Nurses are the heart of our health system.

Nursing Annual Report 2014
Keep on Growing!

To be a premier provider of health care in this community, we have to continuously re-evaluate the evidence, help patients engage in their health care and prepare them well for when they go home. We did all of that in FY 2014.

We celebrate our continued growth as a nursing division in facilities, skills and accomplishments. In welcoming new nurses from Bethesda North Endoscopy and the TriHealth Hand Surgery Center, we met the challenge of merging their cultures, practices and processes with our own.

TriHealth Nursing has won numerous awards this past year for outstanding individual, unit and facility performance.

We invested in an MSN program to develop clinical nurse leaders. We fulfilled even more opportunities to meet our community’s needs. Nurses adjusted our work to top-of-licensure practice, focusing our efforts on skilled care and education of our patients.

In response to health care reform, we are remaining flexible and responding quickly to whatever we need to do. Our patient and family advisory councils are expanding and running full steam. We've made quality improvements and continue to grow our research efforts.

Two years into our Magnet designation, we have continued looking for opportunities to meet or exceed our patients’ expectations. We have enfolded our new partners into the process.

Nursing is hard work, and we have a passion for it. Our hearts are in it. We provide high-quality nursing care with compassion, and we’ve raised the bar on our professionalism.

We thank you, our nurses, for your efforts. Let’s continue to tell the story of the excellent job we do.

Mary Irvin, MSN, MBA, RN, NEA-BC
Senior Vice President and Chief Nurse Executive, TriHealth

Stefanie Newman, MSN, RN, NEA-BC
Vice President and Chief Nursing Officer, Bethesda North Hospital

Paula Niederbaumer, MSN, RN, CNP-BC
Vice President and Chief Nursing Officer, Good Samaritan Hospital
Transformational Leadership

*Through their vision, influence and clinical knowledge, nurse leaders use creative energy to solve problems and develop innovative ideas.*

Leadership Series Hones Skills of Charge Nurses

Corporate Educational Services Leadership Academy partnered with executive Nursing leaders to develop a program for 160 TriHealth charge nurses to give them a common foundation of leadership principles and skills critical to this role.

The six-session leadership development series for charge nurses provided new tools to enhance communication and leadership, effectively manage conflict and change, and gain better understanding of budgeting and finance. The sessions also facilitated networking, sharing best practices and interacting with Nursing’s senior leadership.

An ongoing charge nurse forum for networking and leadership skills will follow the completion of the development program.

Corporate Educational Services also coordinated an ongoing Leadership Cohort Series for managers and assistant managers, offering quarterly sessions for networking, best-practice sharing and discussion of selected leadership topics and books.

For the first time, Perioperative Services at Good Samaritan Hospital accepted three role transition students, who completed 120 hours of hands-on work as they cycled through Surgery, Surgicare and the Post-Anesthesia Care Unit.

“We wanted to build a bridge to expose nursing students to the world of Periop to see what we do day to day and see if they like it,” says Brittany Caldwell, BSN, RN, CNOR, Perioperative nurse educator.

Role Transition Programs

More than 300 nursing students finishing nursing degree programs participated in role transition experiences throughout the TriHealth system in FY 2014. Working through Corporate Educational Services, nursing students were assigned to work side by side with a TriHealth nurse in clinical settings where they had a particular interest. As students explored various nursing assignments, units assessed prospective employees.

With the acquisition of TriHealth Hand Surgery Center, 538 Oak Street, in early 2014, TriHealth Nursing gained 19 nurses who work with nine hand surgeons. In 2013, the center performed 3,400 surgeries. The hand surgeons also perform procedures at Good Samaritan Hospital, Bethesda Surgery Center and Bethesda North Hospital.

Specialty Services Join TriHealth

A patient care assistant in the Neonatal Intensive Care Unit, A.J. Vitucci, completed a role transition experience in Good Samaritan Perioperative Services during his final semester at the Good Samaritan College of Nursing and Health Science. Vitucci, who worked with preceptor Holly Seals, BSN, RN, CCRN (right), was hired as a Good Samaritan surgical nurse upon graduation.
TriHealth purchased Endoscopy Center North, 10600 Montgomery Road, in 2013, adding 21 registered nurses and one licensed practical nurse to the TriHealth team. Several of the nurses are already pursuing BSN degrees with the assistance of TriHealth’s tuition reimbursement program.

The center has five endoscopy rooms. TriHealth Digestive Institute physicians and independent gastroenterologists perform more than 8,000 procedures each year, primarily colonoscopies and upper gastrointestinal endoscopies.

**TriHealth Creates Clinical Nurse Leader Training Program**

Facing a national shortage of clinical nurse leaders (CNLs), TriHealth Nursing developed its own training program for CNLs in FY 2014. TriHealth first created a new position for clinical outcomes nurse (CON) and promoted 15 experienced TriHealth nurses to work as CONs on medical-surgical and critical care units. Their training program, with the College of Mount St. Joseph, is a unique cohort program through which the CONs earn master’s degrees in nursing and CNL certification.

CONs and CNLs help coordinate care for the hospitals’ most complex patients. These nurses investigate best practices, provide patients with detailed discharge instructions, review charts to collect data and look for trends, and act as mentors for staff nurses on their respective units.

**TriHealth Nursing Retreat**

More than 200 nurses, including 89 staff nurses, attended the 2013 TriHealth Nursing Retreat, which focused on developing and maintaining a culture of ownership. Keynote speaker Joe Tye, a co-author of *The Florence Prescription*, told his audience to expect positive, growth-encouraging attitudes and continuous improvement of themselves and coworkers.

Tye also suggested that nurses fulfill promises focused on seven themes: responsibility, accountability, determination, contribution, resilience, perspective and faith. Lessons taken from the retreat were shared throughout the organization. In addition, teams of nurses worked with each Nursing Council to update the status of the FY 2013–2015 Nursing Strategic Plan and to brainstorm ways to overcome any barriers to achieving goals.

