



System Nursing ANNUAL REPORT 2020



Boise • Meridian
Hospitals • Ambulatory



**Pam Springer,
RN, PhD, ANEF, NEA-BC, NPD-BC**

*Interim Chief Nursing Officer/Vice
President, Patient Care Services/
Magnet Chief Nursing Officer*

It is my pleasure to present the 2020 Nursing Annual Report.

Wow—what a year 2020 was!

Despite the many challenges of the COVID-19 pandemic, the stories in this annual report demonstrate nursing's continuing contribution to the St. Luke's Health System mission, our focus on values and our never-ending emphasis on high-quality nursing care. We exhibited all six roles of nursing: Teacher, Sentry, Guide, Healer, Leader and Collaborator. We cared for patients, colleagues and ourselves. St. Luke's has outstanding nurses.

Of course, this year's report discusses our response to the COVID-19 pandemic, which was remarkable. We learned how to keep ourselves and our patients safe with PPE, dealt with continually changing protocols as we learned about this new virus and welcomed staff from other areas who surged to our units to assist. We cared deeply about our patients and their loved ones, suffered alongside them when we could not allow visitors and embraced technology to stay connected. What an experience.

This year, we continued to refine and improve our clinical practice in areas such as pain assessment/re-assessment, the discharge process and hand-offs while remaining survey ready at all times. I love that our nurses are never satisfied with the care we give. We can always be better. Even amid the pandemic, we grew in our profession. We continued to develop nurses through education, evidence-based practice and research. We maintained credentials and classes to ensure competency as well as developed new education for our daily practice changes.

In the annual report, you will read about programs that focus on resiliency and ensuring positivity. Even in the darkest times of the COVID-19 pandemic, we thought about each other; units and departments even sent care baskets to other team members who were struggling. We cared for each other. That exemplifies St. Luke's values to the core.

You will also see stories of Professional Advancement Through High-performance and Skill (PATHS) projects and nursing research projects that focus on the unique role of nursing. These projects not only implemented known evidence into practice (evidence-based practice), they created new knowledge for our profession. I encourage you to read about these projects. The nurses who participated in them report a renewed vigor for their profession.

Finally, St. Luke's Treasure Valley received its fifth Magnet designation from the American Nurses Credentialing Center—a very elite honor! As soon as we completed the fifth designation, we started working toward the sixth. We hope to see other sites join the Magnet journey soon.

I have a long history in nursing and have always been so proud to be a nurse. I was blessed with the opportunity to join the St. Luke's family almost eight years ago, and was again blessed when I was asked to step in as St. Luke's Interim System Chief Nursing Officer. It is easy to lead in an organization that truly lives its mission and values. We give outstanding care to our patients in all our areas. Please enjoy this annual report, which reflects on a year like none other.

Sincerely,

Pam Springer

I am thrilled to join St. Luke's Health System and our top-performing clinical teams who repeatedly prove their excellence in patient care, solid evidence-based practice and outstanding teamwork.

It has been inspirational to learn about the innovative work you have accomplished over the past year, despite the pandemic. St. Luke's teams have provided exceptional care for all patients, while at the same time accommodating myriad COVID-19 impacts. You planned, adjusted and created new processes as well as protected your capacity for care for St. Luke's communities across our footprint.

In addition to your daily clinical work, you continued your individual development and education, initiated new projects, supported important research and earned a prestigious fifth Magnet designation. You are exceptional. I am humbled to join this thriving, resilient and talented team. I look forward to leading you in continued work toward nursing excellence, shared governance, and outstanding patient care and outcomes.

I anticipate meeting our nursing teams, in person and/or virtually, over the coming months, spending time with you and discovering more about this impressive health system.

Thank you for entrusting me with this opportunity to lead.

With warm regards,

Elizabeth Steger



Elizabeth Steger, MSN, RN,
NEA-BC, FACHE

Transformational Leadership



Pam Springer,
RN, PhD, ANEF, NEA-BC, NPD-BC

*Interim Chief Nursing Officer/Vice President,
Patient Care Services/
Magnet Chief Nursing Officer*



Elizabeth Steger,
MSN, RN, NEA-BC, FACHE

*Senior Vice President of Professional
Practice Integration and Chief Nursing
Executive. Start date: June 28, 2021*



Joan Agee,
DNP, RN, CNOR, FACHE

Nampa COO/CNO



Arlen Blaylock,
BSN, MBA, NEA-BC

Magic Valley COO/CNO



Amber Green,
MSN, RN

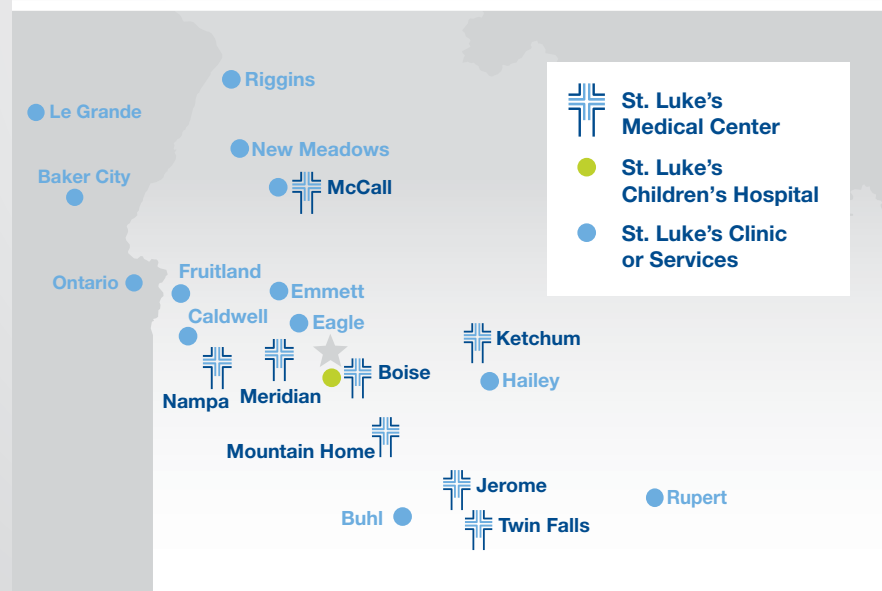
McCall COO/CNO



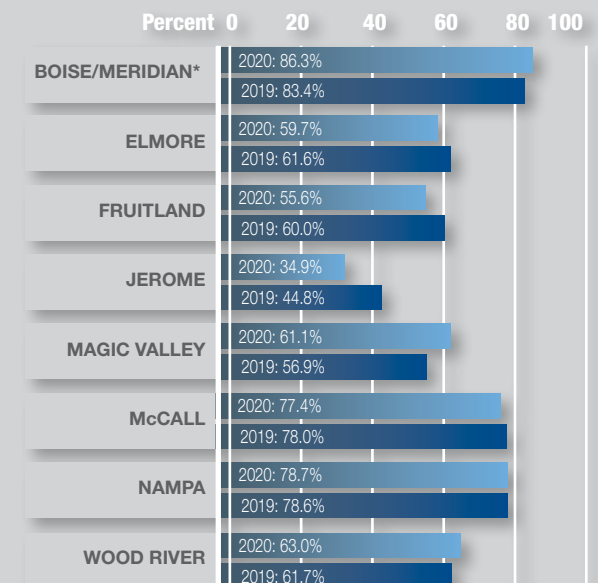
Teresa Hall,
BSN, MHA, RN, CEN, NEA-BC

*Boise CNO**

**Five-time Magnet-designated locations*



BSN & Above Percentage - All RNs





Jill Howell,
BSN, RN

Jerome Associate CNO



Shelly Jensen,
BSN, MHA, RN, NEA-BC

*Inpatient Rehab Service COO/CNO**



Carmen Jacobsen,
BSN, MPH, RN, NE-BC

Wood River COO/CNO



Lisa Melchiorre,
BSN, MBA, RN, NEA-BC

Elmore COO/CNO



Rene Pallotti,
MSN, MBA, RN, NEA-BC

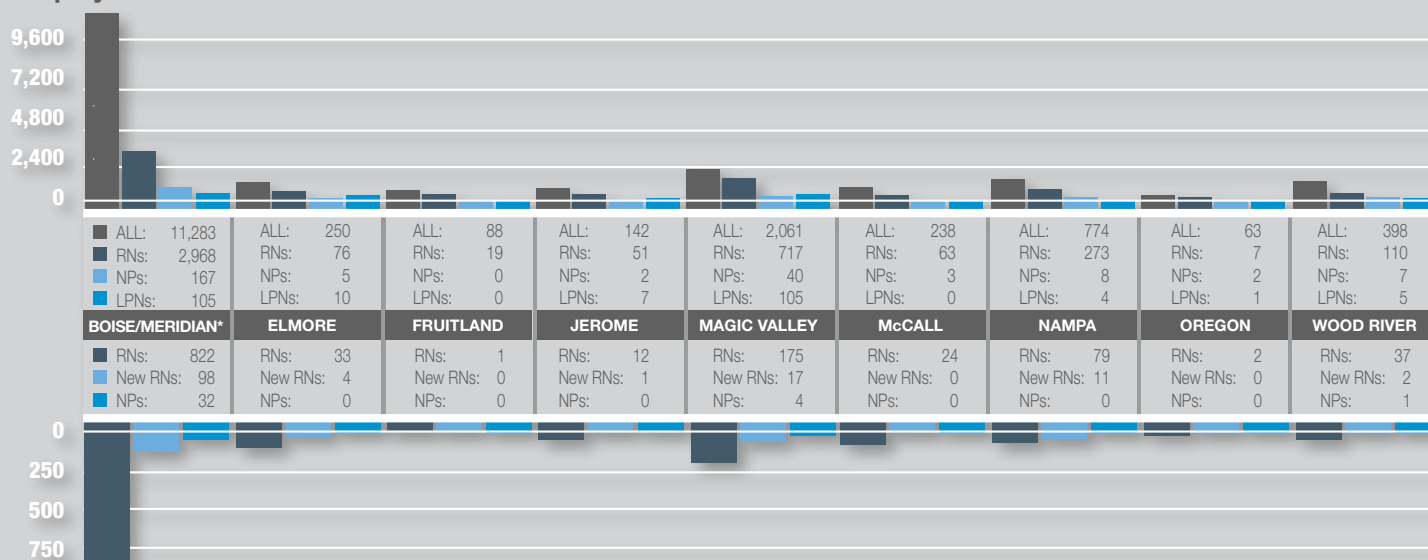
Meridian COO/CNO/Interim
Vice President of Population Health*



