



Inspired and Engaged – Transforming Excellence in Nursing

Northwestern Medicine Huntley Hospital
Fiscal Year 2019 Nursing Annual Report





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Greetings Nursing Colleagues,



As vice president and chief nurse executive for Northwestern Medicine Huntley Hospital, I am honored to present our Fiscal Year 2019 Nursing Annual Report, *Inspired and Engaged - Transforming Excellence in Nursing*. The stories

that follow provide a glimpse of the phenomenal outcomes our professional registered nurses and patient care team members have achieved. These initiatives occurred as our team integrated with Northwestern Medicine, leading to a rewarding year filled with opportunities. As FY19 progressed, our nurses were inspired and engaged to advance their professional practice in pursuit of transforming excellence. We ensured our patients-first mission was exemplified in all we did for those we serve at Huntley Hospital and in the communities that surround us.

In December 2018, we formally submitted our commitment to begin the American Nurses Credentialing Center (ANCC) Journey to Nursing Excellence, also known as the Magnet Recognition Program®. Throughout the year we have been busy documenting evidence and conducting research in support of our document, which will be submitted June 1, 2020. The principles of a Magnet organization include Transformational Leadership, Structural Empowerment, Exemplary Professional Practice and New Knowledge, Innovations and Improvements, all of which contribute to drive Empirical Outcomes.

These principles are featured in the stories we share within this report, as our Nursing team was also inspired by their Professional Practice Model and nurse attributes of Teamwork, Excellence and Integrity. These attributes and forces of Magnet provided a foundation to create exceptional experiences for our patients and their families, our community and our healthcare team.

It is with great intention that our continued and relentless pursuit of nursing excellence be supported through professional development, education, certification, innovation, research and collaboration.

In closing, we acknowledge and thank our inter-professional colleagues, as we know we could not accomplish these phenomenal outcomes without an **All-IN attitude** and team approach!

I thank each of our incredible nurses for all they do to care for each and every patient and family, each and every day.

With gratitude and honor,

Kim Armour, PhD, NP-BC, RDMS, NEA-BC
*Vice President and Chief Nurse Executive
Northwestern Medicine Huntley Hospital*





Transformational leadership

TRANSFORMATIONAL LEADERSHIP

Nursing Strategic Roadmap and PPM support exceptional care

The Huntley Hospital Nursing Strategic Roadmap and Professional Practice Model (PPM) aligns with the Northwestern Medicine values and nursing attributes. They reflect the nurses' commitment to delivering exceptional care to their patients in the ever-changing healthcare environment.

The PPM identifies the nurses' core values and places patients-first care at the center of the model. Integrity, Teamwork and Excellence encircle the heart to support the commitment to patients. Surrounding the core values and mission are the seven components of the model, each representing the complexity and versatility of the nursing care delivered at Huntley Hospital.

The Nurse Executive Council reviews the Nursing Strategic Roadmap and PPM annually.



Huntley Hospital Nursing Strategic Roadmap FY19-20

Deliver Exceptional Care	Quality and Safety Exemplary Professional Practice	<ul style="list-style-type: none"> • Minimize care variation • Adopt and enculturate Safety Always • Achieve year-over-year improvement in quality performance and nurse sensitive outcomes in all settings throughout the continuum of care to achieve top decile performance
	Patient Experience Exemplary Professional Practice	<ul style="list-style-type: none"> • Advance the patients-first mission to achieve top decile patient engagement as demonstrated by top quartile performance in "Likelihood to Recommend" (LTR) metric and supporting unit-based metrics
Advance Medical Science and Knowledge	Research/Evidence-Based Practice New Knowledge, Innovations and Improvements	<ul style="list-style-type: none"> • Promote, implement and disseminate nursing-led inter-professional research and evidence-based practice (EBP) • Collaborate with Northwestern Medicine partners on research and EBP to streamline efforts and maximize outcomes
	Education Structural Empowerment	<ul style="list-style-type: none"> • Advance towards Institute of Medicine standard of 80% BSN prepared nurses in the workforce • Encourage advanced nursing degrees at the bedside
Develop People, Culture and Resources	Engagement Exemplary Professional Practice Transformational Leadership	<ul style="list-style-type: none"> • Outperform the national benchmark in nursing satisfaction • Advocate and support enculturation of the Relationship-Based Care Professional Practice Model into the daily practice • Recruit and retain top talent of clinical nurses and practice partners
	Growth Structural Empowerment	<ul style="list-style-type: none"> • Promote a culture of lifelong learning as demonstrated through increased rates of professional nursing specialty certification and individualized professional development opportunities • Improve fiscal stewardship through clinical nurse involvement in financial planning and resource utilization including staffing • Support professional growth through mentoring and succession planning within all levels of nursing
	Investments/IT Infrastructure New Knowledge, Innovations and Improvements	<ul style="list-style-type: none"> • Support nursing involvement in the innovative planning and implementation of technology workflow and space design to facilitate improved patient outcomes; transition to Epic platform • Optimize current technology: interoperability, electronic medical record (EMR) and communication
	Community Outreach Structural Empowerment	<ul style="list-style-type: none"> • Promote nursing volunteer partnership in local and regional community healthcare and wellness initiatives that align with HealthyPeople 2020/2030 or United Nation's Sustainable Development goals