**Shared Leadership Committee (SLC) Achievements**

Unit-based groups of staff nurses throughout TriHealth’s hospitals meet routinely to improve nursing practice and policies. Below is a sampling of SLC accomplishments for FY 2014:

- Creation of a Stroke Committee to ensure adherence to national stroke standards
- Monitoring of quality indicators on heart failure patients to improve standards and reduce readmission rates
- Reduction in blood culture contamination rates by reinforcing proper procedures
- Facilitation of simulation lab education
- Improved patient utilization of TriHealth’s GetWell television system
- Improved utilization of diagnostic-specific education and care plans
- Participation in “Toileting in Advance of Need” practices to anticipate patients’ needs and reduce falls
- Update of Tummy Time educational handout for parents of newborns
- Partnership with Information Technology to create new EMR screens for the Coping Scale pain assessment for laboring mothers
- Development of an operating room assistant checklist for more efficient operating room turnovers

Christina Howard, BSN, RN, CMSRN (left), and Darla Dunn, BSN, RN, ONC, are both working as clinical outcomes nurses on Bethesda North 6-300 and pursuing certification as clinical nurse leaders through a unique training program at TriHealth.
Structural Empowerment

Solid structures and processes create an innovative environment where professional practice flourishes and relationships with the community contribute to improved outcomes.

Collaborations with Learning Institutions

TriHealth’s close connections with Greater Cincinnati learning institutions strengthen both the health system and academic organizations in molding the next generation of nurses.

TriHealth employees served as adjunct faculty for the Good Samaritan College of Nursing and Health Science, Xavier University, Cincinnati State Technical and Community College, Hondros College of Nursing, College of Mount St. Joseph, Northern Kentucky University, University of Cincinnati Blue Ash College of Nursing and Great Oaks Career Center.

TriHealth Nursing’s RN Graduate Mentoring Program was reinstated to facilitate newly graduated nurses’ transition into the profession. The attrition rate for first-year nurses can be as high as 27 percent, and the program aims at reducing the number through professional development, relationship building and fostering team spirit and loyalty. The original mentoring program had been suspended during TriHealth Nursing’s participation in the national Transition to Practice research study.

In addition, the 2014 Professional Development Fairs at Bethesda North and Good Samaritan hospitals gave more than 200 nurses the opportunity to speak with TriHealth Nursing Council members, Clinical Ladder experts, specialty organization members and a host of nursing college representatives.

Enhancing Communications with Nurses

TriHealth Nursing pursued several channels to maintain regular, informative contact with TriHealth’s expanding nursing population.

- The bimonthly TriHealth Nursing Forum drew 170 nurses per forum from all levels of nursing to share information and learn from each other. The Nurse Manager Forum and Clinical Support Team meetings provided similar opportunities.
- TriHealth Nursing News (TNN) enabled TriHealth Chief Nurse Executive Mary Irvin, MSN, MBA, RN, NEA-BC, to share information via video with all nurses throughout TriHealth. TNN was posted within Nursing’s quarterly education packet, along with a summary of the nursing councils’ activities for that quarter.
- Bethesda Butler Hospital nurses held monthly, 30-minute, nurse-led “Nursing Pipeline” forums to present nursing updates, education, upcoming events and general TriHealth communication.
- TriHealth’s Nursing Connections newsletter switched from a bimonthly, printed newsletter to an online monthly format to provide more timely information to nurses throughout the system.
- Nursing’s LinkNet home page was redesigned to make it easier for nurses to navigate. Ownership of eight headings under the Nursing section has been assigned to various councils and committees to keep information current.

Nursing Takes Action on NDNQI Results

As a follow-up to TriHealth Nursing’s 2013 NDNQI Nurse Satisfaction Survey, all nursing units took part in a visioning exercise that addressed areas where nurses wanted to improve. Many of the goals created during the visioning process were embraced by unit-level Shared Leadership Committees and incorporated into their FY 2015 goals.
Number of Newly Certified Nurses Rises

The number of TriHealth direct-care nurses seeking new nursing certifications more than doubled in FY 2014 as compared to FY 2013.

Bethesda Butler Routinely Inspects ED Environment

A multidisciplinary team of infectious disease specialists, pharmacists, Emergency Department staff and Environmental Services employees began monthly inspections in FY 2014 to meet or exceed regulatory cleanliness standards, safety and quality of care in the Bethesda Butler Hospital Emergency Department.

Any item on their checklist that fell short of standards was taken to the responsible party and often fixed on the spot. The Environment of Care rounds were so successful in the ED that the practice is being expanded to the entire Bethesda Butler Hospital campus.

Outreach Ministries Assigns Nurse to Butler County

For her senior project as an RN to BSN student at the College of Mount St. Joseph, Shirley Smith, BSN, RN, assessed community health needs in the city of Hamilton and all of Butler County. She documented a significant need for health services among low-income groups, including a sizable Hispanic population.

Smith and her husband, who have been Hamilton residents for more than 25 years, take bag lunches once a week to a homeless shelter, and she does a weekly ministry through her church at the Butler County Jail.

In 2014, TriHealth hired Smith as Outreach Ministries nurse for Butler County. Up to this time, TriHealth’s Outreach Ministries had focused on parishes closer to downtown Cincinnati. Smith’s base of operations is the Power Source Ministry, an outreach of Princeton Pike Church of God in Hamilton, which also is the church she attends.

The majority of her work, however, takes her into people’s homes across the county. She sees pregnant women, people with diabetes and others with congestive heart failure or obesity. She serves Hispanic, Caucasian and African-American populations.

“I’ve already seen some good outcomes in working with Bethesda North OB clinic and partnering with the Butler County Department of Health on delivering prenatal care,” Smith says.

“I love it. I know the neighborhood and the clientele. With these free services to our clients, TriHealth is giving back to the community.”
Community Outreach

TriHealth nurses’ commitment to improving the health status of all people they serve reaches far beyond the walls of the system’s facilities. Here is a brief sampling of community activities through which nurses further TriHealth’s mission.

- TriHealth nurses made mission trips to Mexico, Kenya, Ghana, El Salvador and Belize.

- Endoscopy nurses at Bethesda North Hospital worked with the Crohn’s and Colitis Foundation of America to facilitate a monthly support group for patients and their families affected by these diseases.

- Good Samaritan Hospital’s Labor & Delivery “Labor of Love” group did projects to support the Free Store Food Bank, Habitat for Humanity and Bethany House.

- Individual nurses and units throughout the system served in soup kitchens, collected food for disaster relief and participated in charity walks/runs, such as the Heart Mini Marathon, Juvenile Diabetes Research, Hike for Hospice, Leukemia and Lymphoma Society Light Up the Night Walk, and breast cancer awareness walks.

- Nurses from the Post-Anesthesia Care Unit and Surgicare prepared gift baskets for women coming out of ovarian surgery. The group also works with the Ovarian Cancer Alliance of Greater Cincinnati, which holds monthly support group meetings for women diagnosed with ovarian cancer.