Alicia Young,
MSN, MBA, RN

*Ambulatory CNO**

Employee Counts CY-2020



New Hires CY-2019

Transformational Leadership

Nursing Strategic Goals

Culture

Ensure clinical nurse and nurse leader development opportunities

- Utilize Nursing and Patient Care Center of Excellence, Talent Development, and Clinical Learning and Student Services

Quality, Safety & Outcomes

Enhance and optimize culture of safety

- Falls intervention
- Barcode medication administration
- CAUTI bundle
- CLABSI daily line necessity
- Pressure injury bundle
- SSI bundle

Improve patient outcomes

- Falls intervention
- Barcode medication administration
- CAUTI bundle
- CLABSI daily line necessity
- Pressure injury bundle
- SSI bundle

Align nursing practice

- Diabetes care
- Hypertension control
- Depression screening
- Childhood immunization



Care Experience

Enhance care across the continuum

- Patient perception of care
- Convenient and available access
- Experienced cost of care

Stewardship

Maximize workforce utilization

- Utilize total worker health for healthy workforce
- Compliance with sepsis bundle and Care Pathway
- Post discharge connection



To do what nobody else will do, in a way that nobody else can do, in spite of all we go through: that is to be a nurse.”

– **Rawsi Williams, RN, JD**

Transformational Leaders Develop and Implement Testing Process for COVID-19

The nursing spirit pushes St. Luke’s Health System nurses to provide the best care for our communities. This was demonstrated the week of March 16, 2020, when the ambulatory nursing leadership team was tasked with the daunting responsibility of developing a plan for COVID-19 testing sites across the hospital network. This team stepped up: in less than 24 hours, they created unprecedented workflow plans for drive-through registration, outdoor testing and patient education, which began at St. Luke’s Meridian and St. Luke’s Wood River on March 17.

Extensive collaboration between departments—including nursing, lab, registration and information health technology—made the success of this operation possible. By the end of the first week, two additional testing sites were opened in Boise and Twin Falls. Despite blustery weather, an earthquake and ever-changing workflows, the St. Luke’s team came together to screen and test thousands of community members. For the ambulatory nursing leadership team, learning to depend on and support one another, despite working through this pandemic, only strengthened their dedication to nursing and their bonds with each other.



From left to right: **Jennifer Riha**, BSN, RN; **Kadie Anderson**, BSN, RN; **Kyan McKeever**, BSN, RN; **Kelli Reed**, BSN, RN; and **Cullen Anderson**, BSN, RN, support the testing tents. Not pictured, as they were at other testing tent locations, are **Alicia Young**, MSN, MBA, RN; **Stephanie Reichert**, MSN, RN; **Jamey Slayden**, MSN, RN; **Allison Burns**, BSN, RN; and **Marni Parry**, BSN, RN.

Consistent Rounding Leads to Improved Patient Satisfaction at St. Luke’s Elmore

St. Luke’s Elmore’s senior leadership, including Chief Operating Officer/Chief Nursing Officer Lisa Melchiorre, MS, RN, NEA-BC, CNOR, and assistant nurse managers, have implemented consistent weekly rounding on the inpatient units. During rounding, the leaders facilitate conversations with patients on how St. Luke’s Elmore could improve care as well as address any concerns they might have during hospitalization. Using a step-by-step process, nursing staff also completes hourly rounding to address any patient needs and safety issues.

As a result, St. Luke’s Elmore has seen a significant improvement in their patient satisfaction score for “Likelihood to Recommend.” This demonstrates what consistent rounding can do for a unit and a hospital. During regular huddles at the teamwork board where they can see the improvements, staff deservedly celebrate their continued success.



Assistant Nurse Manager **Marianne Svendsen**, BSN, RN, rounds on a new mom.

Transformational Leadership

St. Luke's Treasure Valley Earns Fifth Very Prestigious Magnet Designation

St. Luke's Treasure Valley, which includes the Boise and Meridian hospitals, local ambulatory clinics and, for the first time, the Boise Inpatient Rehabilitation Unit, submitted a fifth consecutive Magnet document to the American Nurses Credentialing Center (ANCC) in August 2019. After revision, the document was confirmed successful in 2020 and St. Luke's Treasure Valley was scheduled for a site visit with Magnet appraisers.

The site visit, originally scheduled for June, was delayed due to the COVID-19 pandemic. With everything in constant flux due to quickly changing and evolving pandemic information, St. Luke's, in conjunction with ANCC, decided to utilize technology and perform a virtual site visit. The date was set for mid-August, so plans could be developed for the virtual visit to ensure the safety of all involved.

The St. Luke's Magnet team immediately connected with Integrated Health Technologies (IHT) to implement the innovative technology needed to make the virtual visit successful. The IHT team built rolling tablet stands that enabled the Magnet site appraisers to visit any place remotely that they would have gone to in person. Magnet ambassadors—clinical nurses who guided each appraiser remotely—were paired with nurse leaders who served as Microsoft® Teams representatives, ensuring that meetings connected and all video technology was working as needed. These duos were key to the successful execution of the site visit. The nurses engaged fully with the appraisers and demonstrated the commitment of St. Luke's to Magnet.

In preparation for the virtual site visit, the Nursing and Patient Care Center of Excellence Magnet team released a toolkit and hosted bootcamps to refresh knowledge around the Magnet document. In addition to the standard Magnet refresh, the nature of the virtual visit necessitated additional preparation. To ensure that every area had appropriate audio and video capability, a team of Magnet

1-Magnet Ambassador **Ashely Wadsworth**, BSN, RN, guides a Magnet appraiser through the Boise Pediatric Intensive Care Unit.



2-Left to right: **Kim Popa**, BSN, RN, Teams representative, and Magnet ambassadors **Laura Bulmahn**, BSN, RN, and **Ashely Wadsworth**, BSN, RN, along with the other representatives and ambassadors were key to a successful site visit.



ambassadors physically went to each location and tested the connections. This involved crawling behind televisions, managing cables and opening cameras. The ambassadors were laser-focused, diligent and completed the mission. The Magnet team also conducted technology practice sessions with more than 30 different units, clinics and interprofessional groups to ease technology worries, allowing nurses to shine and tell their stories. Even through a screen, it was clear St. Luke's provides top-notch nursing care.

There was a lot to celebrate on October 13, 2020. Even behind masks or remotely on a webcam, the elation was clear: St. Luke's Treasure Valley received the official call from the Magnet Commission, announcing that a fifth designation had been awarded. The Magnet program recognizes organizations worldwide for nursing excellence; fewer than 25 hospitals in the United States have earned the honor five or more times. Special recognition was given by the Magnet Commission to the St. Luke's Treasure Valley Home Health team for their exemplary work with the high acuity team, which was first highlighted in the Magnet document and has since continued to demonstrate excellence.

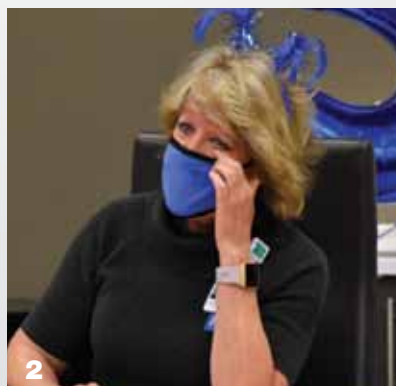
To finalize the celebration of the fifth designation, St. Luke's anticipates sending a delegation to the ANCC Magnet conference in November 2021, where St. Luke's will be honored along with other hospitals designated in 2020 for their accomplishments. Meanwhile, the Magnet team continues to develop Magnet education, including a new leader toolkit and monthly highlights called Magnet Microbursts, which will be deployed through care councils, to help keep the Magnet spirit alive and prepare additional sites for the Magnet journey.



Nurse leaders at St. Luke's Meridian celebrate the fifth Magnet designation announcement.



1



2

1- Nurses from the Boise Pediatric Unit visit with a Magnet appraiser using mobile technology.

*2- Recently retired Vice President of Patient Care Services/Chief Nursing Officer **Cy Gearhard**, MN, RN, NEA-BC, gets teary after hearing the Magnet Commission's news of a fifth consecutive designation.*

Transformational Leadership

Transformational Leadership Guides Boise Rehabilitation to Improved Retention

In early 2020, nursing turnover at St. Luke's Boise Rehabilitation (SLR) was trending around 50%, necessitating the use of 17 travel nurses to fill vacant positions. The turnover was potentially due to instability and leadership changes in 2019. Then, nursing director Jo Phillips, MSN, RN, NEA-BC, stepped in and provided transformational leadership along with Brett Gustafson, BSN, RN, who was promoted into the SLR nurse manager position. Phillips and Gustafson knew they needed to make changes to stabilize the nursing workforce; the staff was fatigued from the constant turnover and change. Together, the leaders put a plan in place to reduce the number of travel nurses. Vacant positions were filled with nurses who both fit the SLR culture and wanted to focus on elevating rehabilitation nursing.

To decrease turnover, Phillips and Gustafson utilized consistent leader rounding and mid-year checks to ensure that staff felt supported and were aware of all progress. Transparency with the staff was key in changing the culture. Updates were communicated weekly in huddles, monthly at staff meetings and on the teamwork boards. Staff recognition and feedback became a priority, specifically with the Care Out Loud program and 1:1 coaching using the Just Culture Model.

Efforts by the SLR nurse leaders proved successful. By September 2020, all but two travelers had been replaced with permanent staff and the turnover rate was down to about 20%. In October, the Inpatient Rehabilitation Unit participated in its first ever Magnet site visit and impressed the appraisers with their unity, knowledge and commitment to rehabilitative care. Currently, turnover rates continue to decrease. Pulse Poll data also shows improvement, with 90% of respondents answering in the positive. Nurses were engaged and more than ready to take on the next big event: the Commission on Accreditation of Rehabilitation Facilities (CARF) process in March 2021.