TRANSFORMATIONAL LEADERSHIP

Magnet journey continues

FY19 proved to be exciting for Nursing at Huntley Hospital as the Journey to Magnet Excellence is underway. This journey provides a roadmap to nursing excellence as designated by the ANCC.

Huntley Hospital submitted its Magnet application to the ANCC in December 2018 and received official acceptance on March 5, 2019. Huntley will submit its Magnet document on June 1, 2020, and Nursing leaders expect ANCC follow-up site visits in fall 2020.

“Magnet is the gold standard globally for hospitals,” says Huntley Hospital Chief Nurse Executive Kim Armour, PhD, NP-BC, APN, RDMS, NEA-BC. “For our patients, nursing excellence and the Magnet designation represent the highest-quality outcomes with an enhanced patient experience.”

During this Magnet Journey, Nursing staff and leaders are focused on embedding structures and processes that create an environment of excellence in which

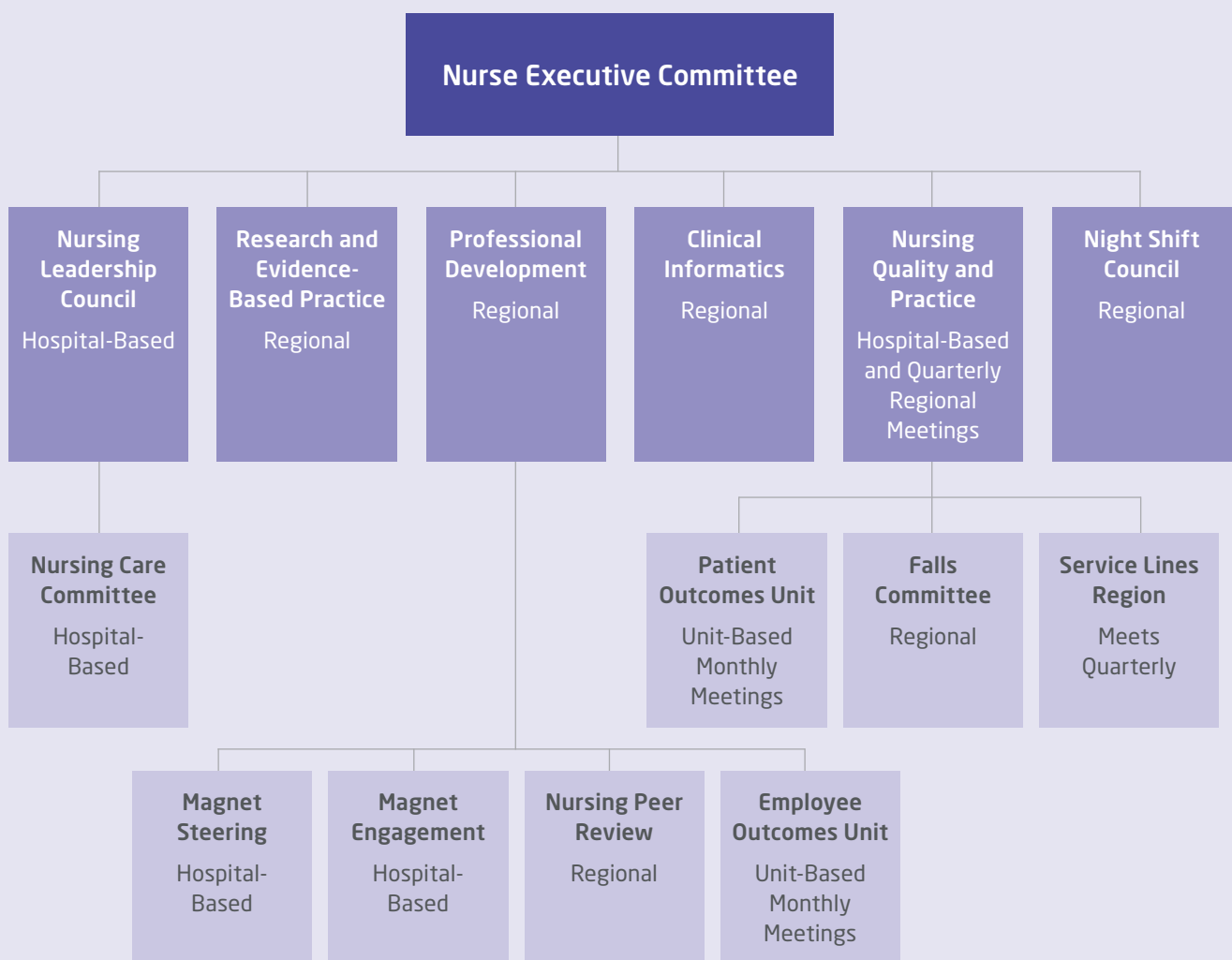
nurses are supported to provide the highest quality of care and are recognized for their achievements.