- Bethesda Arrow Springs, Bethesda Butler Hospital and Good Samaritan Western Ridge emergency department staff provided health screenings and education at fairs, festivals and events in their communities. They also contributed to community food banks and crisis centers.

Mary Pat Gilligan, MSN, RN, CNOR, NEA-BC, Good Samaritan Perioperative Services director, worked with a surgical team to perform 40 ENT and plastic surgeries during a medical mission trip to Belize. She is pictured here with Belize medical provider Darryl Spencer, CRNA.

Becky Harding, RN, Bethesda North ICU staff nurse, is one of 55 TriHealth nurses who volunteered 1,434 hours at the Good Samaritan Free Health Center in Price Hill in FY 2014. The center sees patients from all over Hamilton County for basic medical services such as diabetes and hypertension management. Patient visits grew from 4,800 in FY 2013 to 5,528 in FY 2014. The center added dental services, serving 261 patients with cleanings, fillings and extractions. It offers monthly diabetes classes and an eight-week cooking class to encourage healthy eating. “We’re empowering people to take care of their own health through education and prevention. Volunteering here is also about being kind to people, smiling at them and shaking their hands. It’s great to see how much they appreciate us,” Harding says.

Learn more in this video.
Exemplary Professional Practice

Our professional practice model, “Caring for People First,” emphasizes patient- and family-centered care. We collaborate with other professionals to create a safe, healing environment that is ethically based, sensitive to diversity and focused on quality.

Patient Satisfaction Scores Rise

In FY 2014, TriHealth surpassed last year’s patient satisfaction scores and achieved its target for top box score percentage.

“Since 2010, we have made significant strides to increase our top box score percentage,” says Senior Vice President and Chief Nurse Executive Mary Irvin, MSN, MBA, RN, NEA-BC. “In FY 2014, we successfully reached our target of 83.0%, which placed us in the 85th percentile of hospitals across the country.”

Nine nursing units achieved the 95th percentile or above:

Bethesda North’s Cardiovascular ICU and Breast Center; Bethesda Arrow Springs Cardiovascular; Bethesda Butler Hospital Breast Center and Emergency Department; Good Samaritan Cardiovascular ICU, 8Q orthopedic unit and Breast Center; and Good Samaritan Western Ridge Emergency Department.

To measure patients’ satisfaction with the care they receive, TriHealth hires HealthStream, an independent company, to make phone calls to discharged hospital patients. The company calculates the percentage of patients who rate their overall experience a score of nine or 10, out of a possible 10. This percentage is then measured against other hospitals in a national database to create a national percentile.

TriHealth Emergency Departments Acknowledged for Top Performance

Good Samaritan Western Ridge was the #1 Top Performer in the 2013 Emergency Department (ED) Database, administered by HealthStream, a national health care assessment organization.

Among the 600+ facilities nationwide included in the database, Western Ridge and Bethesda Arrow Springs stood out as two of the top 10 performers for the overall rating among the ED database respondents.

“This recognition demonstrates just how well the staff at Western Ridge lives our mission of providing high-quality care with the highest compassion. Examples include escorting patients directly to patient beds after they register and assisting them with follow-up appointments and outpatient care.”
testing when possible before discharge," says Jennifer Shipman, BSN, RN, CEN, site manager for Good Samaritan Western Ridge.

**TriHealth 2020: Projects Aim at Efficient Use of Time and Resources**

Nursing projects to support TriHealth 2020, a system-wide effort to gain efficiencies and eliminate waste, included capacity management projects and LEAN projects on several nursing units.

**Capacity Management**

Capacity management projects focused attention on patient flow issues throughout the hospitals. The evaluation process revealed that nurses were often performing work that did not require an RN’s knowledge and skill. To correct this inefficiency, nursing administrators and staff representatives from the unit-level efficiency teams met with Logistics, Nutrition Services, Pharmacy and Environmental Services. Moving some tasks to more appropriate personnel ensured that staff nurses were spending their time performing work at the highest level within their scope of practice.

Other capacity management and LEAN project accomplishments included:

- Increasing the number of step-down beds at Bethesda North Hospital to accommodate patients who require a care level between intensive care and standard medical-surgical care
- Assigning each medical-surgical, telemetry and critical care unit a clinical nurse leader or clinical outcomes nurse to facilitate throughput, length of stay and discharge
- Evaluating the number of full-time employees assigned to a manager
- Consolidating intensive care beds into one area at Good Samaritan Hospital

**Efficiency Teams**

Bethesda North 5-200 appointed a LEAN team to take “waste walks” throughout their medical-surgical nursing unit to identify practices that would save staff time and provide more direct interaction with patients. The team homed in on three areas that yielded significant savings:

1) Standardized nursing cart contents to save trips to the nurses’ station for medications and supplies. Savings: 7.7 hours per day (more than $90,000 in staff time per year)

2) Standardized patient care assistant (PCA) walking rounds starting times and specific duties. Result: More time for nurses and PCAs to spend with patients and improved team morale and cohesiveness

3) Standardized equipment storage to eliminate time wasted looking for medical equipment in random spots. Savings: 2.67 hours per day ($23,589 per year)
Good Samaritan Hospital’s 12AB general surgical unit also worked to improve PCA rounding processes. In addition, the unit saved time by pre-assembling patient admission kits, reorganizing drawers outside patient rooms with medical supplies and personal hygiene items, and improving the labeling system and organization in the unit’s supply room.

“It was an eye opener to staff to see how much our unit processes impact time and money spent,” says Nurse Manager Tracy Larkin, BSN, RN, CMSRN.

PCA rounding and equipment standardization are now being implemented throughout TriHealth.

Advisory Councils Strengthen Patient- and Family-Centered Care

The Good Samaritan Neonatal Intensive Care Unit (NICU) and the TriHealth Diabetes Council created patient-family advisory groups to better understand the needs and concerns of TriHealth patients and families. The Diabetes group is the first to have members that represent physician practices as well as the inpatient setting. They join existing councils for TriHealth, Hospice of Cincinnati and Perinatal Services at Good Samaritan. Nurses participate in all of the councils.

A sampling of achievements for the advisory groups and councils in FY 2014 include:

**NICU** began bimonthly meetings in early 2014, with seven parents of former NICU babies, plus nurses and a family resource specialist. The members created goals, a mission and vision, all focused on enhancing family-centered care, communication and support for parents who currently have babies in the NICU.