1- Assistant Nurse Manager of the Inpatient Rehabilitation Unit
Amanda Macho, BSN, RN, CRRN, meets with a patient and the patient's husband during leader rounding.



2- Assistant Nurse Manager
Nicole Muller, BSN, RN, PHN, CRRN, rounds on a patient in the Subacute Rehab Unit.



Structural Empowerment

St. Luke's Meridian Creates Program to Recognize Local EMS Partners

At St. Luke's Meridian, excellent STEMI care is a direct result of a strong partnership with local emergency medical services (EMS). After years of working collaboratively with EMS, door-to-balloon times are among the top 10% in the nation. Meridian Emergency Department Manager Cari Shuart, MSN, RN, CEN, and Chris Ehrmann of Ada County Paramedics had the idea of creating a recognition program for EMS crews that care for STEMI patients.

Shuart took this idea to STEMI Program Manager Teresa Smith, BSN, RN. They made the decision to recognize EMS crews that have helped St. Luke's achieve first medical contact to device times of less than the national standard of 90 minutes. Recipients will be honored with recognition letters and lapel pins of an anatomically correct heart. Now, each time a member of EMS helps St. Luke's Meridian achieve the 90-minute goal, the crew member receives an individual letter signed by Dr. David Coyle, STEMI medical director, and Smith, along with the lapel pin. From May 2020 to December 2020, 45 paramedics from five different EMS agencies were recognized.



Pre-hospital providers are key to delivering exceptional STEMI care. St. Luke's Meridian's recognition program has further strengthened the partnership with EMS.

St. Luke's Promotes and Supports Professional Certification Attainment

Jill Walters, BSN, RN, manager of Boise Cardiovascular Surgery (CVOR), completed her Certified Perioperative Nurse (CNOR) certification. She appreciated its value so much that she wanted her staff to have the same opportunity. Walters collaborated with the Nursing and Patient Care Center of Excellence (NPC CoE) and learned about available employee programs that offset the fees for review courses and offer repayment for successful completion of testing. Walters, with the NPC CoE, was able to organize an in-person review course at no cost to the participants in May 2020. Unfortunately, the pandemic put plans on hold; however, a quick pivot to an on-demand virtual course (still at no cost) enabled all the eligible RNs in the CVOR to sign up for the class. The course was also opened to all surgical services staff throughout the system. In total, 27 eligible RNs participated in the review course.

Walters set a unit goal to have 100% of the eligible RN staff certified in the CNOR over the next two years. Thanks to offering this course, 71% of Boise CVOR RNs were certified, with the remaining RNs hoping to participate in a review course in 2021. Systemwide, 19 RNs successfully received their CNOR certification after participating in the no-cost review course.



Boise CVOR nurses participated in the no-cost review course and then studied independently and together before testing for the CNOR certification.

Structural Empowerment

COVID-19 Surge Staffing: Operational Excellence

Enterprise Resource and Staffing and Clinical Learning and Student Services (CLaSS) leadership joined forces to build a nursing workforce surge staffing model to meet needs during the COVID-19 pandemic. The goal was to ensure adequate nursing resources to significantly increase capacity for care as needed. The commitment to achieving a high level of innovation and integration, even amidst the urgency, led to the collaboration between CLaSS leaders, unit-based educators, curriculum designers, electronic health record builders, nursing informaticists and nursing leaders across the health system.

The goal was to have a maximum number of cross-trained nurses with the ability to go anywhere in the system to care for COVID-19 patients. Existing tools were adapted and deployed, new tools were designed with haste, relationships were leveraged and positive intent was captured. Educators were repurposed to run a call center, matching available staff with shifts and preceptors. More than 3,000 nurses answered a readiness survey. Ultimately, approximately 1,500 nurses were cross-trained in one or more specialty areas, then entered into a database for deployment. The nurses were ready. In November, it became apparent that the surge RNs needed to be mobilized.

Cross-trained nurses answered the call. The surge RNs had been designated as Tier 1, 2 or 3 per skill-set, based on the nursing workforce surge staffing model. Tier 1 RNs could take an independent patient assignment; Tier 2 RNs could be placed in a partnership nursing assignment; and Tier 3 RNs could task and provide other support. Surge RNs were deployed to the area of greatest need within their skill sets.

St. Luke's nurses stepped up. Surge nurses were deployed to fill 292 shifts over three weeks. The relief was evident among the bedside RNs when the wave of nursing support arrived from areas that had not been caring directly for COVID-19 patients over the previous eight months. The deployment was a tremendous demonstration of St. Luke's professional practice model, Relationship-Based Care and ICARE values in action.

1- Clinical staff in the early days of the pandemic staying six feet apart at the testing tents before masking was a required practice.

2- Scottie Kafka, BSN, RN,
dressed and ready to perform drive through COVID tests.



Interdisciplinary Collaboration Improves Patient and Family Experience

When the COVID-19 pandemic hit and waiting rooms in emergency departments (ED) and surgical services closed, family anxiety, stress and worry increased due to restricted communication. Director of Care Experience Center of Excellence Kristy Schmidt, MN, RN, NEA-BC, responded quickly, collaborating with Integrated Health Technologies as well as a team of nurses, informaticists, analysts and health care experts to launch a patient-centered communication program in the electronic health record called Companion Notification. Companion Notification sends notifications via text message or email to patients' identified companions, informing them of standard processes and providing status updates throughout the patients' visits. SLHS teams crafted the messages carefully with language that was both informative and compassionate, hoping to alleviate worry, anxiety and fear of unknowns.

A pilot of the new technology was launched in St. Luke's Meridian ED and surgical services with support from emergency department manager Cari Shuart, MSN, RN, CEN, and surgical services director Melissa Winters, BSN, RN. Due to the pilot's success, the Companion Notification System was implemented throughout St. Luke's EDs and surgical services departments in September 2020. Since its adoption, there has been an upward trend in the "Likelihood to Recommend" patient satisfaction scores. Many respondents shared that they felt peace of mind as a result of staying informed.



Left to right: Kristy Schmidt, MN, RN, NEA-BC; Patient Access Specialist Katara Jones; Renee Shepherd, BSN, RN; and Cari Shuart, MSN, RN, CEN, trialed the Companion Notification System in the Meridian ED.

Patients' designated companions receive regular updates and notifications.

Rehabilitation Hospitals Devise a Standardized Approach to Education

In 2020, St. Luke's Health System's rehabilitation hospitals in Magic Valley and Boise developed a standardized approach to preparing staff for the Commission on Accreditation of Rehabilitation Facilities (CARF) surveys, which happen once every three years. Prior to 2020, education was not always coordinated between the two rehabilitation hospitals; as a result, the approach to preparing for CARF did not optimize the strengths of system resources.

Educators Suzanne Adams, MSN, RN; Kathy Cazeau, RN; and Robin Mcenany, MSN, RN, utilized the results of a comprehensive gap assessment to create innovative, just-in-time education to meet immediate needs. They devised a plan to convert the materials into a sustainable approach. Existing modules in the learning management system were updated to reflect current practices and standards. Next, the educators developed additional content to meet the gaps and used Microsoft Sway® to deliver materials to all staff. Content was stratified for delivery to appropriate team members.

The St. Luke's Rehabilitation Hospital in Boise was the first to try the new content. Employees were able to view the material at their own pace and completed post-tests to confirm knowledge transfer. In the future, the content will be converted into modules so that the online learning solution can be used by St. Luke's Rehabilitation: Twin Falls for their CARF survey in 2022.



Structural Empowerment

Practice Makes Perfect: Evidence-Based Demonstration Leads to Improved Scores

At the end of 2019, bedside RNs participating in the Boise 4 South Care Council identified that there was a lack of consistency both in the content and the location of report. To standardize handoffs taking place at the bedside and improve patient safety, the Care Council collaborated to develop a handoff guide, specific to the patient population, that

could be laminated and placed in each room for RNs to utilize while giving bedside handoff. Education about the evidence-based rationale for bedside handoff was provided, and several nurses also participated in creating a video demonstrating an effective bedside handoff.

Furthermore, a team of RNs who consistently and successfully gave bedside handoffs, including Angie McGraw, BSN, RN, and Mallory Campbell, BSN, RN, became unit champions, leading their teammates by example and providing just-in-time feedback to peers who were not giving handoff at the bedside. Nurses also nominated peers who were effective at giving bedside handoff; a “Bedside Handoff Excellence Award” was given at the end of each month.

The following nurses were recognized by their colleagues for demonstrating excellence in bedside handoff: Karrie Passmore, BSN, RN; Hannah Dodge, BSN, RN; Chelsey Nye, BSN, RN; Brea Mikolajczyk, BSN, RN, CMSRN; and Erin Heise, BSN, RN, OCN. Over the course of the year, bedside handoff compliance

increased from 80% to 94%. During this time, Boise 4 South also witnessed a trend of decreased change of shift falls and increased efficiency in handoff. In addition, Press Ganey scores demonstrated an increase from a top box score for “Recommend the Hospital” from 78.8% to 83.3%.



Angie McGraw, BSN, RN, and Mallory Campbell, BSN, RN,
perform bedside handoff.

Exemplary Professional Practice

Small Acts of Kindness by a Magic Valley Nurse Provides Healing Experience for a Patient

Lucero “Lucy” Arteaga, ADN, RN, a nurse at St. Luke’s Magic Valley, is known for her contagious laughter and bright smile. Arteaga was caring for a severely ill COVID-19 patient who, after weeks of treatment, was not showing signs of improvement and declining despite the team’s best efforts. Isolation and language barriers had complicated treatment and left the patient depressed and lonely.

When the patient’s birthday arrived, Arteaga was determined to make it special as well as provide some needed comfort. Arteaga taught the staff to sing “Cumpleaños Feliz,” then she coordinated with the patient’s family so they could participate in the sing-along via video. Tears and smiles filled the room and hallway surrounding this patient. For a moment, burdens were lifted.

After speaking with unit leadership and determining the patient’s prognosis was not looking good, Arteaga coordinated another special moment: a quick visit by the patient’s spouse. The comfort, love and familiarity given to the patient made a difference. Later that night, the patient’s spirits lifted, oxygen demands decreased and the patient began turning the corner. Arteaga’s small acts of kindness created long-lasting effects.