As part of the efforts to support nurses, Lisa Young, MSN, RN, Magnet Program manager, and Christina Kujawa, BSN, RN, Emergency Department, put up a poster highlighting the “Huntley League,” the superhero theme for Huntley Hospital’s Magnet Journey. Each unit designed a superhero to represent their team as they work toward nursing excellence.



Nurses participate in shared governance

The Shared Leadership Model supports participative decision-making by nurses at all levels. The organized structure promotes nurse autonomy over clinical practice standards, quality improvement, staff and professional development, and research. Communication is multidirectional among bedside professional nurses, leadership, inter-professional teams and chief nurse executives.



TRANSFORMATIONAL LEADERSHIP

Transformational Leadership transforms a nursing unit

Debra Harper, MSN, RN, director of Operations for Inpatient Nursing at Huntley Hospital, knows what it takes to transform culture on a unit. Harper collaborated with Abby Falbo, MSN, MBA, RN, manager of Operations for the Medical Telemetry Unit, to identify what the unit needed to rise up, face challenges and support the team.

As a result of listening to the team and empowering nurses to participate in improvements, the unit's outcomes and morale greatly improved. "As a leader, my job is to support them so they can do their jobs," Falbo says.



Over the past year, changes big and small occurred that transformed the culture on the unit, including Falbo coming in early every day to see her night shift team face to face. Through it all, Falbo had Harper in her corner offering advice.

The Nursing team appreciates Falbo's dedication and even recognized her as the unit's "Employee of the Month."

"She is a great leader," Harper says. "She has truly turned Medical Telemetry into a place where nurses want to work."



Structural empowerment

STRUCTURAL EMPOWERMENT

Huntley Cardiac Telemetry advances fall prevention

Northwestern Medicine Improvement Day celebrates team-based efforts to share meaningful project work across the health system. Projects that positively impact the patient experience, engagement, quality, safety, access and financial performance of Northwestern Medicine are shared. Improvement Day is an opportunity to formally recognize teams as they share improvement-oriented solutions and inspire their colleagues to lead change.