**Diabetes** began monthly meetings in spring 2014, with 12 members. Volunteers are patients of TriHealth physicians and have diverse experiences with diabetes. All are enthusiastic about helping TriHealth assist people with diabetes in leading the healthiest life possible by improving communications, hospital experiences and doctor visits.

**TriHealth Inpatient** clarified language for the HCHAPS patient satisfaction survey, provided input on TriHealth’s new GetWell television network, and toured both main hospitals to provide feedback on cleanliness, signage, friendliness of staff, welcoming environment and overall rating. TriHealth has implemented several of the council’s suggestions.

**Hospice** doubled its council size by recruiting a more diversified group of non-medical people and formulated questions for live surveys that helped capture information and generate action to improve the experience and comfort of patients and families during their stay. In addition, the advisory council endorsed expansion of Hospice of Hamilton’s use of a sunflower magnet placed on the door of any patient who has died. All four hospice inpatient units adopted use of the magnets to alert staff and volunteers and allow them to interact more sensitively with families.

**Perinatal Services** developed a unit brochure for patients, implemented multidisciplinary rounds to minimize interruptions and increase consistent communication, and added several amenities to make extended stays in Special Care OB more comfortable.

**GetWell Network Introduced for Patient Education and Safety**

TriHealth’s new patient television network, the GetWell Network, was introduced in FY 2014 to educate and entertain hospitalized patients. Nurses throughout the system encouraged patients to watch instructional videos about their conditions or diseases, as well as safety videos, with topics such as preventing falls.

The network also asks patients to answer basic satisfaction questions at various times throughout the day. These questions allow the nursing staff to address concerns in real time.

Key Quality Indicators: Falls and HAPUs

TriHealth nurses helped facilitate a dramatic decrease in patient falls in the hospitals and remained well below targets for hospital-acquired pressure ulcers.

Decreasing Inpatient Falls

The TriHealth Falls Prevention Committee, a multidisciplinary team, led several key strategies to reduce falls across all hospitals in the system.

It took a team effort of nurses, patient care assistants, physicians, therapists, social workers, care coordinators, Environmental Services staff and nutritionists to nearly eradicate falls in Good Samaritan Hospital’s 8Q orthopedic unit. All staff delivered constant reminders to patients not to get up without a staff person’s assistance. The unit previously saw up to three falls per month, but with everyone on alert, the unit went as long as nine straight months without a fall and had only five falls for FY 2014.
The committee reviewed falls that led to injury and shared findings with clinical staff.

TriHealth joined the Premier “Partnership for Patients” program, through which the system shared best practices with organizations across the country to improve fall rates. Practices TriHealth implemented included posting “Days without Falls” signs on units, having patients sign falls “contracts” where they agreed not to get up without assistance, and using better identification methods for patients at high risk for falls.

Patients and clinical staff received education on common fall trends.

The committee revised falls prevention policy to mirror best practices and revised the algorithm for post-fall interventions. Sections were added to address protocols for obstetrics and pediatric patients.

Post-Fall Huddle Program was implemented across the organization to create a uniform approach to analyzing falls when they occur.

Hospice of Cincinnati’s four inpatient units—Blue Ash, Hamilton, East and West—voluntarily set their own quality goal at 3.0 falls or less per 1,000 patient days, based on NDNQI information and TriHealth targets. The combined units stayed under their target with an inpatient unit fall rate of 2.65 for the year.

Favorable HAPU Rate

The rate of Hospital-Acquired Pressure Ulcers (HAPUs) increased slightly in FY 2014 but remained well below the National Database of Nursing Quality Indicators (NDNQI) mean, which is the basis of TriHealth’s 2.50 target. TriHealth’s Skin Care Committee and skin care champions helped units evaluate the quality of their skin care practices and identify unit-specific opportunities for improvement. Clinical nurse leaders and clinical outcomes nurses received education from the Wound Care staff to help them identify high-risk patients.

TriHealth Skin Care measures and exemplary outcomes were recognized in a national collaborative by Premier as an example of best practices in decreasing HAPUs. In May 2014, Lisa Berning, BSN, RN, Skin Care Committee member from Good Samaritan, presented TriHealth’s successful efforts in a national webinar hosted by Centers for Medicare and Medicaid Services (CMS) and National Pressure Ulcer Advisory Panel (NPUAP).

Nursing Achievements

The following are highlights of awards and recognitions for TriHealth and its nurses in FY 2014:

Directors’ Awards for Excellence in Nursing

Four TriHealth nurses were honored for being role models among their peers, receiving the fourth annual TriHealth Directors’ Awards for Excellence in Nursing. They were selected from 11 nurses nominated by their directors as exemplifying the characteristics of a professional nurse.

Sharon Gallagher, RN, CAPA, Same Day Surgery, Bethesda North Hospital

Lindy Mathes, RN, CMSRN, 5-300, Bethesda North Hospital

Heather Schibi, BSN, RN, 14CD, Good Samaritan Hospital

Melinda Traylor, BSN, RN, Post-Anesthesia Care Unit, Good Samaritan Hospital
Florence Nightingale Awards

Three TriHealth nurses were honored as Florence Nightingale Award winners at the 22nd annual Florence Nightingale Awards for Excellence in Nursing in spring 2014. The University of Cincinnati College of Nursing’s Board of Advisors selected only six nurses from a nomination pool of 275 area nurses.

Bethesda North and Good Samaritan hospitals were named two of the best hospitals nationally, and ranked first and second respectively in the Cincinnati metro area in summer 2014 by U.S. News & World Report. In addition, Bethesda North ranked third overall among hospitals in the state of Ohio, while Good Samaritan ranked seventh.

Bethesda North Hospital was nationally ranked among the top 50 in seven specialties, including Pulmonology; Diabetes Endocrinology; Gastroenterology & GI Surgery; Orthopedics; Geriatrics; Ear, Nose & Throat; and Cardiology and Heart Surgery and named a high-performing hospital in Cancer Care, Gynecology, Nephrology, Neurology, Neurosurgery and Urology.

Good Samaritan Hospital was nationally ranked among the top 50 in Diabetes and Endocrinology and named a high-performing hospital in Cancer Care; Cardiology and Heart Surgery; Ear, Nose & Throat; Gastroenterology & GI Surgery; Geriatrics; Gynecology; Nephrology; Neurology & Neurosurgery; Orthopedics; Pulmonology and Urology.