Lucero “Lucy” Arteaga, ADN, RN, has been a nurse in SLMV’s inpatient medical unit for a year and a half.

Home Health Collaborative Care Plan Improves Patient Outcomes

Home health care providers often face complex situations as a result of social determinants. The ability to meet patients where they are is a key component to making a difference. One example of this is the story of a recent patient who had several medical conditions and a complex history. He entered the service with multiple issues, including open wounds on both of his legs. However, he lived in an RV with no running water; his environment was not optimal for health and healing.

The St. Luke’s Home Health team collaborated with Dr. Ashley Whitaker and the St. Luke’s Wound Clinic to determine a care plan specific to the patient’s needs. The team proceeded with treatment while also taking care to maintain his dignity. The St. Luke’s Home Health social work team also helped him to locate, apply for and furnish an apartment.

The patient’s health stabilized, his wounds healed and he was discharged after meeting all his health goals. He is now enjoying a beautiful view of the Boise foothills with his loyal dog by his side.



When home health providers strive to meet patients where they are, they can make a big difference in patients’ health and lives.

Exemplary Professional Practice

Collaboration and Quick Changes Meets the Needs of SLHS During COVID-19 Pandemic

When the COVID-19 pandemic hit Idaho in March 2020, all in-person education was suspended to protect employees from the spread of the disease. This included New Employee Clinical Orientation (NECO), essential classes such as CPR and ACLS, and Supporting Transitions and Relationships (STAR) new graduate nurse residency classes and simulations.

A virtual escape room engaged STAR residents in interprofessional collaboration, delegation, time management and resource utilization.

A WebQuest used Forms to present information and collect answers related to topics such as value-based care and nursing sensitive indicators.

Clinical Learning and Student Services leaders, course coordinators and education specialists across the system quickly assessed which classes were essential for patient safety. For classes requiring skill validation (in-person), new safety measures were implemented, meeting all COVID-19 standing protocols with social distancing and cleaning. Microsoft Teams® was instrumental for instructor communication and aided in ensuring that the required classes were continued.

NECO and STAR Immediately Adapted to Safely Onboard New Clinicians

Course coordinators and education specialists across the system immediately collaborated to address NECO, which could not continue completely in-person due to safety concerns related to the coronavirus. Twenty hours of in-person content was converted to a virtual platform using evidence-based best practices. A NECO update/support group, including site leads, NECO instructors and support staff, was created to guide conversation and keep everything on track. The team had to create engaging alternative solutions for all three days of instruction. In just two weeks during March 2020, the group accomplished the following:

- Collaborated and combined resources across the system to assess the need for, then develop online content from existing in-person classes.
- Researched best practices for utilizing innovative online dissemination principles and incorporated adult learning principles to provide a quality onboarding experience.
- All didactic content became virtual so both St. Luke's Twin Falls and Boise, the two locations that traditionally host NECO for the entire system, could attend together. Pooling resources resulted in fewer instructors needed to teach these classes.
- Quickly learned and began utilizing the Microsoft® Teams platform. NECO was one of the first St. Luke's classes to hold large scale Teams meetings for instruction (up to 65 students per class).

Recognizing this was an especially challenging time for new nurses, the STAR facilitators, Christiana Sipe, MSN, RN, and Liz Clabaugh, MN, RN, NPD-BC, transitioned the program to



a virtual setting while considering their specific needs. Microsoft® apps, including Teams, Teams Breakout Room, Stream and Sway, were all used to replicate in-person activities. Sipe created a virtual escape room to teach interprofessional collaboration, delegation, time management and resource utilization. A WebQuest created by Clabaugh used Forms to present information and collect answers related to topics such as value-based care and nursing sensitive indicators; she also utilized breakout groups where participants could share their answers with the larger class.

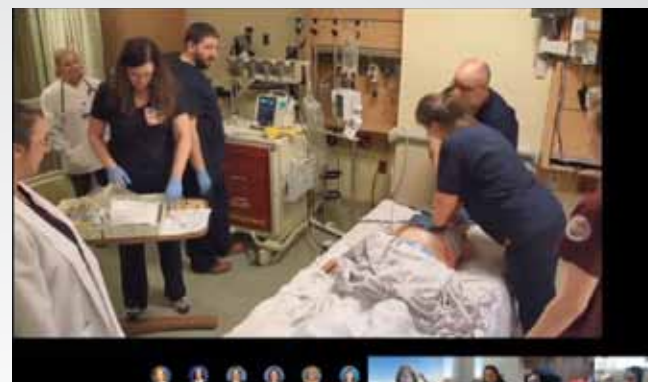
Clabaugh and STAR presenter Jean Richardson, BSN, RN, realized residents would miss the in-person review of a crash cart and its contents, so they used a cell phone to film Richardson reviewing a crash cart. Digital media coordinator Michael Hobson edited the video and posted it to Stream so it could be viewed during online STAR classes. Finally, the Nursing and Patient Care Center of Excellence created a video highlighting the resources they offer and providing information about next steps, so this could be shared online during class.

Although the STAR facilitators still prefer the in-person classes, especially to better support the relationship aspect of STAR, they were delighted to provide high-quality transition-to-practice support for STAR residents in an online setting.

Simulation Adapted for Virtual Sessions

The St. Luke's simulation team developed alternative modalities to meet the needs of learners within the system. Under the direction of Pam Springer, PhD, RN, ANEF, NEA-BC, and Tammye Erdmann, BSN, RN, MSEd, BScIT, CHSE, the simulation team built evidence-based virtual modalities; using technology, they achieved the educational objectives related to both the cognitive and affective domains of simulation. Cognitive domains reflect the intellectual skills related to the material while the affective domain connects to the way people react emotionally as well as their awareness to the feel of the situation. Key simulation adaptations included:

- A Teams meeting modality that incorporated a PowerPoint with video clips, which can be debriefed to allow learners to reflect on built-in challenges.



Lexi Jensen, BSN, RN, acts as a patient while being observed by **Kelli Rios, BSN, RN,** and **Wendy Gordon, MSN, RN.**



Colleen Weeks, MSN, RN; **Heather Knapp, BSN, RN;** **Dani Boespflug, MSN, RN;** and **Lexi Jensen, BSN, RN,** participate in a CPR simulation via Teams, viewing a recording made prior to the COVID-19 pandemic.

—Continued on Page 18

Exemplary Professional Practice

—Continued from Page 17

- A Teams meeting modality where groups of learners can interact with a standardized patient to improve communication skills with the patient and within the team while hardwiring clinical practice.
- A self-paced, independent, computer-based activity where a learner can move through presented scenarios and reflect on choices made within the scenario.

Feedback from participants about the new model indicated that key objectives of critical thinking, resource identification, use of clinical protocols and communication were met with the adapted simulation format. Virtual simulations can be done safely when the need arises and will be adopted as a permanent offering.



PATHS Program Demonstrates Exemplary Professional Practice and Transformational Leadership in Action

Professional Advancement Through High-performance and Skill (PATHS), St. Luke's professional development program created to empower and engage clinicians, supports clinical staff in developing leadership skills through project-based activities. Clinical staff identify professional development goals based on system strategic priorities, then leaders guide participants by supporting their visions, removing barriers, acting with purpose and making the staff their priority.

Clinical staff participating in the program are achieving both their professional goals and project goals. Participants like Sara Palma, BSN, RN, CCRP, have moved into leadership positions following involvement in the PATHS program. Leadership skill development is enhanced when participants are supported by transformational leaders, including Jody Acheson, DNP, RN. Acheson says of her experience with one former PATHS participant, "I really feel that [participant] has grown professionally as she now looks at a problem and evaluates all of the parts and gathers all of the information before jumping to conclusions. She is much more likely to come to the table with potential solutions and ideas." Leaders also gain valuable lessons from the experience of mentoring and guiding participants.

PATHS is celebrating its fourth year. The program accepts applications from clinical staff twice a year, in the spring and fall. In 2020, 15 clinical staff completed projects and were awarded a bonus of up to \$3,000 based on project quality, outcomes and effort.

Meridian Telemetry Improves Patient Discharge during COVID-19 Pandemic

St. Luke's Meridian Telemetry experienced a noticeable increase in discharge call-backs from patients and family members, needing additional information and instructions, in the spring of 2020 due to restrictions on visitors during the COVID-19 pandemic. Telemetry technician Cindy Cardozo expressed surprise at how many of these calls she was getting and noted that the people often sounded upset. It was clear that patients and families were not getting the information they needed prior to discharge. These frequent call-backs also disrupted the staff's workflow as they worked to find answers for patients and their families.

With support from the Meridian Telemetry Care Council and with assistance from Steve Grant, BSN, RN, and Cardozo, Rhe Perdue, BSN, RN, led a project to address the volume of call-backs. They found the majority of calls were from family members asking for information on prescriptions and next steps because they were not allowed in the hospital, so they were not receiving the information they needed to support patients after discharge. After an evidence-based practice literature review, the team created and implemented a discharge checklist to address the identified concerns. The checklist, attached to all after-visit summaries, contained the following points:

- Ask the patient if you can conference in a family member or call someone to review discharge instructions, especially elderly or confused patients.
- Review ordered prescriptions and verify pharmacy.
- Review medications, indication, dose and when next dose is due.
- Highlight St. Luke's phone number to call if they have questions after discharge.
- Review all follow-up appointments.
- Check the room for belongings.

This project was a success: discharge call-backs were reduced by 42%. The needs of patients and their families were met, and staff were able to return to their normal workflow.



A Meridian telemetry nurse works through the new discharge checklist.

Exemplary Professional Practice

PATHS Project Leads to Improved Goal Discussions at St. Luke's Cardiopulmonary Rehabilitation in Meridian

Cardiac and pulmonary rehabilitation patients are not always aware of their specific program goals of risk-factor reduction, such as improving lifestyle and biometrics. Sara Palma, BSN, RN, CCRP, and Kameron Barnett, MSOT, OT/L, CCRP, at St. Luke's Cardiopulmonary Rehabilitation in Meridian, realized that patients' understanding could be improved by making some needed changes.