Northwestern Medicine
Improvement Day  2019

In 2019, the Huntley Cardiac Telemetry Unit (CTU) team led by Mary Bentley, MSN, RN, SCRNP, was recognized as the Colleague's Choice winner for their poster, "Call! Don't Fall! Fall Prevention Due to Staff Empowerment." The following team members contributed to the project:

Kim Armour, PhD, NP-BC, APN, RDMS, NEA-BC
Mary Bentley, MSN, RN, SCRNP
Halyna Bohuslavska-Hickey, RN
Tricia Conroy, MSN, RN
Andrea Engel, BSN, RN
Danielle Fallico
Deb Harper, MSN, RN
Tricia Konces-Simo, PCT
Abba Millare, PCT
Viviana Orozo, BSN, RN
Carmelita Santos, BSN, RN
Ross Sia, BSN, RN, SCRNP
Jessica Wolfe, PCT
Lisa Young, MSN, RN

The amazing work of this team has led to four consecutive quarters without a patient fall on the CTU unit.

Call! Don't Fall! Fall Prevention Due to Staff Empowerment

Executive Sponsor
Kim Armour

Clinical Sponsor
Deb Harper

Improvement Leader / Process Owner
Mary Bentley

Team Members: Halyna Bohuslavska-Hickey, Tricia Conroy, Andrea Engel, Danielle Fallico, Tricia Konces-Simo, Abba Millare, Viviana Orozo, Carmelita Santos, Ross Sia, Jessica Wolfe, Lisa Young

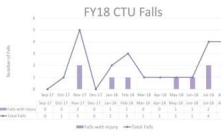
Successfully reduced patient falls by 73% and injuries sustained from falls by 100% on the Cardiac Telemetry Unit. This was accomplished by utilizing a solution-based approach and empowering the staff to initiate patient-specific fall prevention.

BACKGROUND

Define and Measure:

- There is a lack of standardization in the ongoing fall risk assessment and implementation of interventions in the prevention of patient falls.
 - Fall precautions are in place, however patient falls continue to occur.
 - CTU staff report feeling helpless, stating they are trying everything, and there is nothing else they can do.
 - It is a regulatory requirement that hospitals assess a patient's risk for falls and implements interventions to reduce falls based on the assessment.
 - 65% of CTU patients with a sustained fall are a moderate risk for fall on the Johns Hopkins Fall Risk assessment tool.
 - 58% of patients with a sustained fall are alert and oriented.
 - 47% of patients with a sustained fall disregard fall prevention instructions or interventions.
- Objectives:**
- Ongoing education to patients and families on increased risk to fall, and fall risk interventions to increase compliance and use of the call light.
 - Encouraged call light use will increase staff presence and assistance in the prevention of patient falls.
 - Increased bed and chair alarm use will alert staff of potential falls and provide the opportunity for reinforced patient education to call for help.

Figure #1: Baseline Data



METHODS

Analyze and Improve:

Figure #2: Easy Saying Signage

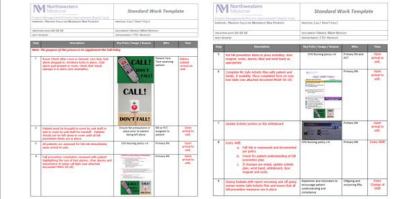


Figure #3: Ongoing Patient/Family Education



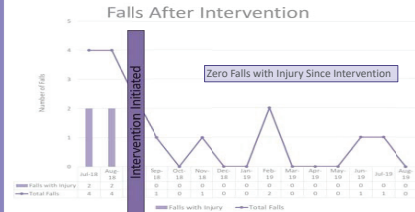
Figure #4: Patient Safety Action Plan

Figure #5: Standard Work Template



RESULTS

Figure #6: Fall Prevention due to Staff Empowerment



At the end of FY19, there was a 100% reduction in falls with injury. An individual fall with injury creates an additional cost of \$13,316 and an average additional length of stay of 6.3 days (CMS, 2010). The project has estimated \$133,160 of ROI as saved as a result of the project improvements.