Bethesda North Hospital has been designated a NICHE Program (Nurses Improving Care for Healthsystem Elders) hospital. As part of a national effort to provide exemplary patient-centered care for people age 65 and older, Bethesda North and other NICHE organizations share best practices and establish high standards for quality, safety and service. Bethesda North established a Geriatric Committee and has a specially trained geriatric resource nurse on each unit.

Good Samaritan Hospital has received certification from The Joint Commission as an Advanced Primary Stroke Center, joining Bethesda North, which received the designation in 2013.

Good Samaritan Hospital Rehabilitation Services received reaccreditation by the Commission on Accreditation of Rehabilitation Facilities (CARF), recognizing the hospital’s ongoing commitment to enhancing the quality of its rehab programs and services with a focus on patient satisfaction.

Bethesda North Hospital was newly certified in 2014 by The Joint Commission as an Orthopedic Center of Excellence for total hip and total knee replacements.

Good Samaritan Hospital was recertified in 2013 as an Orthopedic Center of Excellence for total hip and total knee replacements, and it received new certification for shoulder replacements.

Good Samaritan Hospital’s Bariatric Surgery Program earned reaccreditation in February 2014 as a Center of Excellence, designated by the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP), a joint program of the American College of Surgeons (ACS) and the American Society for Metabolic and Bariatric Surgery (ASMBS).

Amy Kimble, BSN, RN, CHPN, Bethesda North 5-300, received a Pearl Moore Oncology Award from the Oncology Nursing Society. She received $3,000 to pursue continuing education.

Rian Long, BSN, RN, assistant nurse manager for Bethesda Arrow Springs Emergency Department, received the Rising Star Award from the Ohio Emergency Nurses Association (ENA) in spring 2014 for her dedication to emergency nursing as shown through quality improvement projects, best practices and involvement in ENA and emergency nursing.

Pamela Bolton, MS, RN, ACNPC, CCNS, CCRN, PCCN, Good Samaritan Critical Care nurse practitioner, received a lifetime membership award from the American Association of Critical Care Nurses.

Phyllis Kemper, MSN, RN-BC, Outreach nurse, was awarded the 2013 Nursing Excellence—Clinical Practice Award from Interact for Change, a partner of Interact for Health (formerly known as the Health Foundation of Greater Cincinnati).
Appointments and External Leadership Roles

Jeannie Burnie, MS, APRN, CEN, ACNS-BC, was Greater Cincinnati’s representative to Ohio’s Emergency Nurses Association.

Jen McCord, MSN, RN, CCRN, CCNS, VA-BC, advance practice nurse for Critical Care, is a national Association for Vascular Access (AVA) board member.

Program Director and Department Chair Mary Morris, MSN, RN, AASN, Good Samaritan College of Nursing and Health Science, was appointed Recording Secretary for the Ohio Council of Associate Degree Nursing Education Administrators.

Associate Professor Rosemary Fromer, PhD, RN, Good Samaritan College of Nursing and Health Science, was selected to be a site visitor for the Accreditation Commission for Education in Nursing, Inc. (ACEN).

Cathy Jones, MSN, RN, CCRN, NE-BC, Corporate Education specialist, was selected to be a member of the Ohio Nurses Association CE Advisory Board.

Pamela Bolton, MS, RN, ACNPC, CCNS, CCRN, PCCN, Critical Care nurse practitioner at Good Samaritan Hospital, was appointed to the Ohio Action Coalition sponsored by the Robert Woods Johnson Foundation (RWJF) to remove scope of practice barriers for nurses in Ohio. She also was appointed to The Life Center Medical Advisory Board and the Ohio Board of Nursing Committee on Prescriptive Governance.

Marilyn Singleton, BSN, RN, Bethesda Arrow Springs site manager, was a delegate to the 2013 Emergency Nurses Association (ENA) General Assembly. She also continued her term as Ohio ENA State Council president. TriHealth nurses who were committee members on the State Council were Rian Long, BSN, RN; Emilie Moore, RN; and Paula Cubbage, RN, CEN.

Deb Meline, MSN, RN, CDE, NEA-BC, Professional Excellence specialist, TriHealth, was president of the TriState Nursing Excellence Collaborative.

Jim Owen, MS, BSN, RN, NEA-BC, director of Emergency, Renal and Support Services, Good Samaritan Hospital, is a member of the Ohio Department of Safety State Trauma Board; board member of the Ohio Hospital Association Trauma Committee; and member of the ANCC Executive-Advanced Content Expert Panel.

Amy Barton, BSN, RN, CNOR, assistant nurse manager, Bethesda North Surgery, was TriState chapter president-elect for the Association of PeriOperative Registered Nurses (AORN).

Sharon Gallagher, RN, CAPA, staff nurse, Bethesda North Same-Day Surgery, was chapter president for Cincinnati Area PeriAnesthesia Nurses Association (CAPANA).
New Knowledge, Innovations and Improvements

Nurses integrate existing evidence into practice, discover new evidence and visibly contribute to the science of nursing through research and innovation.

Nursing Research Projects Completed

In FY 2014, seven nursing research projects were completed, five new studies were begun and eight studies remained in progress. The completed studies included:

- "Effects of Skin-to-Skin Contact on Newborn Temperature, Initial Bath and Early Breastfeeding," by Karen Gromada, MSN, RN, IBCLC, FILCA, principal investigator, and sub-investigators Laurayne Bambrick, MSN, RN, LCCE, FACCE; Judith Shelton, BSN, RN; Tonya Johannemann, MSN, RN, NE-BC; and Joy Dienger, PhD, RN.

- "Factors Associated with Risk of Skin Breakdown and Pressure Ulcer Formation among Individuals in the Intensive Care Unit with a Sacral Mepilex® Dressing During a HAPU Quality Improvement Project," by Maryann Lancaster, BSN, RN, who evaluated the effectiveness of applying the Mepilex Border Sacrum dressing to the sacrum to reduce pressure ulcer formation. As a result of the study, a sacral Mepilex algorithm has been added to TriHealth’s pressure ulcer guidelines.

- "A Theory-Driven Integrative Process/Outcome Evaluation of a Concept-Based Nursing Curriculum," by Associate Professor Rosemary Fromer, PhD, RN, Good Samaritan College of Nursing and Health Science.