Palma started a PATHS project, with the support of leaders, to determine how to better coordinate goals discussions between staff and patients, and also among staff, to eliminate duplication. This project led to a coordination of efforts between providers, social workers and case managers: by taking advantage of unused tools in the electronic health record to set and reassess goals, the team developed a new approach for patient education regarding goal setting and recognition of barriers to progress. In the midst of the COVID-19 pandemic, this project also provided guidance for communication with patients during hybrid and telehealth operations.

Jana Feldman, BSN, RN, CCRP, NPD-BC; Sara Palma, BSN, RN, CCRP; and Kameron Barnett, MSOT, OT/L, CCRP.



Patient outcomes data showed surveys on quality of life indicators had similar increases from 2019 to 2020; a staff survey demonstrated a self-reported increased understanding of the importance of goals in cardiopulmonary rehabilitation. Through completion of this work, Palma hopes to see improvement in patient experience and engagement as well as a pathway to providing remote services to patients in rural areas who need education to improve their lifestyles and reduce morbidity/mortality.

Sparking Joy in the Workplace at St. Luke's Nampa

Amanda Erickson, BSN, RNC-MNN, wanted to boost feelings of joy in the workplace at St. Luke's Family Birth Center and Neonatal Intensive Care Unit. The Institute in Healthcare Improvements (IHI) 2019 conversation guide recommended joy-assessment tools to help implement strategies that could restore, foster and nurture joy in the workplace. Utilizing the IHI guide, Erickson's first step was to engage colleagues in conversations around "What matters to you?" and identify unique impediments to joy in work using an electronic questionnaire. Focusing on workplace joy and satisfaction, pulse surveys were conducted monthly. Erickson analyzed the data from the initial survey for quantitative and qualitative content as well as evaluated emerging themes that contributed to joy in the workplace.

The three major themes—factors that boosted joy in the workplace—that emerged were recognition, positivity related to joy in day-to-day interactions and career development:

- **Recognition:** Activities that contributed to nurses feeling recognized include nurses' appreciation week; peer-to-peer feedback comments displayed in break room (lifesaver board); the breastfeeding advocate superstar board; and the weekly newsletter that included the recognition of staff members.
- **Positivity related to joy in day-to-day interactions:** Activities that contributed to increased positivity in daily interactions include leadership emphasizing positivity in daily shift/joy huddles and sharing of patient feedback comments during nursing report.
- **Career development:** Activities that contributed to the joy in the workplace through career development included leadership purposefully rounding with staff and a professional advancement opportunities presentation from the Nursing and Patient Care Center of Excellence.

Joy in the workplace is possible. When you have joy, it allows others to feel it, too. Although future exploration is needed to evaluate additional interventions aimed to improve joy in the workplace, Erickson's work provided a strong model of how to assess current practices and implement changes.



Amanda Erickson, BSN, RNC-MNN, presented a poster that highlights data on joy in the workplace.

New Knowledge, Innovations and Improvements

Enhancements to the Boise Obstetric Stat Team Improves Response Time

In 2016, leaders and staff in St. Luke's Boise's Labor and Deliver (L&D) Unit created a dedicated obstetrics (OB) Stat Team to respond to OB emergencies similar to a code team. The OB Stat RN was a nurse with a patient assignment who would report in for the emergency, leaving someone else to watch over the patient. In 2020, staff who acted as OB Stat RNs voiced concern about being pulled from their assigned patients, especially as the number of emergencies, as well as the complexity of situations, increased.

These nurses took the idea of creating a dedicated OB Stat RN to the Unit Based Care Council; the position was approved for pilot in November 2020. Data that was collected on 68 out of the 70 pilot days indicated positive findings, including decreased rate of response time to the emergencies, increased availability of the charge nurse for other staff and unit needs, and overall staff satisfaction with the role. Based on the data and feedback gathered during the pilot, a proposal for additional funding for staffing was submitted and approved at the beginning of 2021, allowing the dedicated OB Stat RN position to become a permanent role in the L&D staffing model.

*Left to right: **Brandi Johnson**, BSN, RN; **Laura Taylor**, BSN, RN, C-EFM; **Jeanette Root**, BSN, RN; and **Alicia Bates**, BSN, RN, have been trained as some of the first dedicated OB Stat RNs.*



Research Fellowship Participation Aids in Understanding Parental Barriers in Reporting Fever

Amy Stukenholtz, BSN, RN, CCRC, and Michelle Hancock, BSN, RN, CPON, are nearing completion of their research study “Caregiver Perceived Barriers to Notifying Oncologist at Onset of Fever Greater Than 101°F Among On-Treatment Pediatric Oncology Patients.” They developed the study while participating in the Nursing Research Fellowship program (2019) and collected data during their senior fellowship year in 2020. The study’s purpose is to better understand caregivers’ perceived barriers to immediate notification of providers when a child, currently on treatment, has a fever greater than 101°F.

Neutropenic fever is a leading cause of morbidity/mortality in pediatric oncology patients. Caregivers of pediatric patients treated at St. Luke’s Cancer Institute are educated about the necessity of notifying their provider immediately if the patient has a temperature above 101°F. Why do they sometimes fail to do so?

“Through the interview process, we identified consistent themes of negative past experiences, lack of support for family members and seemingly conflicting information as barriers to immediate notification,” says Hancock.

Stukenholtz adds, “Our goal is to develop a QI and possibly a PI project centered around improving the education that nurses provide to families at the time of cancer diagnosis and throughout treatment.”

Stukenholtz and Hancock are preparing a manuscript about the study for submission to a peer-reviewed professional journal.



Amy Stukenholtz, BSN, RN, CCRC, and **Michelle Hancock, BSN, RN, CPON,** presented a poster with their findings during the Nursing Research Fellowship celebration.

New Knowledge, Innovations and Improvements

Innovations in Critical Access Hospitals During the COVID-19 Pandemic



Sayings like “it takes a village” or “all hands on deck” are often used when it’s important that all are involved in achieving a goal. From the onset of the COVID-19 pandemic and through the continued spread of the coronavirus, it was the absolute reality in St. Luke’s critical access hospitals. While staff at all sites experienced flexing to implement safety procedures and optimize care of patients, in critical access hospitals, where there is far less personnel to rally, it was truly an impressive feat. Exceptional teamwork enabled them to succeed. Below are just a few of the examples.

St. Luke’s Jerome Demonstrates Relationship-Based Care and Teamwork

When the COVID-19 pandemic surge hit St. Luke’s Jerome (SLJ), staff from all departments joined forces to meet the high volume of continually changing needs. Even though SLJ did not admit suspected COVID-19 patients, the pandemic challenged the team to evaluate

workflows, set new priorities and change the status quo. Staff took on new roles and additional responsibilities as well as shouldered a heavy burden to meet not only the facility’s needs, but personal challenges related to the pandemic.

SLJ demonstrated relationship-based care, St. Luke’s professional practice model, by practicing self-care and care for coworkers. The team not only collaborated, but went the extra mile: taking on extra shifts and turning 12-hour shifts into 16-hour work days. One weekend, 100% of the nurses scheduled for the night shift in the emergency department were unable to work. The next weekend, 100% of the obstetric nurses scheduled during the day shift couldn’t be there. Staff changed personal plans, traded shifts, stayed over and came in early—all with the attitude of “just tell me what you need, and I will help.” Associate chief nursing officer Jill Howell, BSN, RN, also went above and beyond in rounding and recognizing staff. As a result, the Magic Valley Health Foundation recognized the team’s sacrifices and hard work.

With help from the Magic Valley float pool, cross-trained staff, teamwork, dedication to colleagues and loyalty to their small, but important, critical access hospital, this remarkable team surmounted many challenges.



St. Luke’s Jerome’s Associate CNO Jill Howell, BSN, RN, has recognized the staff’s hard work throughout the pandemic.

St. Luke’s McCall Cares for Colleagues and the Community through Collaboration

Not everyone stayed home during the COVID-19 pandemic. St. Luke’s McCall (SLM) typically serves a population of around 10,000 people, but in 2020, with people traveling or relocating to second homes in McCall for seclusion, fresh air and nature, the community saw a significant increase in residents. While SLM witnessed around normal volume in surgeries and deliveries, there was an increase in trauma cases and emergency department patients.

The team quickly recognized the need to change workflows and processes to contend with the influx of patients. One significant change to workflow, which proved to help keep patients safe from coronavirus infection, was treating all symptomatic patients in a separate section of the 15-bed medical/surgical unit. The team converted a portion of the space into an isolation unit, separate from the surgical patients and the mother-baby population.

In accordance with SLM's shared governance model, team members with years of experience in rural nursing continually contributed ideas and input. Involving every department at SLM in decisions not only optimized patient care, but enhanced patient and employee safety. Nursing workflows changed significantly and the team stepped up to the challenge by being flexible with assignments. Collaboration, dedication to each other and the community, relationship-based care and the SLHS professional practice model were the keys that kept SLM running at capacity while also maintaining a safe workplace.



The team at St. Luke's McCall in their personal protective equipment.

Everyone Just Said “Yes”: St. Luke’s Wood River Responds Quickly to the COVID-19 Pandemic

The COVID-19 pandemic was an event that touched everyone at St. Luke’s Wood River (SLWR). The extraordinary challenge inspired everyone to say “yes” to whatever it took to meet the challenge head on. As the first site in the system to get hit by the pandemic, the SLWR team pulled out all stops to make sure the community stayed as safe as possible.

Led by educators Amber Weber, MSN-Ed, RN, RNC-NIC, NPD-BC, and Hazel Thorn, ADN, RN, nursing staff from inpatient and ambulatory teams were cross-trained, first to cover the emergency department (ED) and later to staff testing tents and inpatient areas outside their normal areas. St. Luke’s Director of Clinical Learning and Student Services (myStLuke’s/Epic) Paula Lewis, BSN, MBA, RN-BC, was instrumental in paring down the courses on charting in the electronic health record, usually two to three days of learning, to just hours to meet the extreme needs of SLWR. By early summer, testing tents were in full swing and workflows had adapted quickly—and continued to change. Ambulatory manager Allison Burns, BSN, RN, played a significant role in ensuring that cross-trained staff were aware of the ever-changing situations.

