury rate.

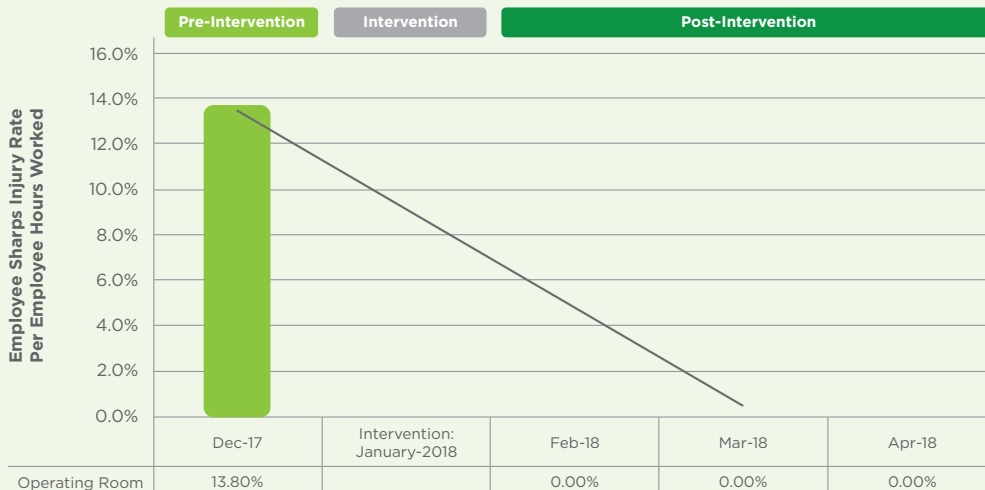
Because there was a significant increase in injuries as a facility, Chelsea Handshoe, RN, CNOR, clinical nurse, and Heather Antal, MSN, RN, CNOR, peri-operative services manager, collaborated to develop the PAUSSE (Please Always Use Sharps and Safety Education) safety campaign initiative. The campaign acronym was developed to increase mindfulness and awareness for all surgery nurses and surgical

technologists, including anesthesia providers and surgeons. The goal was to reduce the incidence of employee sharps injuries in the surgery department at Parkview Noble Hospital.

The campaign was first introduced by Chelsea in the January 2018 unit staff meetings and huddles, and Heather presented the PAUSSE safety campaign initiative to key physician leaders. Following the staff meetings and huddles, posters were created and displayed throughout the surgery department, surgeon lounges and locker room, and physicians were educated regarding the new safety initiative.

Thanks to the exceptional work from Chelsea and Heather with the PAUSSE campaign, employee injuries related to sharps injuries have decreased to zero.

PARKVIEW NOBLE HOSPITAL - OPERATING ROOM
REDUCE OR EMPLOYEE SHARPS INJURY RATE



Nursing Excellence and Outcomes *Across* Parkview

Parkview Ortho Hospital



Laura Farrell, MSML, BSN, RN, ONC
Chief nursing officer
Parkview Ortho Hospital

...providing the best patient experience while delivering safe, quality care.

2020! What a year.

It truly was the year of the nurse!

Parkview Ortho Hospital (POH) is an orthopedic specialty hospital, and we pride ourselves in providing the best patient experience while delivering safe, quality care. When 2020 began, who would have imagined we would be faced with a world-changing event that would challenge our nursing skills and dedication to our craft?

Through it all, POH nurses proved to be resilient, flexible and adaptable, and they never wavered on their commitment to service. 2021 continued to be a challenge for the world and the healthcare workforce. Extraordinary times call for extraordinary measures, and POH nurses have shown to be extraordinary people who respond to the call.

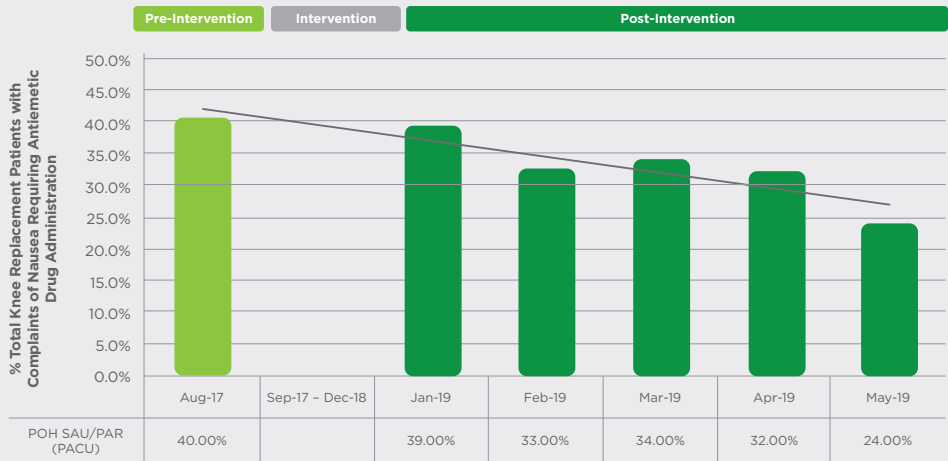
Transition from IV Tranexamic Acid (TXA) to Oral TXA to Help Decrease Nausea in Total Joint Patients

Many patients complain of sudden nausea during the administration of IV tranexamic acid (TXA) before surgery. TXA is a medicine that helps control bleeding and is given to orthopedic patients undergoing certain orthopedic surgeries, such as spine and total joint. Nausea is a common side effect of TXA that occurs with many of these patients. Subsequently, patients are given antiemetic medications to decrease these unwanted side effects by their anesthesia team.

Jill Jones, BSN, RN, ONC, SAU clinical nurse, Parkview Ortho Hospital, began recognizing an increase in patients complaining about

Nursing Excellence and Outcomes *Across Parkview*

PARKVIEW ORTHO HOSPITAL – SAU/PAR (PACU) DECREASE TOTAL KNEE REPLACEMENT PATIENTS WITH COMPLAINTS OF NAUSEA REQUIRING ANTIEMETIC DRUG ADMINISTRATION



nausea after receiving intravenous TXA. She looked at ways to decrease the side effects of nausea in total joint replacement by using oral TXA instead of IV TXA.

In late October 2017, Jill discussed the potential of looking at oral vs. IV TXA due to the side effect of nausea, and the possibility of converting from the current IV administration to oral. Jill began her research by surveying the nursing staff to see if they were noting patients feeling nauseated.

The Ortho Nursing Shared Governance Team nurses felt this change would benefit the patient, alleviate nausea and be a potential cost reduction. Total joint patients that received TXA were already receiving a protocol of oral pain medications to help control post-operative pain per anesthesia orders. Since many of the patients were already

receiving oral pain medications, Jill thought that adding another oral medication would be acceptable instead of IV, especially if it would help prevent nausea. Jill discussed the findings with orthopedic surgeons, and the total joint order sets were updated and finalized in December 2018 to include this medication change.

On January 1, 2019, oral TXA replaced IV TXA. Because Jill shared her findings, this change has benefited total joint patients through the reduction of nausea with a significant cost savings benefit. Additionally, patients benefited from the decrease in costs, from \$448 per dose of IV TXA to \$5.16 per dose for oral TXA.