Table #7: Control Plan

Metric	Goal	Control Measurement					Recommended Action Steps
		Control Limit	Review Process	Frequency	Process Owner	Threshold for Action	
CTU Falls	Zero Falls	1 fall with a deviation from the Fall Prevention Guidelines	Review every fall that occurs in CTU	Every Occurrence	Mary Bentley	2 consecutive occurrences above the control limit	Pull together work group to identify barriers/opportunities

CONCLUSIONS

- A standardized, individualized fall risk assessment process promotes consistency and empowers staff to initiate patient-specific fall prevention.
- Prior to the improvement project, staff described feelings of helplessness stating, "We are doing everything, there is nothing else we can do." After the implementation of the project, staff felt empowered and were overheard saying, "We can prevent falls. Patients don't fall in CTU"
- Engaged staff provide ongoing education to patients and families on fall risk interventions.
- Personalized education involves patients and families in care delivery and increases compliance.
- Improved patient outcomes empower staff in the provision of safe, quality, patient-centered care.



STRUCTURAL EMPOWERMENT

Professional Development team presents at national conference

The Association for Nursing Professional Development focuses on advancing the specialty practice of nursing professional development for the enhancement of healthcare outcomes. Tom Tockey, MSN, RN, CMSRN, and Katie Neil, MSN, RN, CCRN-K, developed a poster detailing how the Professional Development team decreased variation during onboarding and increased new nurse retention. Tockey and Neil were chosen to present their poster, "A Standardized Check-In Process for Orientees," at the association's national conference in April.



Nurses honored for extraordinary care

Huntley Hospital nurses are recognized for the extraordinary care they provide to patients and families through The DAISY Award.

2019 DAISY Award winners

Shannon Malone, BSN, RN

Intensive Care Unit

Candy Drinkwater, BSN, RN

Obstetrics

Michelle Ciero, RN

Emergency Department

Lindsay Donnewald, RN

Medical Surgical Telemetry

Jen Pineda, RN

Medical Surgical Pediatrics



IN MEMORY OF J. PATRICK BARNES

A Standardized Check-In Process for Orientees

Katie K. Neil, MSN, RN, CCRN-K and Thomas N. Tockey, MSN, RN, CMSRN

Background

Without a consistent show of support, orientees may not feel valued, accepted or excited about their new profession. Building programs that show value in support for transitioning nurses has an impact on staff professional engagement, a new nurse's confidence, and retention (Slate, Stavarzki, Romig, & Thacker, 2018).

A process improvement team was formed at Centegra Health System in November 2016 to identify and discuss inconsistencies in expectations of educator, leader, and preceptor practices while onboarding and orienting a new nurse to a unit.

The lack of standard work and practices among individuals involved in the onboarding/orientation process led to decreased satisfaction of members involved. The following inconsistencies in communication existed across the hospital system and from unit to unit:

- Educators unaware of new hire starting
- Educators discussed different topics during orientation
- Variations in leader onboarding tools
- Variations in educator onboarding tools
- Mixed communication between leader and educator to new hire
- Preceptors unaware of new hire starting
- Preceptors not involved in progress updates
- Lack of goal-planning with preceptors
- Redundancy between work of leader and educator
- Information gaps related to unclear communication responsibilities

Purpose

To create standards and tools for onboarding and orientation to provide clear expectations and communication for leaders, educators, and preceptors to benefit the orientee.

References:

Slate, K., Stavarzki, D., Romig, B., & Thacker, K. (2018). Longitudinal Study Transformed Onboarding Nurse Graduates. *Journal for Nurses in Professional Development*.

Method

Utilizing Lean principles, a team of educators, leaders, and preceptors representing 13 inpatient units and the emergency departments came together to improve the process. Data collected included the number of variations in the check-in process, Casey Fink confidence scores, and orientation check-in attendance.

The following standards were created as a result of the Lean process improvement project:

Onboarding Standards

- Welcome call checklist for leaders & educators
- Onboarding checklist for leaders & educators

Orientation Check-In Standards

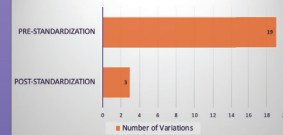
- Leadership involvement
- Preceptor involvement
- Educator led
- Check-in every two weeks
- Electronically stored standardized check-in form
- Development of bi-weekly learner goals
- Development of individualized education plans
- Calendar invites to leader, preceptor, and orientee

Tools were deployed to the leadership team along with expectations for use. Leader mentors were selected and trained for leadership support. Educators were trained in a classroom setting. Educator mentors were present at the first check-in for each educator on units that adopted the standards. Follow-up coaching was done via telephone or email. Standardized check-in audits were performed. Data was reassessed one year after standardization of practice implementation.