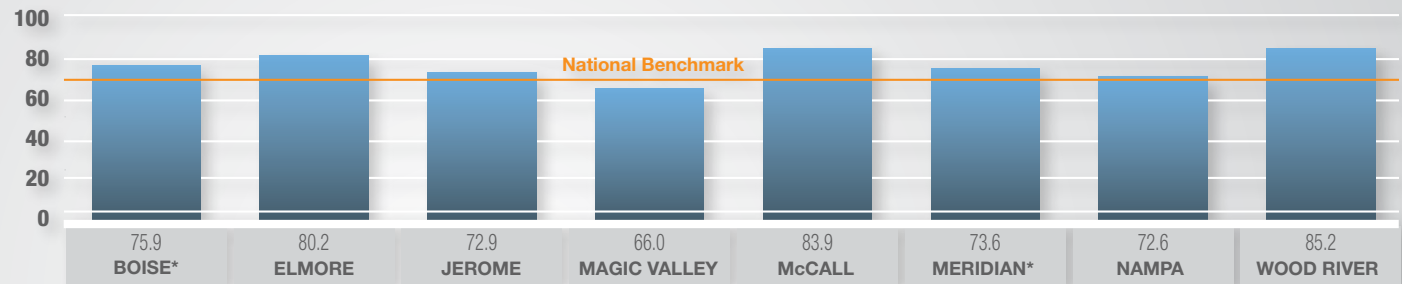
The third wave hit in the fall; this time the inpatient areas were impacted. Without missing a beat, the educators set up two four-hour skills fairs. The entire SLWR team again stepped up to manage this challenge and it would not have been possible without staff just saying “yes” to whatever was asked of them in the midst of unprecedented times.

Empirical Outcomes

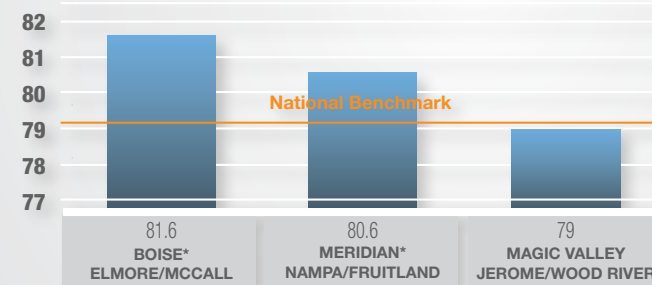
Patient Satisfaction (HCAHPS) Data — CY2020

Nurses Overall Top Box %

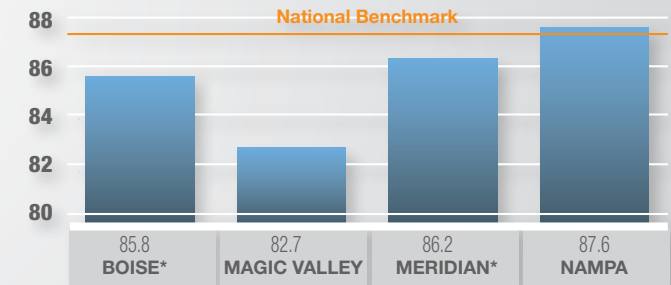
Inpatient Adult Units



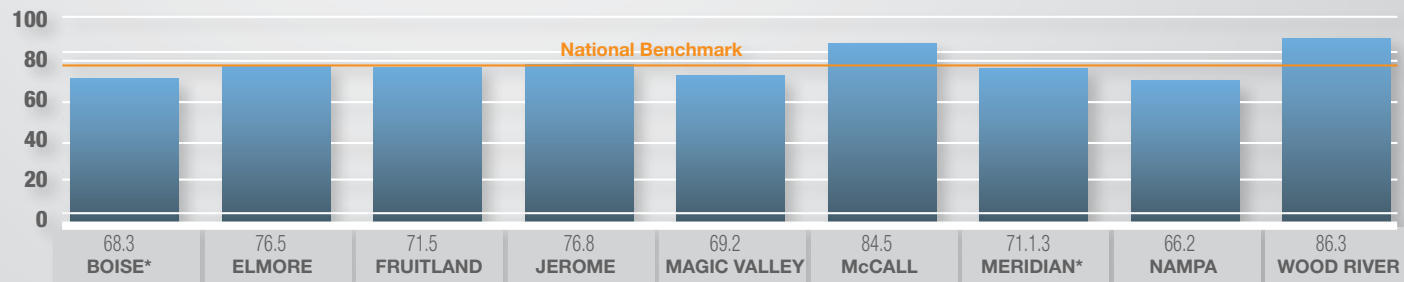
Ambulatory Clinics



Outpatient Surgery

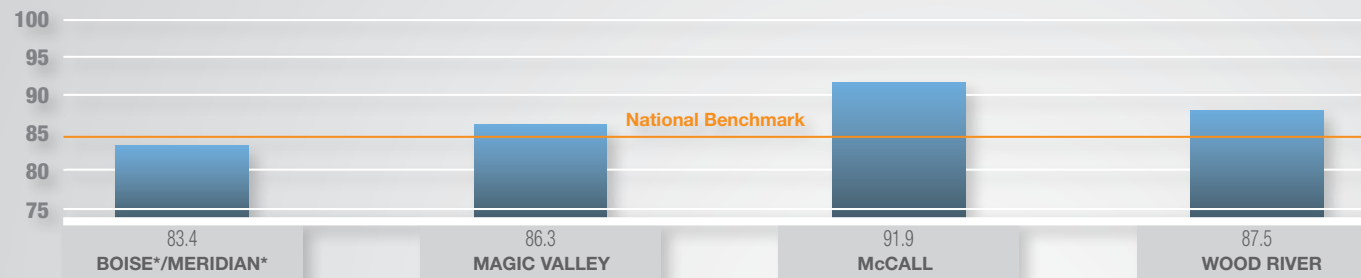


Emergency Departments

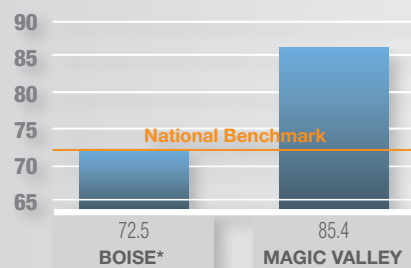


NOTES: Data as of 4/22/2021 for discharges/visits from 1/1/2020 to 12/31/2020. Scores above the national benchmark for HCAHPS indicate the SLHS hospital is performing better than the national average for reporting hospitals.
* Five-time Magnet-designated locations

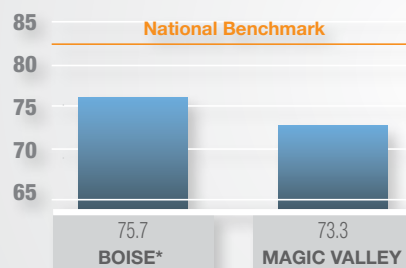
Home Care



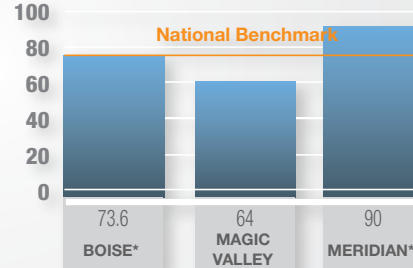
Inpatient Rehabilitation Units



Inpatient Pediatric Units



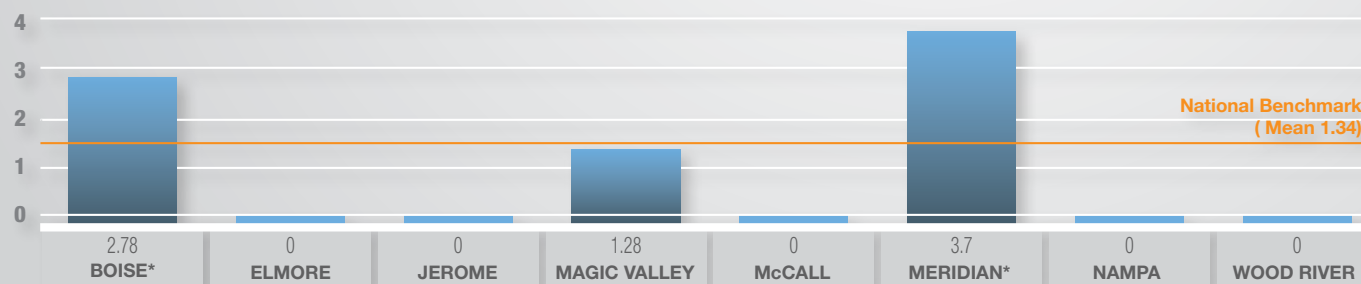
Neonatal Intensive Care Units



NOTE: Scores above the national benchmark for HCAHPS indicate the SLHS hospital is performing better than the national average for reporting hospitals.