Nursing Excellence and Outcomes *Across* Parkview

Parkview Regional Medical Center & Affiliates



Linda Francies

Chief nursing officer
Parkview Regional Medical Center & Affiliate Hospitals

At a time when our patients, families and communities needed us the most, our nurses silenced the fear to act, and instead adapted and served. The nurses at Parkview Behavioral Health, Parkview Randallia and Parkview Regional Medical Center developed creative and innovative solutions and demonstrated unparalleled resilience within the context of a healthcare system determined to be at crisis capacity. Dealing with unprecedented complexity, they rose to the challenge and persevered.

The pandemic marked us all in a unique and defining way. I witnessed such extraordinary teamwork and selfless acts. When our nurses come to work each day, they understand that they have the opportunity to be the best part of someone's most difficult time. I am humbled and honored to serve with this remarkable group of nursing professionals.

Enhanced Recovery After Surgery Improves Patient Outcomes

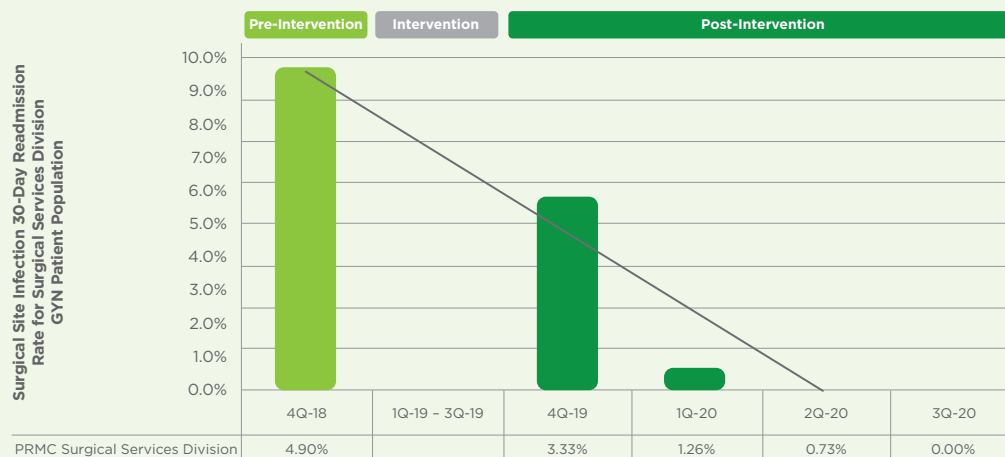
Through close monitoring of our surgical quality data, Parkview Regional Medical Center's (PRMC) Surgical Site Infection (SSI) committee identified a need to improve our surgical outcomes, mainly our surgical site infection rates in our gynecological (GYN) population. In December 2018, members of the SSI committee reviewed the GYN SSI data that demonstrated an infection rate of 4.9%.

Lisa House, RN, SAU/PACU, clinical nurse and surgical clinical project coordinator, had started to investigate Enhanced Recovery After Surgery (ERAS) through the ERAS Society. Lisa began to explore resources from the ERAS Society pathways for specific surgical procedures. Jenny Smith, RN, database specialist, identified, through her work with the American College of Surgeons (ACS), an opportunity to participate in a national cohort to Improve Surgical Care and Recovery (ISCR). Jenny and Lisa identified that participation with the ACS ISCR cohort for ERAS would be an opportunity to collaborate, learn and improve our surgical outcomes.

In January 2019, Parkview joined a national cohort with over 150 other hospitals to improve outcomes, specifically SSIs, for our GYN surgical patients. The goal of the Enhanced Recovery After Surgery project was to reduce SSI 30-day readmission rates in PRMC within the GYN patient population. A multidisciplinary ERAS Steering Committee was formed to develop the best evidence-based pathway for these patients.

PRMC – SURGICAL SERVICES DIVISION

REDUCE SURGICAL SITE INFECTION 30-DAY READMISSION RATE IN GYN PATIENT POPULATION



Key nursing participants in the ERAS Steering Committee were clinical nurses Jessica Berry and Linda Parrish. They worked closely to review data and investigate evidence-based practices for the GYN population. They used guidelines and recommendations from ERAS and ACS to select the appropriate practice changes and identify how they would impact the everyday tasks associated with patient care. This was important as they were then able to assist in providing education and be an ongoing resource for other nurses.

The ERAS Steering Committee developed the evidence-based pathway for the GYN patients including:

- Multimodal analgesia
- Optimal nutrition
- Early mobility
- Avoidance of prolonged fasting
- Evidence-based practices for prevention of harm, including venous thromboembolism (VTE) and catheter-associated urinary tract infections (CAUTI)
- Education of both the patient and their support system

Specific ERAS education began for nurses and techs on the inpatient surgical floors, as well as pre-op clinic staff, office staff, prep/recovery staff, PACU staff, OR staff and physicians. Education was developed which included nursing measures such as patient education, early feeding/proper nutrition, multimodal pain management and early ambulation. Specific to the prevention of SSIs, nurse

education included standardized pre-op bathing as well as standardized cleaning preparation in all of the operating rooms.

Patient education included proper pre-op bathing and good nutrition. Through the efforts of Kristen Miller, RN, peri-operative services, the team received a grant in June of 2019 from the Parkview Foundation. The grant provided chlorhexidine gluconate (CHG) soap for bathing, pre-surgery carbohydrate drinks and pre- and post-surgical immunonutrition drinks free of charge to our surgical patients as evidence showed this would help avoid prolonged fasting. The team also identified that maintaining patient normothermia and the proper use of prophylactic antibiotics would be important.

Post-surgery education centered around early ambulation as the team knew this would require the most coordination across all teams. This one process measure needed support from patients, physicians, physical therapists and nurses as well as coordination between PACU/post-op staff and inpatient staff to achieve the first ambulation on the day of surgery.

2020 saw continued improvements with zero SSIs in our third quarter of 2020. The committee plans to not only maintain ERAS pathways in the GYN surgical service line, but to continue to pursue evidence-based ERAS pathways for all surgical service lines at Parkview.

Nursing Excellence and Outcomes *Across* Parkview

Parkview Regional Medical Center & Affiliates

Reduction of Falls with Injury on the Ortho-Neuro-Trauma (ONT) Unit

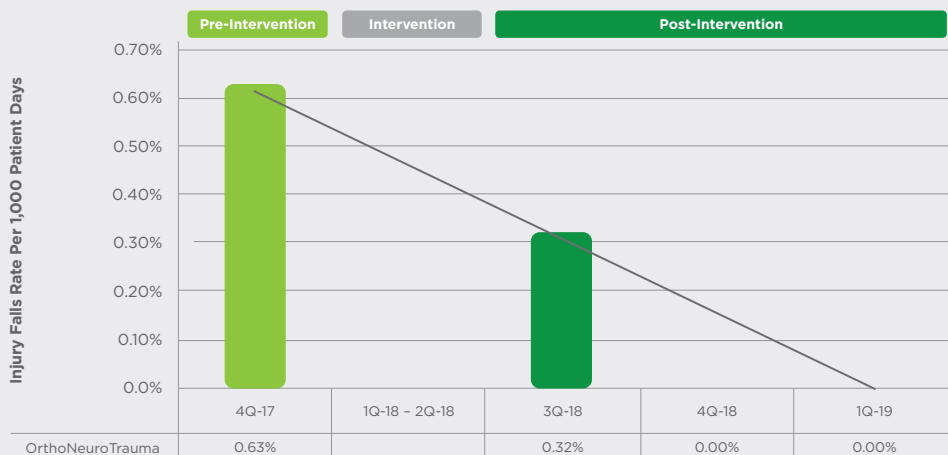
Ortho-Neuro-Trauma (ONT) is a thirty-six-bed inpatient unit of Parkview Regional Medical Center (PRMC) that sees patients requiring care for orthopedic injury, multiple traumas and/or neurologic care. These patients often exhibit decreased motor skills, impulsive behaviors and cognitive deficits, making them more prone to falls. To ensure the safety of these patients with complex needs, ONT utilizes bed exit alarms that notify staff when a patient’s weight has left the bed surface.