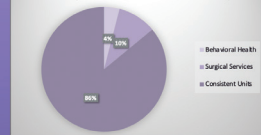
The standardized processes went live along with the nurse residency program in August 2017.

Findings

Number of Variations



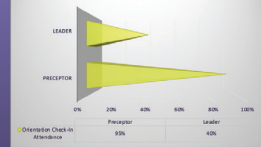
Post-Implementation Process Consistency



Casey Fink Results



Orientation Check-In Attendance



Implications

Improved communication and defined responsibilities between leaders and educators	Preceptor development through real-time coaching
Aligned communication to preceptors and orientees	Increased confidence of the new hire completing orientation
New educators trained to orientation standards with clear expectations	Increased leadership awareness of orientee performance
New nurse hires receive clear information from leaders, educators, and preceptors throughout onboarding/orientation	Action plans/developmental plans occur earlier in orientation
New infrastructure for deploying ever changing information to new hires in a quick and systematic fashion	Standard recording process that assists in tracking orientee goals

STRUCTURAL EMPOWERMENT

Huntley Hospital advances education and certification rates

The Huntley Hospital Strategic Roadmap supports the Institute of Medicine (IOM) Future of Nursing call to action for 80% of nurses to hold a Bachelor of Science in Nursing (BSN) or higher degree by the year 2020.

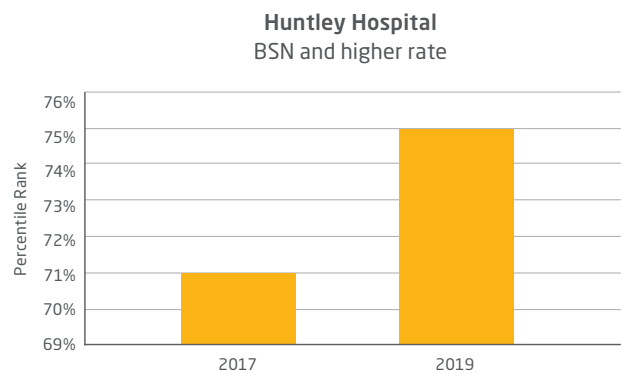
Many professional organizations, including the Magnet Recognition Program and American Nurses Association, support the IOM goal. The Magnet Recognition Program requires an action plan that includes a target and demonstrated evidence toward the 80% goal.

In addition to degrees, professional nursing certification is a formal process by which a certifying agency validates a nurse's knowledge, skills and abilities in a defined clinical area of practice based on rigorous standards.

With a commitment to lifelong learning, certified nurses bring expert care to the bedside as well as evidence-based practice guidelines and leading-edge knowledge to the organization.

Huntley Hospital ended 2019 with an overall BSN rate of 75%. The following Nursing units have met the IOM goal of at least an 80% BSN rate:

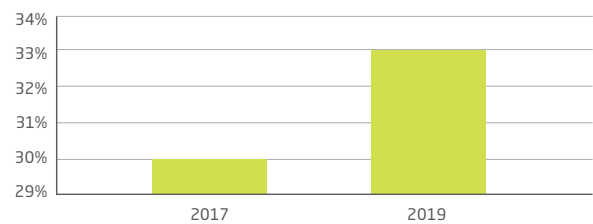
100%	Ambulatory Treatment Services Catheterization Lab Cardiac Pulmonary Rehabilitation
91%	Float Pool
90%	Same Day Surgery
86%	Medical Surgical Pediatrics
85%	Intensive Care Unit





Through a combination of strong support from the Professional Development team and NM Academy, and generous reimbursement policies supporting continuing education, Huntley Hospital is steadily increasing education and certification rates. The Magnet Recognition Program's benchmark for professional certification has been set at 51%. Huntley Hospital's current certification rate is 33%.

**Huntley Hospital
Certification rate**



Nurses in the following units have a 100% certification rate:

- Catheterization Lab
 - Lactation
 - PICC team
-

STRUCTURAL EMPOWERMENT

Huntley transitions from Clinical Ladder to Nursing Pathway

Huntley Hospital is committed to professional development and lifelong learning. Before integrating with Northwestern Medicine, Huntley utilized the Clinical Ladder Program to support nursing advancement. An opportunity to enhance the program was identified as Nursing leadership and the Professional Development team evaluated programs in use across the Northwestern Medicine system.