Nursing Sensitive Clinical Indicators — CY2020

Hospital Acquired Pressure Injury (HAPI) Stage 2 and Above**

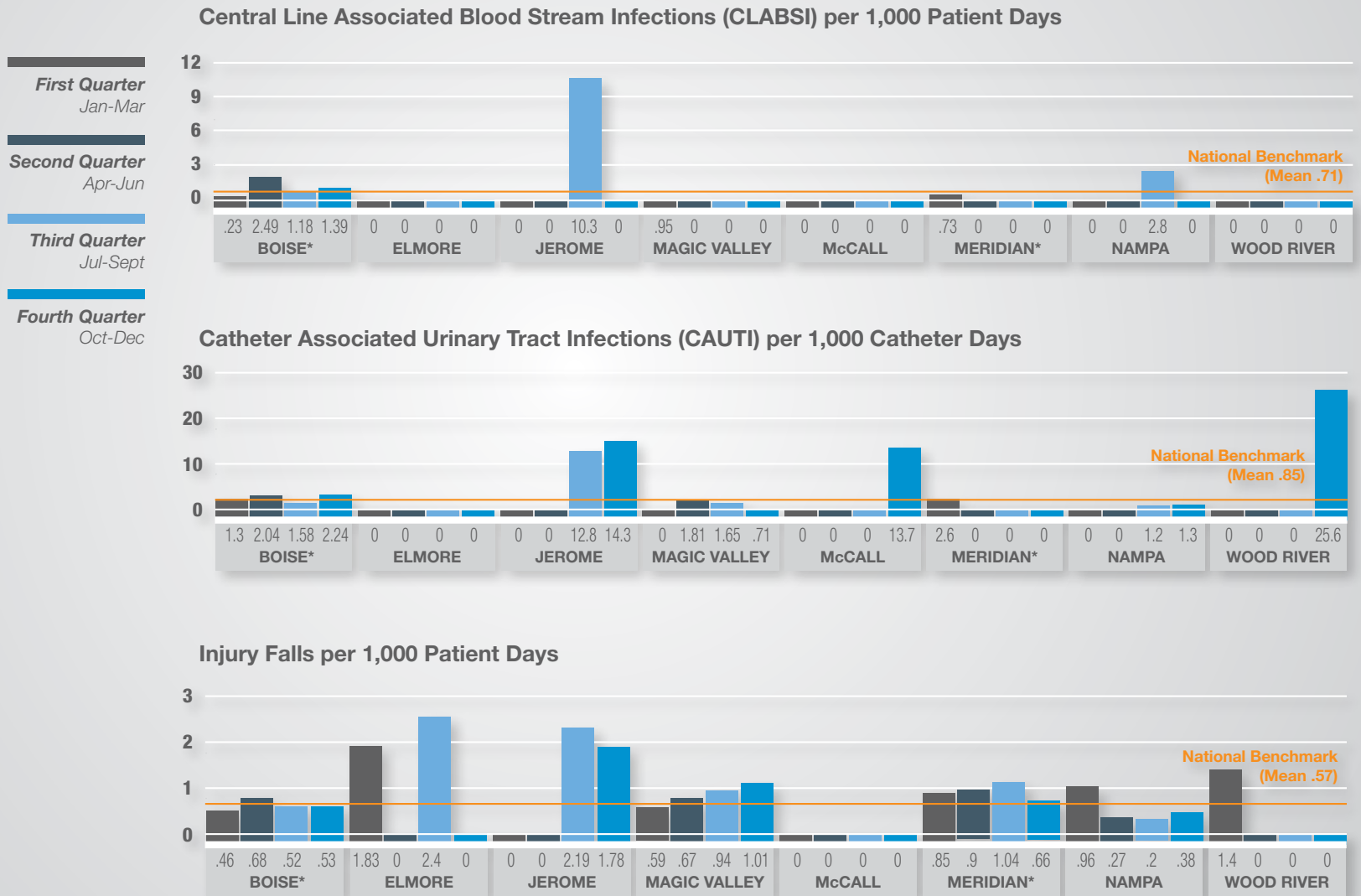


NOTE: Scores below the national benchmark for HAPI indicate the SLHS hospital is performing better than the national average for reporting hospitals.

* Five-time Magnet-designated locations

** Due to the COVID-19 pandemic, HAPI surveys were not conducted April-December 2020.

Empirical Outcomes



NOTE: Scores below the national benchmark for CLABSI, CAUTI, and Injury Falls indicate the SLHS hospital is performing better than the national average for reporting hospitals.
 * Five-time Magnet-designated locations

Outstanding Achievements

Nursing Excellence and Recognition

Nursing Research and Evidence-Based Practice Fellowship

For the first time, in 2020-21 all Nursing Research and Evidence-Based Practice (EBP) fellows and senior fellows chose to conduct human subjects research instead of evidence-based practice projects.

Nursing Research and EBP Fellows

Mallory Campbell BSN, RN, mentored by Marty Downey, PhD, RN, AHN-BC, CHTP/I

Increasing Chlorhexidine Compliance in the Bone Marrow Transplant and Medical Oncology Inpatient Population

Megyn Flood BSN, RN, RNC-NIC, mentored by Hillary Swann-Thomsen, PhD, and Kelly Graff, MSN, APRN-CNS, ACCNS-P

Staff and Parent Understanding of Hand Hygiene Practices in the NICU

Megan Nelson MSN, RN, RNC-OB, mentored by Jane Grassley, PhD, RN, IBCLC

Prenatal Oral Health Screening: Assessing Implementation

Anna Quon MBA HM, BSN, RN, RN-BC; Kimberli Munn MSN RN; and Wendy Vanderburgh BSN, RN, NREMT-P, FP-C ED, mentored by Andi Foley, DNP, RN, APRN-CNS, FAEN, EMT

Nurse Consensus on Most Effective and Accessible Support Strategies During COVID 19: A Delphi Study

Nursing Research and EBP Senior Fellows

Kayla Raney, BSN, RN, RN-BC, and Kim Popa, BSN, RN, mentored by Cara Gallegos, PhD, RN

Stress, Experiences, and Unmet Needs of Parent(s) Whose Child Has Attempted Suicide

Amy Stukenholtz, BSN, RN, and Michelle Hancock, BSN, RN, mentored by Susan Tavernier, PhD, APRN-CNS, AOCN

Caregiver Perceived Barriers to Notifying Oncologist at Onset of Fever Greater Than 101° F Among On-Treatment Pediatric Oncology Patients

2020 Publications

Kofi Bonnie, DNP, MSc, RPN, RN

Garrod, E., Jenkins, E., Currie, L. M., McGuinness, L., & Bonnie, K. (2020). Leveraging nurses to improve care for patients with concurrent disorders in inpatient mental health settings: A scoping review. Journal of Dual Diagnosis, 16(3), 357-372. doi: 10.1080/15504263.2020.1752963

Julie Carr, MSN, RN; Katherine Callanan, PT, MS, GCS, CEEAA; and Julie Swanson, DNP, RN, NEA-BC

Carr, J., Callanan, K. & Swanson, J. (2020). Staying active after stroke: A customizable community resource guide for stroke survivors. Geri Notes, 27(4), 8-13.

Amanda Erickson, BSN, RNC-MNN

Erickson, A. (2020) Spark joy. RN Idaho, 43(1), 14.

Julya Miner DNP, RN, RNC-OB, C-EFM, CPHQ, NEA-BC

Miner, J. (2020). Implementing e-learning to enhance the management of postpartum hemorrhage. Nursing for Women's Health, 24(6), 421-430. doi: 10.1016/j.nwh.2020.03.010

Miner, J. (2020). The hedgehog project: Inviting front-line teams into performance improvement through a focused 90-day strategy. RN Idaho, 43(2), 12.

Contributing author for Prevention of Newborn Falls/Drops in the Hospital: AWHONN Practice Brief Number 9 published in the following:

- AWHONN (2020). Prevention of newborn falls/drops in the hospital: AWHONN Practice Brief Number 9. *Journal of Obstetric, Gynecologic, & Neonatal Nursing* 49(5), 500-501. doi: 10.1016/j.jogn.2020.06.004
- AWHONN (2020). Prevention of newborn falls/drops in the hospital: AWHONN Practice Brief Number 9. *Nursing for Women's Health* 24(5), 383-385. doi: 10.1016/j.nwh.2020.06.003

2020 Presentations

Andi Foley, DNP, RN, APRN-CNS, ACCNS-AG, CEN, TCRN, FAEN, EMT

Tips for seeing your work in print [virtual podium]. Presentation at Emergency Nurses 2020 national virtual conference. September-December 2020.

Jessica Garner MSN, RN-BC, ACNS-BS, APRN

Implementing changes to SQ insulin dispensing/administration: Sticking to safe practice and minding the big bucks. NACNS 2020 Annual Conference, March 10-13, 2020, Indianapolis, IN.

Kara Garner, MSN, APRN-CNP, DNP-c

Identification and mitigation of transition shock in new graduate nurses. Presentation at Nurse Leaders of Idaho and American Nurses Association of Idaho LEAP Conference, November 9, 2020, Boise, ID.

Michelle Hamland, DNP, RN, and Kimberly Khoury-Dillon, DNP, RN, CPHIMS, RN-BC

Surviving change: A nursing informatics perspective. Presentation at Nurse Leaders of Idaho and American Nurses Association of Idaho LEAP Conference, November 9, 2020, Boise, ID.

Julya Miner, DNP, RN, RNC-OB, C-EFM, CPHQ, NEA-BC

Perinatal innovations to reduce maternal morbidity and mortality. Keynote podium presentation at the 2020 Idaho Perinatal Project Winter Conference, February 20, 2020, Boise, ID.

OB hemorrhage update. Symposium speaker at the St. Luke's Critical Access Hospital Perinatal Teleconference, March 2020, Boise, ID.

Rock-a-bye baby: newborn fall/drop prevention and response. Webinar presentation for Washington Hospital Associate Webinar Series, May 12, 2020, Seattle, WA.

Brie Sandow, MSN, RN, NEA-BC, and Joan Agee, DNP, RN, FACHE

The relevance of a professional association to nurses. Presentation at Nurse Leaders of Idaho and American Nurses Association of Idaho LEAP Conference, November 9-10, 2020, Boise, ID.

Teresa Stanfill, DNP, RN, NEA-BC, RNC-OB

Leaders, are your curves in the right places? Presentation at Creative Health Care Management (CHCM) Journey to Excellence National Virtual Conference, September 23-24, 2020.

Teresa Stanfill, DNP, RN, NEA-BC, RNC-OB, and Diana Meyer, DNP, RN, NEA-BC, FAEN

Collaboration to improve hiring: An innovative partnership. Presentation at Creative Health Care Management (CHCM) Journey to Excellence National Virtual Conference, September 23-24, 2020.

Year of VUCA: A leadership case study. Presentation at Creative Health Care Management (CHCM) Journey to

Excellence National Virtual Conference, September 23-24, 2020.

Julie Swanson, DNP, RN, NEA-BC

Implementing the Braden QD scale to reduce pressure injuries in the pediatric patient. Presentation at Nurse Leaders of Idaho and American Nurses Association of Idaho LEAP Conference, November 9, 2020, Boise, ID.

Julie Swanson, DNP, RN, NEA-BC, and Claire Beck, DNP, RN, RNC-OB, NPD-BC

Strategies for surviving graduate school: Community of DNP students. Presentation at Nurse Leaders of Idaho and American Nurses Association of Idaho LEAP Conference, November 9, 2020, Boise, ID.

Anna Quon, MBA HM, BSN, RN, RN-BC, and Heidi Hamlin, BSN, RN

Occupational health nursing and the innovative response to the COVID-19 pandemic. Presentation at Nurse Leaders of Idaho and American Nurses Association of Idaho LEAP Conference, November 9, 2020, Boise, ID.