The ONT Nursing Clinical Action Team (NCAT), the nursing unit’s Shared Governance Council, saw a trend of increased falls and falls with injury on the ONT unit. In January 2018, the NCAT team reviewed the fourth quarter 2017 NDNQI falls with injury data which confirmed that falls with injury

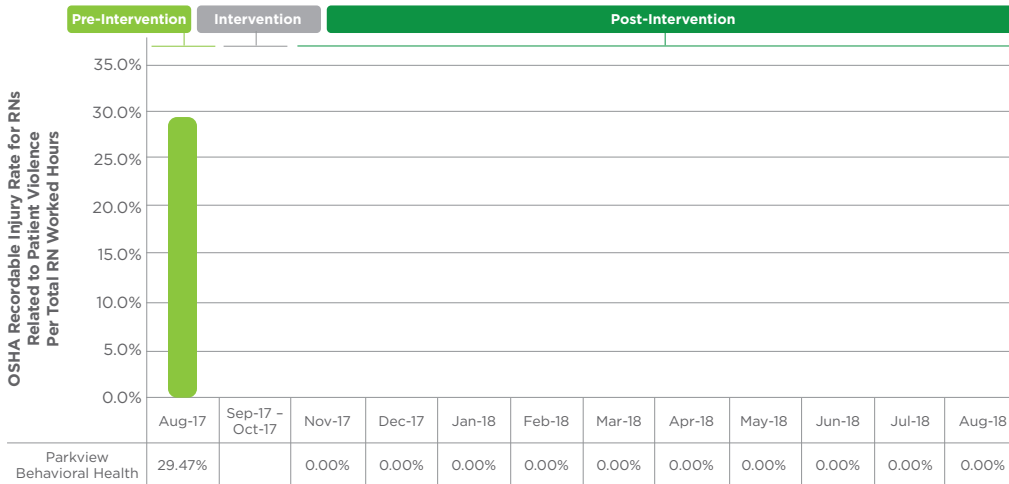
were increasing (.63 injury falls per 1,000 patients vs. .32 injury falls the previous quarter). Kelsi Cantrell, RN, clinical nurse chair of the NCAT team, believed this was connected to alarm fatigue due to the number of times alarms would go off during routine positioning in bed vs. actual patient attempts to get out of bed.

Parkview Health’s Nursing Strategic Plan for 2018 identified the need to decrease the rate of falls with injury, and the NCAT on ONT focused on fall reduction to reduce these incidents. Due to the clinical nurse education and engagement with “Bed Before Boost; Green Before Go,” the NCAT team addressed the alarm fatigue and successfully decreased falls with injury, achieving optimal outcomes for our patients.

ORTHO-NEURO-TRAUMA (ONT)
DECREASE PATIENT FALLS WITH INJURY



EP15EOa: PARKVIEW BEHAVIORAL HEALTH (PBH)
INCREASE OSHA RECORDABLE INJURY RATE FOR RNS RELATED TO PATIENT VIOLENCE



Culture of Safety to Reduce Violence Toward Nurses

The frequency of violence in the workplace at Parkview Behavioral Health was a concern. Extreme verbal and physical aggression toward staff by patients, especially high-acuity patients, was common.

An Occupational Safety and Health Administration (OSHA) recordable injury is any work-related injury or illness that results in loss of consciousness, days away from work, restricted work or transfer to another job. Parkview Behavioral Health wanted to decrease OSHA-recordable incident injuries for registered nurses at Parkview Behavioral Health related to patient violence.

A core team of nurses (Kate Avery, BSN, RN, nurse manager; Kelley Kardys, BSN, RN, nurse manager; Emily Rodenberg, BSN, RN, house supervisor; Jenna Merideth, BSN, RN, nurse lead; Erin Hearld, RN; and Teresa Harber, RN) engaged our Parkview police officers (Michael Eckroth, deputy chief, Parkview Police; Nicky Ferguson, lieutenant, Parkview Police; and Victoria Bolden, officer, Parkview Police) in discussions on how we could decrease workplace violence.

Co-workers Robert Snow, MSN, RN, Rachel Bayon, BSN, RN, Jeffrey Minard, RN, house supervisor, and Abby Pettigrew, BSN, RN, house supervisor, met with the Deputy Chief of Police Mike Eckroth and Lieutenant Nicole Ferguson to identify areas of focus. They decided that establishing a relationship with the patients, strengthening de-escalation skills, reducing power struggles, recognizing when security

needed to intervene and debriefing would be beneficial to the cause. The nurse leaders, the core change team and house supervisors took the lead initially and role-modeled the behaviors to help co-workers strengthen their skills.

In October 2017, the team initiated the first de-escalation drill. The plan was to create a situation that required the police to have to focus on another violent situation. Without the help of the police, PBH co-workers would need to de-escalate a “patient” and get them safely back on the unit. As these drills continued, the PBH team became increasingly confident and slowly began to become more proactive instead of reactive.

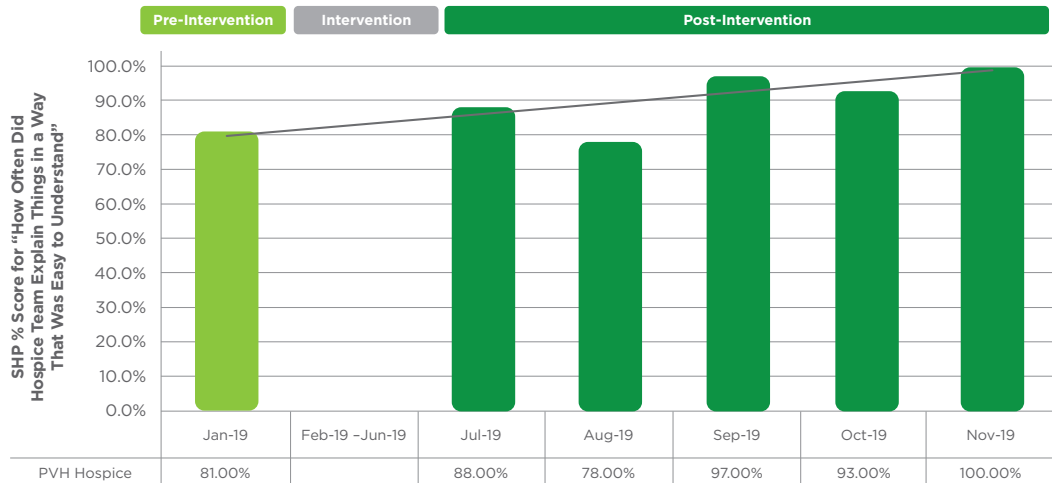
Nurses began to meet with patients at the beginning of the shift to discuss their plan of care and identify other methods for the patient to channel their frustrations when upset. The core team provided coaching for nurses to partner with patients and meet them halfway. The focus became on asking a patient “what could we do?” instead of saying “no” — which often led to escalated behaviors.