The Nursing Pathway Program is an integral part of empowering individual nurses to excel in their practice, benefiting patients and the community.

The Northwest Region Nursing Professional Development Pathway Program launched in September 2019, offering opportunities for nurses to participate in professional activities, evidence-based practice, research and quality improvement projects. About 75 nurses at Huntley Hospital expressed interest in the program.

Alyssa Carter, BSN, RN, is a Nursing Pathway Committee member and participant. "Being part of the Nursing Pathway Program has motivated my team to dive into the literature on best practices for OB patients delivering via cesarean section," she says. "Reading through the latest research has encouraged us to analyze the current state of our own patient care and inspired us to begin implementing changes to better meet the needs of our patients. The project I am a part of will greatly enhance the recovery process for our patients after delivering via a cesarean section."

M Northwestern
Medicine

Nursing Professional Development Pathway

Northwest Region

Patient Advocate

Collaborative

Compassionate

Knowledgeable

Professional





Exemplary professional practice

EXEMPLARY PROFESSIONAL PRACTICE

Nurses reduce sepsis readmission through enhanced handoff process

Sepsis, a potentially life-threatening condition, must be identified early and accurately to reduce mortality for patients. Patients with sepsis symptoms and diagnoses are closely monitored at Huntley Hospital to help ensure the best care is being provided.

An uptick in readmission rates following sepsis was identified at Huntley Hospital. Patients who had been discharged from the hospital were returning sometimes less than 24 hours later for further care. A committee was developed to address this concern.

The team quickly identified opportunities to improve the handoff between nurses. The handoff was improved to include whether a patient needed to be rescreened for sepsis in the upcoming hours or shift, making sure to identify any impending needs of the patient.

Following the implementation of the enhanced handoff tool, Huntley Hospital reduced the rate of sepsis readmissions from 13.5% to 8.1% after the first quarter.

“It was gratifying to be a part of the positive changes made for accurate and early recognition of a potentially septic patient,” says Mary Mills, BSN, RN, CPHQ, CPPS, Clinical Quality leader. “Early recognition, as well as appropriate and timely interventions, are pivotal to positive outcomes for septic patients.”



“For every hour that treatment is delayed, the mortality rate increases by 8%,” Mills continues. “Our ongoing work with the team to initiate the sepsis protocols stemming from those accurate and timely sepsis screenings continues to support evidence-based statements that time is critical when rendering care to the septic patient.”





EXEMPLARY PROFESSIONAL PRACTICE

Nurse-physician rounding drives up patient experience scores

Inter-professional collaboration and communication between nurses and physicians are important factors influencing the patient's experience. Nursing and physician leaders collaborated on how to improve the patient's perception of teamwork at Huntley Hospital.

Mary Bentley, MSN, RN, SCRNP, clinical manager for the Cardiac Telemetry Unit, Abby Falbo, MSN, MBA, RN, clinical manager for the Medical Telemetry Unit, and Mohammed Shaik, MD, hospitalist, partnered to develop a new process that emphasized nurse-physician communication during daily patient rounding.

Joint rounding, which involves physicians and nurses rounding on patients together, resulted in enhanced communication and collaboration. After implementing nurse-physician rounding in August 2019, patient experience scores on teamwork increased from a baseline of 66% up to 76% to 78%.

New knowledge, innovations
and improvements

NEW KNOWLEDGE, INNOVATIONS AND IMPROVEMENTS

Learning through research

An important responsibility of a nurse is to promote the growth of new knowledge through research.

Lisa Young, MSN, RN, Magnet and Quality coordinator for Huntley Hospital, questioned if standardized patient education was effective for knowledge retention compared to education that aligns with the patient's learning style.

Young assembled a team with clinical nurses in the Hip and Knee Replacement Center – Tina Ventrella, RN, and Joseph Jimeno, BSN, RN – and Cheryl Martin, BSN, CMSRN, ONC, nurse educator. The team identified and recruited eligible patients to participate in the study.