- "Millennial Students’ Preferred Learning Style: Evaluation of Collaborative Learning versus Traditional Lecture Methods," by Professor Michelle Roa, PhD, RN, Good Samaritan College of Nursing and Health Science. The study found that traditional teaching methods were more effective for learning traditional methods than those taught by the lecture method. In addition, learning style preferences were not significant in determining academic success.

- "The Effects of Teaching Style on Meaningful Learning in Nursing Graduates," by Department Chair Teresa Getha-Eby, PhD, RN, Baccalaureate of Science in Nursing Program, Good Samaritan College of Nursing and Health Science. The study compared verbalized knowledge connections of graduates who received traditional teaching to those who received concept-based teaching (CBT). Among the findings was that CBT graduates who had scored in the lowest quartile of a baseline test measuring higher-order thinking exhibited more knowledge connections than did graduates with scores from the lowest quartile who received traditional teaching.

- "Stress and Resilience in Emergency Nurses Following Trauma Care.” Bethesda North Hospital Emergency Department participated under the leadership of Gordon Gillespie, PhD, RN, faculty, University of Cincinnati, who oversaw the multi-site study.

- "Determining Validity and Reliability of PRIDE 360: A Peer Review Tool for Staff Nurses," by co-investigators Joy Dienger, PhD, RN; Sharon Brehm, MSN, RN, ACNS-BC; Debra Meline, MSN, RN, CDE; and Angela Liggett, MSN, RN, APFN. The study, which was piloted on five nursing units, led to revising and reformatting TriHealth Nursing’s PRIDE 360 (Peer Review Inspires Development and Education 360).

Evidence-Based Practice Projects Completed

TriHealth nurses completed five evidence-based practice projects in FY 2014, started 11 projects and continued with 10 projects already in progress. Completed projects included:

- “Circumcision 6 ’S’ Comfort Care,” by Connie Henderson, BSN, RNC-MNN, Bethesda North Hospital Mother-Baby Unit, identified and implemented six evidence-based comfort care interventions to decrease infant pain and crying during circumcision.

- “Intentional Hourly Rounding to Improve Fall Rates in the Emergency Department,” by Jennifer Smolenski, RN, CEN; Genevieve Wallace, BSN, RN, CEN; Maria Newsad, BSN, RN; Susan Bernardicius, RN, CEN; Vicki Celenza, RN; Ruth Reeves, MSN, RN, and Jeannie Burnie, MS, APRN, CEN, ACNS-BC, implemented hourly rounding to determine if it would decrease the number of patient falls in the Emergency Department. For FY 2014, the fall rate in the ED decreased by 50 percent from the previous year.

- "Hourly rounding on select patients in Bethesda North Emergency Department helped Jennifer Smolenski, RN, CEN, and the ED team decrease their patients’ fall rate by half in one year."
“STEMI (ST segment elevation myocardial infarction) Alert Protocol for EMS,” by co-investigators Pamela Erpenbeck, BSN, RN, CEN, FF/NREMT-P, Good Samaritan Emergency Department, and Randall Johann, MA, CHSE, FP-C, FF/EMT-P, Bethesda North Emergency Department. This project created an evidence-based protocol for paramedics to activate the cardiac catheterization lab from the field for patients who met 12-lead EKG criteria. During the pilot, the STEMI Alert protocol was activated with 12 patients transported by four fire departments, resulting in an average decrease of 19 minutes in both first-medical-contact-to-balloon and door-to-balloon times. The STEMI Alert Protocol and 12-lead EKG education is now being rolled out to other local fire departments across the region.

“Nursing Pipeline: Communication, Autonomy and Nurse Job Satisfaction,” by Pamela Tomassi, BSN, RN, Bethesda Butler Hospital Quality Subgroup, launched a monthly nurse-led forum as a means of improving communication, autonomy and nurse job satisfaction, with a goal of 90 percent staff nurse retention. Survey results revealed increased satisfaction with communication and autonomy. Nurse retention rate was 95 percent after one year, exceeding the goal of 90 percent.

“Improving ED Communication and Patient Satisfaction with Interdisciplinary Team Huddles,” by Nancy Doolittle, MSN, MBA, RN, NE-BC, and other members of Bethesda North Emergency Department: Amanda Fantino, BSN, RN; Katie Dunigan, BSN, RN, CEN, EMT-P; Briana Smith, BSN, RN, CEN; Maria Newsad, BSN, RN; Barb Black, MSN, RN; and Jeannie Burnie, MS, APRN, CEN, AGCNS-BC. Patient survey responses revealed that the communication huddles had a positive impact on team communication and patient satisfaction. The huddles have been integrated into practice at the beginning and end of each patient encounter.

New Pain Scale Introduced
To ensure the accuracy of pain assessment for TriHealth patients, TriHealth’s Pain Committee evaluated the evidence to determine the most valid and reliable pain scale. TriHealth had used the Wong-Baker Faces scale to assist children and adults with low health literacy to indicate their level of pain. The scale used smiles and tears to correlate with pain, and research has since shown that more accurate pain levels are reported when a neutral face is the anchor for the tool.

![New Pain Scale](image)

For individuals who cannot communicate a pain rating verbally, in writing or with gestures, and cannot understand the 0 to 10 pain scale, TriHealth now uses the Faces Pain Scale—Revised, endorsed by the International Association for the Study of Pain.

Innovation
Multidisciplinary Simulation
Simulations are standard practice for Good Samaritan’s Labor & Delivery (L&D) and Neonatal Intensive Care Units (NICU), but their expanded simulation in January 2014 with the Emergency Department (ED), Surgery and other areas was the first multidisciplinary simulation. A staff member simulated a pregnant woman entering the ED with auto accident injuries, and all areas prepared to accommodate whatever services the patient required. Nurse educators from L&D, NICU, ED and Surgery, along with Michael P. Marcotte, MD, director of Quality and Safety for Women’s Services, led the simulation.

“Staff were exposed in a safe environment to activities they have not experienced,” says Sandy Warner, MSN, RNC-OB, nurse educator for Good Samaritan L&D. “The simulation took about 45 minutes, and the participating departments plus Bethesda North Simulation Center reviewed it on video. We improved knowledge, communication, teamwork and processes to help us provide the best outcomes for moms and babies.”

Lessons learned from the simulation were implemented shortly thereafter when an expectant mother sought care for injuries in the Good Samaritan Emergency Department. All participating departments were better prepared to treat mother and fetus immediately.
Prenatal Class on Neonatal Abstinence Syndrome

Neonatal Nurse Practitioners Patti Froese, MSN, NNP-BC, and Amy Byrne, MSN, NNP-BC, developed a prenatal class for expectant mothers experiencing opiate addiction. The class emphasizes what new mothers can do to alleviate withdrawal symptoms in their babies born with neonatal abstinence syndrome.