Through these actions, injuries to RNs related to patient violence were reduced, and the behavioral health units were recognized with the Press Ganey Success Story Award for decreasing violence and injuries related to violence in behavioral health.

Nursing Excellence and Outcomes *Across* Parkview

Parkview Regional Medical Center & Affiliates

PRMC, RANDALLIA - HOSPICE
IMPROVE HOSPICE END-OF-LIFE PATIENT EDUCATION SCORE

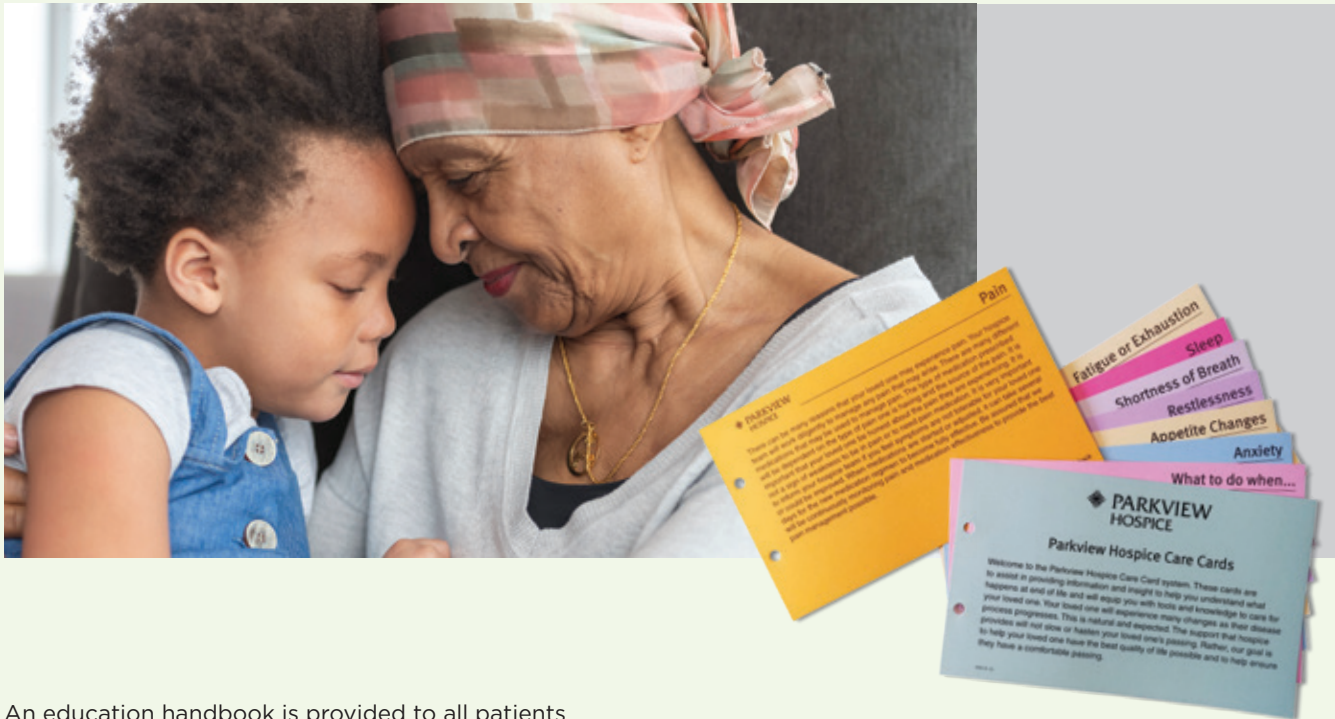


Improving Hospice End-of-Life Care Education

Hospice care focuses on patients who are ill and nearing the end of their lives while also providing compassion and support to families. When a loved one is diagnosed with a terminal illness, associated stress and anxiety affect a person's ability to absorb information and make decisions without feeling overwhelmed. Hospice family care services are designed to make the hospice experience easier for the family by providing loved ones with knowledge and guidance about end-of-life care.

In January 2019, the Nursing Clinical Action Team (NCAT) recognized a decline in patient experience results specifically related to hospice education on end-of-life care interventions. In this case, patient experience was measured by the Strategic Healthcare Programs (SHP) survey using the question, "How often did the hospice team explain things in a way that was easy to understand?" NCAT members focused on improving hospice end-of-life patient education by looking at the process of providing this education in the hospice setting. The clinical nurses discussed how to improve the education process with the goal of improving patient and family understanding of end-of-life care.

Nursing Excellence and Outcomes *Across* Parkview



An education handbook is provided to all patients and families during the admission process to hospice as the primary tool used to provide education. Feedback from families revealed that the handbook containing a large volume of information was overwhelming. While content was relevant to end-of-life education, the handbook was not easy to navigate. Families reported they did not open it and would sometimes throw it away.

The clinical nurses were determined to develop something simple and more effective in helping families be better equipped to deal with end-of-life care. Various options were explored such as purchasing an already developed tool. However, no pre-printed material was found that achieved the goal of the clinical nurses. After review of options, Christine Simon and Alicia Schutt started working on development of a custom tool, *Hospice Care cards* and *What To Do When* cards in the first quarter of 2019.

The NCAT team of clinical nurses redesigned the workflow for how patient and family education would be provided using these supplemental custom education care cards. The NCAT team nurses wrote the content and gathered input from available evidence and other clinical nursing team members in the department. The new tools were implemented in June 2019.

Through the identification of the problem and the work of the NCAT to redesign how patient and family education is provided, the SHP score for improved hospice end-of-life patient education has improved, showing success in the education of key points for end-of-life care.

Nursing Excellence and Outcomes *Across* Parkview

Parkview Wabash Hospital



Cathy Wolfe, MBA, BSN, RN, CENP

Chief nursing officer/VP of patient care services
Parkview Wabash Hospital

Through resilience, steadfastness, Midwest values and sheer determination, Parkview nurses have provided nursing care for 100 years to the patients of Wabash County and the surrounding areas. They have persevered through the depression, flu epidemic and now COVID-19.

These are not normal times. It's hard enough to find words that adequately express my appreciation for the great care that our nurses provide day in and day out without praise or fanfare. They continually give to others by providing more compassion, care and grace to our patients, yet still find the time to grow professionally and personally by obtaining their MSN, BSN or acknowledgement of their expertise through certification in spite of it all. They are unsung heroes! Words aren't enough.

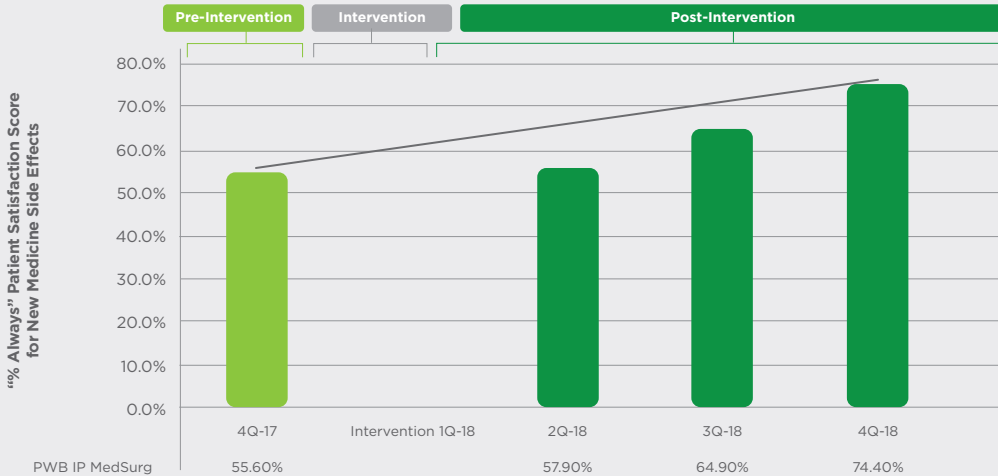
Improved Patient Understanding of Medication Side Effects

Parkview Wabash hospital strives to provide medication education to patients to assure understanding and increase patient compliance after discharge. At the end of 2017, patient experience scores for the Medical Surgical Unit for medication side effects and patient understanding were below the national benchmark for the compare group. These results reflect the patient perception of our care and shed light on the need for evidence-based strategies to improve the perception of the medication education provided.