Although the findings did not support the hypothesis that tailoring education to a person's learning style was more effective in promoting knowledge retention, the team learned the educational process is multifaceted and requires further evaluation into factors such as literacy, teaching styles and the learning environment.

This was the first research study this team participated in, and they were excited about the knowledge they gained.





NEW KNOWLEDGE, INNOVATIONS AND IMPROVEMENTS

Exploring aromatherapy for patients following surgery



Attending national nursing conferences can be energizing. Diane Mechelke, MSN, RN, Surgical Services educator, returned from a national conference with an idea: explore the use of aromatherapy as a non-pharmacological intervention to reduce post-operative nausea and vomiting.

Clinical nurses Edgar Rebusit, RN, and Analyn Sapanhila, BSN, RN, championed the evidence-based project as an improvement for patients at Huntley Hospital. After a trial with 100 patients, the group presented data that supported the use of aromatherapy post-operatively. A protocol was developed for nurses to autonomously initiate a non-pharmacological intervention for patients experiencing post-operative nausea and vomiting.

Empirical outcomes

EMPIRICAL OUTCOMES

Huntley excels in nurse satisfaction

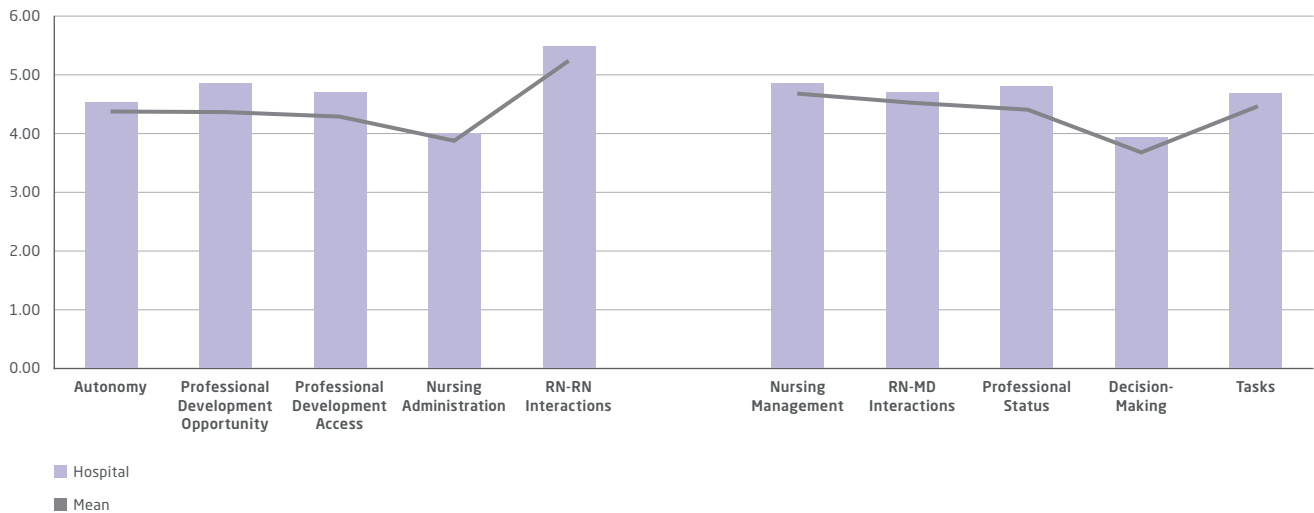
Nurses' perceptions about their role are critical for patient care. Their perceptions of their work environment ultimately impact the quality of care delivered, ownership of nursing practice, patient outcomes and job satisfaction.

Huntley Hospital strives to create and maintain a culture of excellence, a place where nurses want to work. Clinical nurses at Huntley Hospital participated in the National Database of Nursing Quality Indicators™ (NDNQI®) survey in October 2018.

The response rate was 97%. The survey measured nursing satisfaction in 10 categories, five of which are Magnet categories.

Huntley Hospital outperformed the national benchmark in four out of five Magnet categories, and nine out of 10 total categories. Nurses at all levels participate in reviewing and analyzing the satisfaction data, and partner to take action for improvement where needed.

Huntley Hospital Nursing Satisfaction
Comparison to NDNQI Job Satisfaction Scales-R
October 2018







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