Rocking Chair Therapy

Good Samaritan 12AB General Surgical acquired six rocking chairs for postoperative abdominal surgical patients. Evidence-based practice shows that rocking improves bowel function, provides greater pain control and contributes to less narcotic usage postoperatively. Chairs were donated by the Good Samaritan Hospital Guild.

New Technology

TriHealth rolled out new and updated patient-controlled analgesia (PCA) pumps and new wireless blood sugar meters throughout the system.

Regional, State and National Presentations

Dawn Hillman, BSEd, RN, staff nurse, Bethesda North Labor & Delivery, presented her poster “Increasing Comfort Perception During the Birthing Process Through the Use of the Coping with Labor Algorithm” at the ANCC 2013 National Magnet Conference in Orlando. Hers was one of only 150 posters selected from across the country. Co-authors from Bethesda North Maternity were Michelle Lamping, MBA, BSN, RN, NE-BC, and Denise Wagner, BSN, RNC-OB, and from Good Samaritan Maternity were Laurie Bambrick, MSN, RN, LCCE; Pam Desmond, BSN, RNC-OB; Tonya Johannemann, MSN, RN, NEA-BC; and Laurie Ray, RN.

Connie Kreyling, MSN, RN, director of Clinical Services, Hospice of Cincinnati, presented “A Patient and Family Advisory Council: Does Your Hospice Have What It Takes?” at the Midwest Care Alliance Conference in Columbus, Ohio.

TriHealth nurses made three presentations at the Clinical Nurse Leader Summit in Orange Grove, California, in January 2014: Kathy Oliphant, MSN, RN, director of Nursing Operations and Support Systems, and Mary Irvin, MSN, MBA, RN, NEA-BC, senior vice president and chief nurse executive at TriHealth, made a podium presentation on “Implementing a Clinical Nurse Leader Program: We Can’t Afford Not To!” Heather Nordstrom, MSN, RN, CNL, and Lauren Douthitt, MSN, RN, CNL, presented their poster “No More Frequent Flyers! Decreasing 30-Day Hospital Readmissions.” Linda Juengling, MSN, RN, NE-BC, director of Critical Care Nursing for Good Samaritan, and Nancy Hinzman, DNP, RN, associate professor of Nursing, College of Mount St. Joseph, presented their poster on “Urgent Need for CNLs: Education and Practice Collaborating to Fill a Need.”

Terri Morrison, BSN, RN-BC, staff nurse on 2-300 at Bethesda North, presented “WOW: Wounds on Wednesday” at the 2013 Academy of Medical-Surgical Nursing Conference in Nashville, Tennessee.

Carol Owens, MSN, BA, RN, nurse manager of Bethesda North’s 2-300, and Tonya Johannemann, MSN, RN, NEA-BC, director of Perinatal Services at Good Samaritan, presented “Pain, Pain Go Away” at the GetWell Network’s 2014 GetConnected Conference in Chicago.
Pamela Bolton, MS, RN, ACNPC, CCNS, CCRN, PCCN, Critical Care nurse practitioner, Good Samaritan Hospital, spoke at the National American Association of Critical-Care Nurses Conference, giving lectures on Elderly Pharmacology and on Leadership.

Connie Henderson, BSN, RNC-MNN, Bethesda North Maternity, presented “Circumcision 6 ‘S’ Comfort Care,” a poster on comfort care for circumcisions, at the national Association of Women’s Health, Obstetric and Neonatal Nurses (AWHONN) conference in Orlando.

Vicki Holmes, MSN, RN, APRN, CNN, advanced practice nurse, medical-surgical nursing; Lynne Brophy, MSN, RN, AOCN, advanced practice nurse, oncology, Bethesda North; Jo Ann Frey, MS, RN, ACNS-BC, CRRN, TriHealth pulmonary clinical nurse specialist; Thomas Imhoff, PharmD; Helen Koselka, MD; Lynn Kaseff, RPh; Greg Nocito, PharmD; and Wayne Rongo, PharmD, presented the poster “Documentation and Outcome Measurement of Assessment and Recommendations of a Pain Advisory Team (PAT) Using a Customized Note in the Electronic Medical Record (EMR)” at the American Society for Pain Management Education specialist, presented two posters at the Association for Nursing Professional Development (ANPD) 2014 Convention: “Creating an Interactive Nurse Residency Program: Redesigning Transition into Practice” and “Horizontal Violence/Bullying: Instilling a Culture of ‘Zero Tolerance.’”

Instructors Janet Paguigan, MSN, RN; Cam Felisimo, MSN, RN; and Abigail Vilarroya, MSN, RN, Good Samaritan College of Nursing and Health Science, developed a “Human Trafficking Awareness is Key” workshop program for the Philippine Nurses Association of Ohio. Nancy Henson, MSN, RN, also an instructor, presented at the conference.

Department Chair Terri Schumacher, MSN, RN, Good Samaritan College of Nursing and Health Science, presented “Using the NPA and Rules to Teach Nursing Students” at the Ohio League for Nursing Educational Summit.

Cathy Jones, MSN, RN, CCRN, NE-BC, Corporate Education specialist, presented two posters at the TNEC President Deb Meline, MSN, RN, CDE, NEA-BC, and Member Sharon Brehm, MSN, RN, ACNS-BC, both TriHealth Professional Excellence specialists, were highly involved in the symposium planning.

Publications


Peggy Eichel, MSN, RN, RNC-NIC, and Tonya Johannemann, MSN, RN, NE-BC, Good Samaritan Perinatal Services, co-authored the article “Implementation of Universal Maternal Drug Screening to Identify Neonatal Abstinence Syndrome Candidates,” published in Newborn and Infant Nursing Review.

Carol Owens, MSN, BA, RN, Bethesda North 2-300, and Amy Keller, MSN, RN, Clinical Documentation, were co-authors of “Professional Collaboration: Who Should Determine Safe Staffing for Nursing?” The article was published in Newborn and Infant Nursing Review 13(3).