Our Nursing Clinical Action Team (NCAT) began to look at the issue of the perception of medication side effect teaching and instruction. Clinical nurses and NCAT co-chairs Amber Niccum, BSN, CMSR, and Kristie Norris, BSN, CMRN, met with other nursing members and discussed the scores and their concerns around the patient perception of medication side effect teaching. The team brought the concern to Cathy Wolfe, CNO, to discuss ideas to help improve scores and our patients' perceptions of the care we provide. The goal was to reinforce education to the patient

Nursing Excellence and Outcomes *Across* Parkview

PARKVIEW WABASH HOSPITAL - MED/SURG UNIT IMPROVE NEW MEDICATION SIDE EFFECTS COMMUNICATION



and family about the medications they are taking as well as the possible side effects prior to discharging from the medical floor. This also helps lower hospital readmissions when the patient has a good understanding of their care needs.

In February 2018, the NCAT team decided to add patient-specific medication instruction cards as a tool to help patients better understand their medications and side effects. These cards included the medication name, class, indication, side effects and when to call your doctor, as well as any patient-specific notes. The cards are provided to patients anytime they are started on a new medication, with the RN providing one-on-one instruction at that time. Building on using the medication cards and medication side effects brochure, the Medical Surgical Unit increased patient involvement in the education process.

They also implemented the “teach-back” method for review of education. This method has been shown to reduce medication errors, assess a patient’s level of knowledge to close information gaps, and improve retention of new medication information.



The team also provided hands-on education to other nurses on how to add medication information to the patient’s discharge instructions via the EPIC discharge navigator. These instructions are printed and sent home with the patient and their families at discharge for future reference. They are also available in the MyChart electronic medical record. Each nurse completes the medication education with the patient and family before discharge — reinforcing the importance of understanding their medications and possible side effects.

Through the work of our unit Shared Governance Council and the support of nursing leadership, our patient experience for medication side effects continues to improve following this patient-centered intervention.

Nursing Excellence and Outcomes *Across* Parkview

*Parkview Whitley Hospital &
Parkview Warsaw*



*...pouring every ounce of
care they give to those
that need them most.*

Ashley Wirges, MSN, RN

Chief nursing officer/VP of patient care services
Parkview Whitley Hospital & Warsaw Hospital

*“With loyalty will I endeavor to aid the physician in his
work, and as a ‘missioner of health’ I will dedicate myself to
devoted service to human welfare.”*

Florence Nightingale Pledge

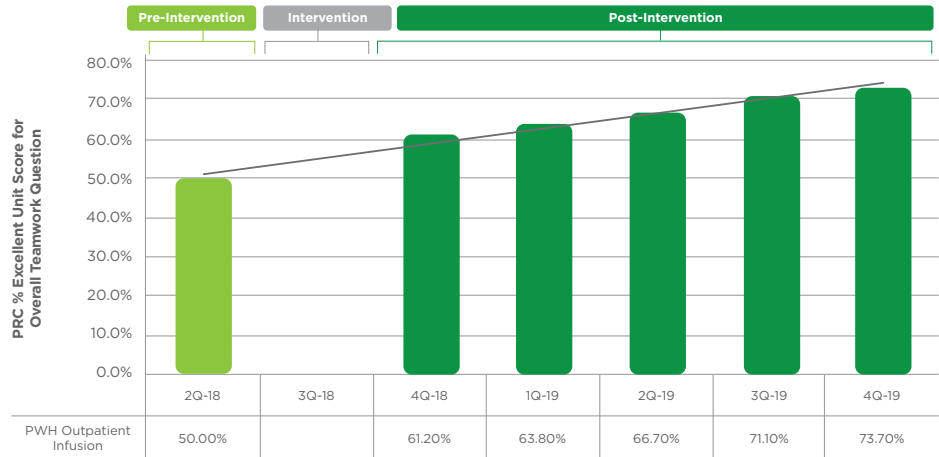
As we reflect on this past year, the words “loyalty,” “missioner,” “dedicate,” “devoted” and “service” from the Florence Nightingale Pledge have never been so true. Over the course of the year, Parkview Whitley Hospital and Parkview Warsaw nurses have endured some challenging times. They have worked tirelessly, pouring every ounce of care they give to those that need them most. Somedays they drew from what little strength they had and gave it to somebody else

in need, be it a co-worker or a patient. Sometimes that meant staying late to comfort a patient who was scared or calling family to provide an update when visitation was limited. Whatever it was, and despite the many challenges, the nursing staff at Parkview Whitley Hospital and Parkview Warsaw continued their commitment and dedication to excellent care and service to every person every day.

Nursing Excellence and Outcomes *Across Parkview*

Improved Outpatient Infusion Care Coordination

PARKVIEW WHITLEY HOSPITAL - OUTPATIENT INFUSION
IMPROVE PATIENT SCORE FOR CARE COORDINATION "OVERALL TEAMWORK BETWEEN DOCTORS, NURSES AND STAFF" QUESTION



At Parkview Whitley Hospital's outpatient (OP) infusion department, we provide patients with IV antibiotics, IV fluids, blood transfusions, biologics and other medications. Some patients come in every day of the week and others come in less frequently for treatment.

In the second quarter of 2018, the OP infusion patient experience rating had dropped to the 50th percentile for care coordination/overall teamwork between doctors, nurses and staff. As an area that provides one-on-one care to each patient when they are in the center, this was concerning to Carrie Barcus, BSN, RN, CNOR — who set out to improve patient perception of the outpatient infusion center in these categories.

Carrie discussed ways to increase patient satisfaction. She sought to understand patients' perception of care, emphasizing the importance of communication, education and teamwork to the overall coordination of a patient's care and in helping patients be responsible for their own health status. She explored existing literature for evidence-based practices that focused on developing teamwork and collaborative communications. And, she specifically looked for evidence of how teamwork and communication affected the individualized care of patients.

Carrie took the initiative to specifically explore opportunities to improve care for patients receiving infusions on evenings or weekends. In these cases, the center was closed and infusions had to be administered in the emergency department (ED). In August 2018, Carrie met with Michelle McNeil, ED manager, to share suggested new evidence-based workflows to improve communication and comfort for patients when they received their infusions in the ED. The team agreed that when three or more patients were scheduled for weekend infusions, a nurse from the infusion center would come in and work. This would decrease patients' wait times, provide better support for one-on-one care and education needs, and allow the ED team to focus solely on the ED patients.