2020 Awards and Congratulations

Andi Foley, DNP, RN, APRN-CNS, ACCNS-AG, CEN, TCRN, FAEN, EMT, was inducted as Fellow into Academy of Emergency Nursing and was elected for a two-year term as Board member-at-large for Academy of Emergency Nursing.

Jessica Garner, MSN, RN-BC, ACNS-BS, APRN, was appointed Vice Chair to Idaho Board of Nursing APRN Advisory Council.

Aimee Hardt, MN, APRN-CNS, ACCNS-N, was appointed to the ACCNS Virtual Item Review Panel-Neonatal American Association of Critical Care Nurses.

Dori A. Healey, MSN-RN, MBA-HA, CPPS, was appointed to the Political Action Committee for the American Nurses Association and highlighted as a national leader in the American Nurse Journal.

Anna Quon, MBA HM, BSN, RN, RN-BC, was appointed to Idaho's Northwest Nazarene University Nursing Advisory Council and appointed to the Ambulatory Nursing Content Expert Panel for the American Nurses Credentialing Center (ANCC).

Teresa Stanfill, DNP, RN, NEA-BC, RNC-OB, was selected as a 2020 Tribute to Women and Industry (TWIN) Honoree by the Women's and Children's Alliance (WCA).

2020 Registered Nurse Scholarship and Conference Funds Recipients

Bledsoe Scholarship

Jessica Bartlett

Cristler Memorial Endowment

Jamie Wilcox
Stephanie York

Healthcare Education Endowment

Kortnie McKay

Leadership Scholarship

Karl Linzmeyer
Rhe Perdue

Magic Valley & Jerome Nursing Scholarship

Burhan Tahiri

Nursing Scholarship

Jill Boatman
Brittany Daylong
Debbie Ketchum

Return to Learn Scholarship

Jake Barfuss
Laura Fry
Alison Thibault

Rural Connections Scholarship

Piper Andrews
Lucas Donaldson
Lexi McClaghry

Sodexo Scholarship

Madelaine Ryan

Wright Scholarship

Jake Jarvie
Justin Seashore

St. Luke's Foundation Nursing Funds (Brown Funds, Nursing Education, Sharon Lee)

Rick Bassett
Robyn Beall
Steve Curtis
Andi Esslinger
Tenisha Gallegos
Kelly Graff
Jennifer Graham
Jen Longcor
Diana Meyer
Teresa Soderling
Teresa Stanfill
Ruth Tretter

2020 DAISY Award Recipients

The DAISY Award is an international program that rewards and celebrates the extraordinary clinical skill and compassionate care given by nurses every day.

Nicole Gardner, RN – Boise Medical Intensive Care Unit

Cory Hoover, RN – Nampa Medical/Surgical

Brittany Linn, NP – Nampa Clinics

Megan Marks, RN – Clinical Support Unit

Jeff Safley, RN – Air St. Luke's

Penny Schwartz, RN – Boise POHA

Amanda Torres, RN – Nampa Women's Services

DAISY Lifetime Achievement Award

The DAISY Lifetime Achievement Award was created to recognize those nurses who, over their careers, have promoted the positive image of the nursing profession.

Cy Gearhard, MSN, RN, NEA-BC

2020 Sunshine Award Recipient

The Sunshine Award was created by St. Luke's to recognize clinical excellence by a non-nursing colleague and is a companion program to the DAISY Awards.

Yesenia Espinoza, CNA – Nampa Telemetry



*St. Luke's gave a DAISY Lifetime Achievement Award to **Cy Gearhard**, MSN, RN, NEA-BC, prior to her retirement in January 2021.*

2020 System Nursing Excellence Awards Winners



Exemplary Professional Practice – Community

Erika Monjaras, BSN, RN,
RNC-MNN, Wood River
Multi-Specialty Clinic



Exemplary Professional Practice – APRN

Alli Vander Lugt, NP,
Meridian Home Care



Exemplary Professional Practice – Hospital

Jenny Hopkins, BSN,
RN, CCRN-K, Magic Valley
Clinical Support Unit



Exemplary Professional Practice – Hospital

Beth Owen, BSN, RN,
CCRN, Boise Surgical
Intensive Care Unit



Structural Empowerment

Diane Shelton, MSN, RN,
CCRN, CMC, Boise Medical
Intensive Care Unit

RN Group Recognition

*SLHS Obstetrical
(OB) Hemorrhage
Improvement Team*



Claire Beck, DNP, RN,
RNC-OB, NPD-BC



Jenny Boone, DNP, RN



Carol Forsberg, BSN,
MBA, RN



Wendy Gordon, MSN, RN,
RNC-OB C-EFM



Alicia Gorringer, BSN, MHI,
RN, CHSE



**New Knowledge,
Innovations &
Improvements**

Blair Eby, BSN, RN
Meridian Emergency
Department



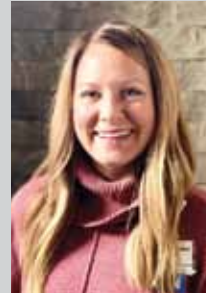
**Dana Gulbranson
Distinguished Nurse**

Alicia Young, MSN, MBA,
RN, System Ambulatory
Chief Nursing Officer



**Transformational
Leadership –
New Leader**

Kristy Schmidt, MSN, RN,
NEA-BC, System Director,
Care Experience Center of
Excellence Clinic



**Transformational Leadership –
Experienced Leader**

Tera Eskelsen, BSN, RN, CMSRN,
NE-BC, Meridian Director, Medical/
Surgical 5th & 6th Floors and Meridian
Administrative Supervisors Clinic



Sherry Mayson, BSN, RN,
OBC-RN, C-EFM



Jula Miner, DNP, RN,
RNC-OB, C-EFM, CPHQ,
NEA-BC



Megan Nelson, MSN, RN,
RNC-OB



Shandra Padron, MSN,
RN, RNC-OB C-EFM



Carrie Lamb, DNP, APRN-
CNS, RNC-OB, ACNS-BC



Cy Gearhard, MSN, RN, NEA-BC, retired in January 2021 after 38 years with SLHS. She is a recipient of a DAISY Lifetime Achievement Award.

A Fond Farewell: Words of Thanks and Gratitude from Cy Gearhard

After a 38-year nursing career with St. Luke's Health System, I am retiring. It is hard to believe in some respects, as time goes so quickly; however, it is time to start a new journey in my life and it is time for St. Luke's to embrace new nursing leadership who will bring innovative perspectives—a requirement in an ever-changing health care environment. I could not be more honored to reflect on my career for my last Nursing Annual Report as your system chief nursing officer.

I still remember my first position as a graduate nurse at St. Luke's Boise Medical Center. At that time, in 1979, St. Luke's was only one facility. I was so excited to start my career and quickly immersed myself in an environment in which I thrived. I was in awe of the talent around me and continue to this day to give thanks to the many experienced nurses, physicians and interdisciplinary team members who were my mentors. My passion for nursing was validated as I started practicing on 4 South.

After several years, I stepped away to complete my master's degree in nursing, then returned to St. Luke's in a position as one (of two) clinical specialists. This position gave me a broader appreciation of the importance of standardizing care practices to achieve the best patient care outcomes. Standardization of care practices and reduction of irrational variation was the core of much of my interdisciplinary work going forward in leadership: as the director of the Coronary Care Unit, to the administrator of St. Luke's Heart Services, to transitioning to various chief nursing officer roles during the growth of St. Luke's at the local, regional and system level.

I have been blessed to be a part of many teams that have developed successful programs for our patients over the years. I am most proud of the work and effort by each of our nurses and team members who continually touch, heal and comfort our patients every day. That is the sacred work that is our lifeblood. The passion for patient care that I experienced as a new graduate nurse has stayed with me throughout my years as a bedside nurse and nursing leader. Yes, there have been many highs, such as being awarded our recent fifth Magnet designation, and many challenges, such as caring for our patients through the COVID-19 pandemic. However, the courage of our nurses and clinical teams through all challenges has made me realize over and over how special it is to work for St. Luke's. The future of St. Luke's will always be bright because of the people.

Thank you for the honor of serving you. Continue to focus on providing the highest level of care to our patients and we will not steer off course of our true north. You are and will always be my heroes.

With appreciation and gratitude,

Letter From President & CEO

I don't think any of us expected the 2020 that unfolded, and I don't think any of us expected to lead and serve through a pandemic. More likely than not, it was one of our more challenging years, personally and professionally.

As nurses at the forefront of the novel coronavirus pandemic, you faced many unknowns. You set aside many of your own concerns, every day, to support our patients and communities. On behalf of our patients, their families and our communities, thank you for your heroic work, dedication and commitment.

We may not have celebrated as planned due to the COVID-19 pandemic, but 2020 was the World Health Organization's International Year of the Nurse and the Midwife. It was a year during which nurses worldwide stepped up, joined together and led a battle against a frightening new public health foe. While staring down the pandemic, you innovated, adapted and acted with heart, exhibiting what it means to truly care for a community.

And you continue to fight. Each of you has shown courage, fortitude and strength in caring for others. You have demonstrated compassion and excellence, and you have shown the signature qualities of nursing at St. Luke's.

As we continue to move through 2021, I know that you will continue to answer the call, showing up with determination, resilience and an unwavering focus on the best patient care possible. You will continue to serve and to showcase the passion and talents that called you to nursing from the beginning.

You have been there through the toughest of days, and your strength helps to keep us all going. Thank you for all that you do.

Sincerely,

A handwritten signature in black ink, appearing to read "Chris Roth". The signature is fluid and stylized, with a large, sweeping "C" and "R".

Chris Roth
President and CEO, St. Luke's Health System





Jean Richardson, BSN, RN, crisis nurse in the Treasure Valley Clinical Support Unit, won the Magnet Moment Minute to Win It video contest. The Nursing and Patient Care Center of Excellence opened the competition in the spring of 2020 to all staff. The goal for participants was to produce a short video that featured a Magnet message. Richardson submitted an outstanding video of her singing her own original lyrics to the tune of Dolly Parton's classic song "9 to 5," but showcased the Magnet "Drive for Five" theme. Richardson will receive a conference registration to the November 2021 Magnet conference in Atlanta, Georgia.