TriState Nursing Excellence Symposium: Sharing Innovation & Best Practice

TriHealth nurses were well represented at the second annual TriState Nursing Excellence Collaborative (TNEC) Symposium in Cincinnati. Podium presentations were given by Amy Carnohan, BSN, RNC-MNN, Good Samaritan Maternity; Connie Henderson, BSN, RNC-MNN, Bethesda North Maternity; and McKenzie Mason, RN, Bethesda North 5-200. Poster presentations were given by Pam Erpenbeck, BSN, CEN, FF/NREMT-P, TriHealth Emergency Departments; Katie Freson, BSN, RN, and Debbie Hettesheimer, BSN, CNRN, SCRn, Good Samaritan 12CD; Jeff Trees, DNP, FNP-BC, CNP, Good Samaritan Occupational Health; Maryann Lancaster, BSN, RN, Bethesda North Critical Care; Taiesha Molden, RN, CMSRN, and Tina Corson, RN, CMSRN, Bethesda North 5-200; and Teresa Wood, BSN, RN, and Brooke Young, RN, Good Samaritan Cardiovascular ICU.

More than 130 nurses attended the event, including 64 TriHealth nurses, to share their best practices and care innovations. TNEC President Deb Meline, MSN, RN, CDE, NEA-BC, and Member Sharon Brehm, MSN, RN, ACNS-BC, both TriHealth Professional Excellence specialists, were highly involved in the symposium planning.
2014 TriHealth Quality & Patient Safety Days

At the organization’s annual event for all care providers, TriHealth nurses earned several awards for projects that demonstrated quality and patient safety.

**TriHealth Winner**
Management of Preoperative Anemia, Good Samaritan Orthopedic Center of Excellence and Blood Management

**TriHealth Runner-up**
LEAN 2020 Efficiency Team: Time and Cost Savings, Bethesda North 5-200

**Bethesda North**
First runner-up: Teaching Diabetics to Take Control to Improve Outcomes and Reduce Costs, TriHealth SeniorLink

First runner-up: LEAN Throughput Project, Catheterization Lab

**Good Samaritan**
First runner-up: STEMI Alert Protocol for EMS, Emergency Department

First runner-up: Utilizing LEAN to Improve Discharge Education, Neonatal Intensive Care Unit

**Nursing by the Numbers**

<table>
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<tr>
<th>Staff Nurses</th>
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<tbody>
<tr>
<td>Bethesda North Hospital (including Bethesda Butler and Bethesda Surgery Center)</td>
<td>990</td>
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<tr>
<td>Good Samaritan Hospital</td>
<td>1,197</td>
</tr>
<tr>
<td>TriHealth Evendale Hospital, TriHealth Surgery Center West, TriHealth Endoscopy North and TriHealth Hand Surgery Center</td>
<td>129</td>
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<tr>
<td>Hospice</td>
<td>219</td>
</tr>
<tr>
<td>Education/Administration/Other</td>
<td>405</td>
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<tr>
<td>Nursing Management</td>
<td>132</td>
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<tr>
<td><strong>Total TriHealth Nurses</strong></td>
<td><strong>3,072</strong>*</td>
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*includes acute care, SeniorLink and Corporate Health

**Bed Count**

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<tr>
<td><strong>436 beds</strong></td>
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<tr>
<td>Bethesda North Hospital</td>
<td>363 plus 63 newborn beds, and 10 beds at Butler County</td>
</tr>
<tr>
<td><strong>569 beds</strong></td>
<td></td>
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<tr>
<td>Good Samaritan Hospital</td>
<td>444 plus 125 newborn beds</td>
</tr>
<tr>
<td><strong>29 beds</strong></td>
<td></td>
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<tr>
<td>TriHealth Evendale Hospital</td>
<td></td>
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<tr>
<td><strong>82 beds</strong></td>
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<tr>
<td>Hospice of Cincinnati Inpatient Units (Blue Ash, Anderson, Hamilton, Western Hills)</td>
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TriHealth Nurse Midwives had 35 women complete its Centering Pregnancy Program last year. The midwives’ patient percentage of low birthweights is just 0.5%, compared to 8% for Hamilton County. The midwives also saw 972 patients at Winton Hills Medical Center and 2,124 patients through the Healthy Beginnings Program for uninsured women.

ThinkFirst programming reached more than 18,000 people in FY 2014. TriHealth’s Cribs for Kids program provided 228 cribs and education on Sudden Infant Death Syndrome for low-income mothers. Bethesda Foundation and the DeCavel SIDS Prevention Foundation paid for the cribs.

ThinkFirst for Your Baby (TFFYB) staff provided 1,780 preventive education hours and 319 home visit hours. The program reached 155 mothers with infant safety education. An additional 500 mothers were reached at various community events. 158 car seats and 157 baby gates were provided for the TFFYB mothers via grant funding from Bethesda Foundation.

TriHealth Nursing’s turnover rate for FY 2014 was 2.4%, well below TriHealth’s target rate of 4.2% and the Greater Cincinnati Health Council’s reported rate of 4.4% for nursing turnover in the region.

TriHealth Nursing’s vacancy rate for FY 2014 was 3.6%, below TriHealth’s target rate of 4.1% and the Greater Cincinnati Health Council’s reported rate of 4.3% for nursing vacancies in the region.
TriHealth Mission Statement

Our Mission is to improve the health status of the people we serve. We pursue our Mission by providing a full range of health-related services including prevention, wellness and education. Care is provided with compassion consistent with the Values of our organization.

TriHealth Nursing Division

Mission

The Mission of TriHealth Nursing is to assist and support the people we serve to optimize their health status. We pursue our Mission through interdisciplinary collaboration to provide services across the continuum of care and throughout the life span.

Vision

Excellence in patient- and family-centered care through commitment to compassionate, professional nursing practice.

Philosophy

The nursing philosophy within TriHealth is rooted in the Christian heritage of the Founding Sisters of Charity and the German Methodist Deaconesses.

1. We believe that each human being possesses personal dignity, worth and God-given human rights.

2. We believe in the uniqueness of the individual and approach care from a holistic perspective.

3. We believe that caring and service are fundamental components of the art, science and practice of nursing.

4. We believe the professional nurse is responsible for implementing the nursing process to guide nursing practice.

5. We believe nursing processes and patient outcomes are enhanced in an environment of continuous quality improvement and collaborative practice.

6. We believe each nurse is responsible and accountable for his/her own practice and professional development.

7. We believe creativity, innovation, competency, stewardship, compassion and leadership are needed to assure our future state.

8. We believe we are responsible for creating a professionally satisfying and rewarding practice environment.