The infusion and ED teams created standard work for communication with patients and families, which included the concept of using "key words at key times." The infusion team also created a more patient-centric schedule. For example, if a patient must come in three times a day for an antibiotic, the infusion team would come in early so the patient could receive two infusions in the center and only one infusion in the ED.

With the focus on individualized care, overall teamwork and providing support for one-on-one education, patient experience survey results for OP infusion have continued to increase since the second quarter of 2019. Infusion and ED nurses work together to ensure the provision of excellent care for every person every day.

Nursing Excellence and Outcomes *Across* Parkview

Parkview DeKalb Hospital



Karra Heggen, MSN, CENP

Chief nursing officer/Vice president of patient care services
Parkview DeKalb Hospital

**“... nurses showed
compassion, competence,
resiliency, dedication and
lots of grit.”**

In reflecting upon 2021, our Parkview DeKalb Hospital nurses showed compassion, competence, resiliency, dedication and lots of grit! Our nurses gave of themselves to make sure that through the adversity of COVID, our patients and families experienced outstanding care. The pandemic was not going to hold down our nursing excellence and adaptability! No, we

were the recipients of the 2021 Inspire Hospital of Distinction from the Indiana Hospital Association for our nursing infant and maternal health results.

Not only did our nurses flex to care for additional surge units and beds on their unit, but they also implemented a new call light system, iPhones, and cardiac monitoring system — utilizing technology to improve patient experience, quality outcomes and co-worker workflows.

Nursing Excellence and Outcomes *Across* Parkview



Nursing Practice at Parkview DeKalb Hospital

Parkview DeKalb Hospital empowers our clinical nurses to look for ways to improve patient experience and outcomes. Pediatric dental patients can be very apprehensive, which tends to affect parent and staff anxiety levels as well. Joy Yarian, RN, Surgical Admission Unit (SAU), discovered a great solution to reduce pediatric patients' anxiety in a playful, creative way.

Joy secured a highly colorful and vibrant siren light in their department. When the surgery nurses come to wheel the patient's bed to the operating room, SAU nurses hand the light to the child and ask them to turn it on to see the surprise. Pediatric patients are delighted and empowered, and their trip to the operating room feels more fun and less intimidating.

Thanks to Joy's innovative approach, the anxiety and stress felt by PDH pediatric patients, their families and their care teams has been reduced. What had been a stressful time was transformed into a positive experience!

Nursing Practice *at* Parkview Physicians Group



Lee Ann Hinsky, DNP, MSN, RN
Vice president of patient care
Parkview Physicians Group

Taking Extra Measures on Behalf of PPG Patients

The registered nurse (RN) professional code of ethics states that “our primary commitment is to the patient.” Our goal is to provide patients with the highest quality care while keeping them safe. Nurses know patients are not simply a set of symptoms presenting for treatment. As RNs, we understand that we are caring for the whole person — body, mind and spirit.

Ambulatory care RNs, nurses in the outpatient setting, often care for high volumes of patients in short periods of time, frequently handling issues with patients that can be unpredictable. Through these encounters, ambulatory RNs must be both collaborative and independent as they provide care to address patients’ wellness, acute illness, chronic diseases, disabilities and end-of-life needs.

“... I am proud of their commitment to doing everything they can to provide the best care possible to every person, every day...”

When the COVID-19 pandemic began, nurses and other healthcare professionals became our first line of defense. Despite the challenges, the pandemic did not alter how Parkview Physicians Group (PPG) RNs provided care to the whole patient. COVID-19 did not hinder their ability to partner with other healthcare professionals, nor did it stop their ability to continue to address the needs of our patients. Instead, the pandemic shined a light on the tenacity of these nurses. With calm courage and quiet determination, our nurses helped save the lives of many patients affected by this unknown disease. They learned to care for patients in a new, virtual way when they could not see patients in person — often functioning as the nurse, tech support, registrar and social connection to the world outside of their homes.

When PPG offices and clinics reopened, our nurses shifted, once again, from virtual to a flood of in-person patients who had delayed care because they were afraid to venture out. Our nurses cared for patients while experiencing higher mental and emotional stress — at levels never before encountered.

The landscape of ambulatory care continues to change, and PPG RNs continue to adapt. I am so proud of our nurses. I am proud of their courage. I am proud of their commitment to doing everything they can to provide the best care possible to every person, every day, despite a pandemic. And mostly, I am proud of how they continue to live out the professional code of ethics.



Why We Are Nurses

I am honored to be a nurse leader and to be able to facilitate the needs of my fellow nurses. Though I experience amazing team effort daily, a recent situation with an elderly patient, who has no family or support system locally and is on a fixed income, stands out as a fitting example of why we became nurses in the first place.

At the start of this patient's care, and because she has a tough time securing transportation, we were thankful we could set up a virtual visit for her with a GI provider. After the visit, our nursing team was able to connect her with Parkview's medication assistance program (MAP) to help with the cost of the medication and to ensure her willingness to be compliant with clinical recommendations

for her symptoms. The GI provider determined she needed a diagnostic GI procedure. Without hesitation, a nurse team member drove the necessary prep to her home and reviewed the instructions with her in person.

To further ensure she could be compliant in her care plan, we pulled together to coordinate transportation for her on the date of her procedure. As you can imagine, our nursing team became so invested in this patient's success that we were excited to be able to check in on her while she was on-site for her procedure as well as provide continuous follow-up in the days afterward to check her status.

This is why we are nurses!

Cristi Bollinger, RN
Clinical supervisor
Parkview Physicians Group — Gastroenterology

Nurse Recognition

Parkview Health recognizes the important contributions nurses make every day in the care of our patients, families and community.



Parkview Health Shares Contributions of Nursing

We share the accomplishments and contributions of our nurses in the care of patients and families throughout Parkview.com. This website is a place where co-workers, family members and members of the broader community can visit and learn about unique and innovative ways Parkview nurses are improving patient care and shaping the nursing practice. A vast and varied number of contributions are highlighted throughout these pages.



The Nightingale Award is given to nurses for their contributions to nursing practice and patient outcomes. The purpose of this award is to recognize how nurses incorporate the philosophy of Florence Nightingale into everyday practice.

The Nightingale Award was established by Parkview Foundations in memory of the late Marge Carpenter, LPN, through the generosity of her husband, the Rev. Doyle Carpenter. Marge was described by her Parkview co-workers as, “An innovative woman who had a strong work ethic, consistently exceeded the expectations of patients and families, and served as a mentor to younger

nurses. Her dedication manifested daily through her work ethic, involvement in quality improvement, reliability and perseverance. She was a servant leader at work, in the community and at home.” This award seeks to not only remember Marge but to also honor nurses who embody the qualities she exhibited daily.

As servant leaders, nurses who are selected to receive the Nightingale Award provide compassionate and holistic care. They are innovative and mentor others in ways to provide care in a team environment. They consistently exceed patient and family expectations, and they are respected by co-workers for their work ethic and their dedication to quality improvement, reliability and perseverance. These qualities align with the organizational priorities related to provision of excellent care, tailoring a personal health journey and demonstrating world-class teamwork.

The Nightingale Initiative

2018 Recipients



Left to right:
Judy Boerger, CNE
Rachel Perry, RN
Charlotte Hanley, RN
Christine Howell, RN
Jeanette Hontz, RN
Mike Packnett, president and CEO



2019 Recipients



Left to right:
Judy Boerger, CNE
Katrina Wells, Advanced RN
Julie K. Johnson, RN
Lisa Myer, RN
Mike Packnett, president and CEO



2020 Recipients



Left to right:
Corinne Johnson, RN
Lorie Johnston, BSN, RN
Sara Cook-Crandall, RN
Jaylin Miller, BSN, RN
Rachel Bayon, BSN, RN



Nurse Recognition



The DAISY Award recognizes nurses for providing excellent and compassionate care to patients and their families. It was founded in 1999 in remembrance of Patrick Barnes, who lost his battle with an autoimmune disease at the age of 33. DAISY stands for Diseases Attacking the Immune System, and the award is a way for Patrick's family to thank nurses everywhere for their unwavering care.

2021 Winners

Jodi Harlan, BSN, RN
Parkview Noble Hospital

Jeanie Bradley
Parkview Cancer Institute

Kristin Baksa
Parkview Heart Institute

Kyan DiVita
Parkview Regional Medical Center

Megan Middleton, BSN, RB
Parkview Heart Institute

Sara Martin, RN
Parkview Randallia Hospital

Allison Thorpe, CMW
Parkview Physicians Group

Mary Lou Wright, RN
Parkview LaGrange Hospital

Ann Etter, RN
Parkview Huntington Hospital



Judy Boerger, MBA, MSN, RN, NEA-BC

Former senior vice president, chief nurse executive
Parkview Health

The Judy Boerger Excellence in Nursing Leadership Award

Judy Boerger, MBA, MSN, RN, NEA-BC, former senior vice president, chief nurse executive, Parkview Health, embodies the highest professional standards and is a role model for compassion and exemplary professional practice through her servant leadership. She has advanced the professional practice and image of nursing at Parkview Health, in our community and in the nursing profession.

Exhibiting exceptional compassion and commitment to patients, colleagues and the nursing profession, Judy continually mentors nurses to grow and advance in practice. She empowers nurses to have a voice in the care of patients and supports the foundation for this interprofessional collaborative care environment. Her work to create a professional nursing environment continues to shine through exceptional clinical outcomes and professional growth of our nursing teams.

Judy led Parkview Health to the achievement of system Magnet® designation and continues to encourage our nurses to share their voice at all levels including clinical research, board appointments, national presentations and publications.

The Judy Boerger Excellence in Nursing Leadership Award will be awarded annually during Nurses Week to honor a leader who embodies these high professional standards. The first award will be presented during Nurses Week 2022.

*“Let whoever is in charge keep
this simple question in her head
(not, how can I always do this
right thing myself, but) how can
I provide for this right thing to
be always done?”*

- Florence Nightingale

Nurse Recognition



At Parkview Health, staff are dedicated to helping those in need no matter the circumstance. This was evident in the fall of 2020 when Michelle McNeil, nursing services manager, emergency department, Parkview Whitley Hospital, and her husband Rich, paramedic, Samaritan flight crew, were both recognized for providing quick and exceptional treatment to a little girl and her family while enjoying a day at a pumpkin farm.

Michelle and Rich witnessed a terrifying trauma when a girl went airborne while playing on an inflatable slide at a pumpkin patch. Both Michelle and Rich, being trained in emergency and trauma care, flew into action — demonstrating teamwork and compassion by splinting the child's broken femur

A Family of Guardian Angels

using a cardboard box and immobilizing her until medics arrived and she could be transported to the hospital for further treatment.

During the interview for their heroic actions, the little girl and her sister presented Michelle and Rich with Parkview Guardian Angel pins.

The Guardian Angel program offers an opportunity to say 'thank you' to a caregiver or staff person who provided excellent care. Sponsored by the Parkview Foundation, these awards not only give patients and families the opportunity to honor a healthcare worker for excellence, they also promote and encourage the same kind of compassionate care to everyone who walks through Parkview Health's doors.

Michelle received a framed picture of the kudos to hang in her office. She says this reminds her everyday why she not only became a nurse but also why she continues to work directly with patients each day in her manager role.



Honoring a Nursing Tradition: Pinning Ceremony

A nursing pinning ceremony is a sacred moment that marks the formal entry into the profession of nursing. With the continuation of COVID-19, many schools in the surrounding area began to cancel their in-person pinning ceremonies.

Completing a nursing program requires dedication, perseverance and talent. Parkview believed these students needed to be commemorated for their hard work and to experience the joy of reaching such a high level of achievement. Our team created a pinning ceremony for nurse graduates from multiple schools. The event was held at Parkview Regional Medical Center to honor and celebrate the graduates' tenacity and deep passion for helping others. We also had livestreaming for families so they could be part of the event, just like a traditional pinning ceremony at one of the area schools.

*“It takes special people
to be called to this career,
and we are proud to have
so many amazing nurses
within our health system.”*

*-Erin LaCross, senior vice president of
nursing professional development,
Parkview Health*



Broken, But Not Divided

In July 2020, when Parkview nurse Danielle “Danni” Barger-Muncie, BSN, BA, RN, HN-BC, saw callouts for local artists to participate in the Fort Wayne Museum of Art Chalk Walk, she knew she wanted to participate.

Danni, who has a second and sixth grader at home, teaches nursing at Ivy Tech and serves as the holistic nurse lead for Parkview hospitals in Allen County. Danni had a lot on her plate and on her heart when she took on this project.

“My background is in art,” she said. “In fact, I have a Bachelor of Fine Arts degree from the University of Saint Francis. My lifestyle just doesn’t lend to pursuing it. But when I saw this opportunity, I knew that I really needed to be involved in a creative outlet for my own spiritual health.”

“I hadn’t worked with patients since November 2019, and I missed it,” she shared. “I felt very guilty and displaced not being at the bedside during the pandemic. But I just had to be realistic. I have so much on my plate and a child with asthma, and to be honest, I was nervous about bringing an illness home. But even though I’m not the one standing with a patient on a ventilator, I still feel that connection to my fellow nurses. There’s a common ground that we share. We know what each other is going through. We understand.”

Because written language can be limiting, Danni decided to share all she was feeling in a form that was more familiar. She began sketching her entry for the Chalk Walk.

“I was thinking through the recent events surrounding the COVID-19 pandemic and wondering how to put them into an image. There is so much fear and hostility across the globe and across populations. It has been my experience that nursing is a population of its own. There is a natural camaraderie in this profession. There is a kindred connection from knowing we’ve had similar experiences that sometimes cannot be put into words. There is enough common ground that I think nurses often see each other just as nurses rather than by age, gender or race.”

“The COVID-19 pandemic has affected people across the globe without regard to demographics. I feel like our equality as humans should naturally rise over our differences in the wake of this. I tried to make this image gender-neutral and inclusive of all skin colors, while showing some of the emotions nurses have experienced during this frontline fight.”

Once Danni had her concept, the rest was therapy. “I spent the day on my driveway, drawing, covered in chalk, in the heat. I told my family that this was the only thing I was doing that day, no interruptions. It was just the catharsis I needed.” After seven hours, Danni’s work of art was complete, but she never expected her vision to garner the attention it did.

“After the Fort Wayne Museum of Art judging, my friends started sharing the results on social media,” she said. Danni had won the People’s Choice category. “Eventually, it got into the hands of Vicki Maisonneuve-Babb, director of Nursing Center of Excellence & Magnet, and she asked if they could use it in their Year of the Nurse celebration. I was honored.”

Each Parkview facility received a framed and matted copy of Danni’s artwork, titled “Broken, But Not Divided.” Her beautiful depiction of the emotional weight all nurses carry will go on display for patients, staff and visitors to enjoy.

“I hope that when nurses look at it, they remember the commonalities we all have and feel proud of the profession they’ve chosen,” she said. “I hope they know that we always have each other. We are connected to one another, and we can do anything.”

Nursing Evidence-based Practice Fellowship



Pictured above are some of the Parkview nurses that participated in the EBP Fellowship program in 2019.

Our Commitment to Nursing Excellence & Exemplary Outcomes

Based on research findings, quality improvement and other forms of evaluation data and expert opinion, evidence-based practices (EBP) identify areas for process improvement for the purpose of advancing patient outcomes. Evidence-based practice challenges nurses to look at the “why” behind existing patient care techniques and processes in the search for improvement.

The EBP Fellowship program is offered to RNs who desire to learn more EBP and develop their skills for this approach to patient care. These skills include how to identify and focus on a clinical problem, how

to conduct and evaluate research, and how to create and carry out an EBP project for application to clinical issues. Nurses in this program utilize the Parkview Six As Model for EBP to guide their projects to completion. In addition to the classes, each participant commits 10 hours paid time per month for six months in order to complete their EBP project. Each EBP participant is also assigned a mentor to guide them through their project.

In 2019, Parkview had 16 nurses participate in the EBP Fellowship program. Unfortunately, the program was placed on hiatus in 2020 due to the COVID-19 pandemic.

Examples of EBP projects completed in 2019

**Leigh Ann Brooks, MSN, RN, RDN, LD, CDCES, BC-ADM
Parkview Health**

For inpatients with uncontrolled diabetes (A1C >7%), does providing diabetes education and case management support prior to discharge result in a reduction in readmissions within 30 days, a decrease in A1C and complications (compared to those with no diabetes education or case management support prior to discharge)?

**Angie Evans, MSN, RN, CPHQ, HACP
Quality Management Director
Parkview Regional Medical Center & Affiliates**

In elective spine cases, does contacting patients or emailing them education material about non-phrenological pain control methods post-discharge decrease their readmission or ED visits for 90 days?

**Rachel B. Gabet, BSN, RN, LDE
Diabetes Care and Education Specialist**

In patients with T2DM, does the use of CGM (compared to the current practice of SMBG) result in improved disease management, evident by A1C reduction?

**Nora Hively, BSN, RN
Parkview Whitley Hospital**

In medical/surgical patients, does providing a quiet time protocol (compared to not providing a quiet time protocol) increase sleep quality and/or patient satisfaction?

**Toby Lamp, ASN, RN
Parkview Hospital Randallia**

In ICU patients, does the use of a weighted blanket (versus standard practice) decrease the need for sedation in AWS patients?

**Alainna Martin, BSN, RN, RNC-OB
Parkview Whitley Hospital**

For normal newborns identified as “at-risk for hypoglycemia,” does the use of prophylactic oral glucose gel prior to feedings (compared to no treatment) decrease the rate of hypoglycemia in the first 24 hours of life?

**Danielle Payne, MSN, BSBio, RN, FNP-BC
Clinical Nurse Researcher/Program Coordinator**

Do experienced ICU nurses who work eight-hour shifts compared to 12-hours shifts have higher retention rates at one year?

**Alison Pershing, MSN, RN, CNOR
Vice President of Patient Care Services
Parkview Whitley Hospital**

In patients admitted from the emergency department, does the use of technology to video conference bedside handoff (compared to standard handoff) report improved patient satisfaction and patient safety scores?

**Allisandra Viera, RN, CNRN
Parkview Regional Medical Center**

What are the barriers for assessing skin on inpatient units for bedside staff nurses?

**Ali Wangara, BSN, RN
Parkview Regional Medical Center**

Do ER patients admitted in OBUs (compared to CDUs) receive more focused care?

Through 2019 and 2020, three nurses went on to complete research studies based on their EBP questions. In addition to these research studies, we continue to have strong research interest, with 16 active research studies led by nurses in 2020.

In 2021, Parkview again began offering EBP Fellowship classes in response to continued interest by Parkview nurses. The program format changed from in-person to virtual to meet the ongoing challenges of our current healthcare situation.

Nursing Research Studies

Parkview nurses have served as Principal Investigator on 41 nursing research studies from 2018–2021.

Areas of Study:

- Does a nurse's awareness on sepsis increase by participating in an interactive sepsis online education program?
- A quantitative study to assess the effect of weighted blanket intervention for pre-surgical anxiety and pain, and post-surgical restlessness and nausea, in planned surgery patients
- Influence of music therapy on length of stay in surgery patients (PHH and PNH)
- A review of the effectiveness of using a chlorhexidine gluconate (CHG) application in the Surgical Admission Unit (SAU) on reducing the rate of surgical site infections in knee prosthesis (KPRO) surgery patients (POH)
- Evaluation of the effect of early mobility on spinal surgery patients
- Nurses' confidence in the ability to care for patients on mixed population unit (PLH)
- Enhancing patient bedside handoff communication using video conferencing technology
- Retrospective chart review to determine effect of continuous glucose monitoring
- A comparative evaluation of chest tube insertion site dressings: A randomized controlled trial
- Direct care nurse and patient care tech perceptions of patient turning practices
- Study to assess the effectiveness of aromatherapy for prevention of post-operative nausea and vomiting
- Impacting outcomes with implementation of a progressive mobility team in the ICU
- Direct care nurse perceptions of nursing peer review: Part 2
- DrIFT study: Displacement in feeding tubes
- Nurse manager succession planning and associated outcomes
- A pilot study to assess efficacy of weighted blanket therapy for anxiety and restlessness in outpatient infusion center patients
- Mortality rates post in-hospital cardiac arrest: Effect of simulation
- Circumcision timing and effects on infant behavior
- A randomized control trial to compare NPO status against a specialized pre-cardiac cath diet
- Enteral nutrition in COVID-19 patients
- Validation of an evidence-based, nurse-designed fall risk assessment tool
- Evaluation of prone positioning in non-intubated patients on improvement in oxygenation
- Evaluation of nursing experience of caring for patients at the end-of-life in units without an established bereavement program

- Evaluation of a COVID-19 Mobility Team
- The use of cryotherapy to prevent paclitaxel-induced peripheral neuropathy and nail changes in women with breast cancer
- The effect of care coordination on hemoglobin A1C for type 2 diabetes patients
- Nursing evidence-based practice survey: Part 2
- A comparison of secondary medication administration delay between the BD/Alaris and ICU Medical Plum 360 Large-volume IV Smart Pumps
- Nurse Leader Mentor Program outcomes
- Safety for healthcare workers and patients: A comparison of ceiling lifts and AirTap for in-bed repositioning and lateral transfers
- Perceptions of nurses for use of AirTap LC
- The incidence of chemotherapy extravasation in the inpatient and ambulatory infusion areas of a community cancer center
- Identification of postpartum hemorrhage risk factors and quantified blood loss after vaginal deliveries
- Post-operative vital signs: Traditional vs. evidence-based
- Fatigue in the nursing workforce
- Effect of warming IV fluids during MICU transport on patient comfort and temperature
- Multimodal pain management effectiveness in geriatric hip fracture patients
- Preparing nurse mentors to support bedside nurses
- Nursing and support staff perceptions on inpatient MyChart bedside utilization
- Validation of an evidence-based, nurse-designed fall risk assessment tool: Study 2



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