



# LEADING TOGETHER

2017 NURSING ANNUAL REPORT



11,000+  
People.

30+  
Locations.

One  
Purpose.

With patient care, research and education as our foundation, UC Health is at the forefront of medicine. We are conducting groundbreaking research that can lead to new treatments and cures. We are training the next generation of physicians and medical professionals. And we are pioneering new ways to deliver highly specialized, complex subspecialty care that would not otherwise be available to many patients. Leveraging the power of knowledge and our drive for discovery, we can make a lasting impact on our community, our region and our world.

#### OUR VISION:

To use the power of academic medicine to advance the science of discovery and transform the delivery of care.

#### OUR CORE 4 STRATEGIES:

- Growth & Access — Lead in the care of distinct populations.
- Performance & Culture — Deliver better, safer and smarter care.
- Research & Education — Partner with the University of Cincinnati to advance research, training and education.
- Community Health — Improve the physical and economic health of our community.

#### OUR LOCATIONS:

- University of Cincinnati Medical Center
- West Chester Hospital
- Daniel Drake Center for Post-Acute Care
- Bridgeway Pointe
- Lindner Center of HOPE
- 30+ outpatient service locations in three states

#### OUR REACH\*:

- More than 1.8 million patient encounters
- 71,918 cardiovascular cases
- 68,560 cancer cases
- 195 organ transplants

#### OUR RESEARCH AND EDUCATION:

- 189 nurses completed American Association of Colleges of Nursing Nurse Residency
- 30 University of Cincinnati College of Nursing students participated in our Co-Op Program
- 1,242 nursing students completed clinical rotations at UC Health sites

\*Data reflective of Fiscal Year 2017

Dear Colleagues and Friends,

On behalf of UC Health, I am proud to present the 2017 Nursing Annual Report.

Our more than 2,600 nurses are the heart and soul of our academic health system. They are stewards of hope who help carry forward our mission and vision.

This report shares stories of their eagerness to lead, innovate and collaborate on behalf of UC Health.

At the foundation of our nurses' tireless work is a true commitment to our patients and their families.

Their compassion and dedication elevate our shared promise to deliver patient-centered healthcare.

Please join me in celebrating our nurses' achievements in 2017 and beyond.

Sincerely,



Richard P. Lofgren, MD  
President & CEO



In 2017, nurses demonstrated their continued commitment to furthering UC Health's purpose to advance healing and reduce suffering.

In this report, you will read about nurses who went the extra mile to improve the delivery of care, grow their expertise in complex and specialized medical areas, and make lasting connections with patients and families. You will also read about nurses working together and with other clinicians toward continual improvement.

Our nurses are also invested in professional development, seeking certifications and completing Clinical Ladder programs, demonstrating their drive for lifelong learning.

We are proud of our nurses, whose daily interactions with patients and families are the backbone of their experiences with UC Health.

To all of our nurses: Thank you for your hard work and dedication.

Beverly Bokovitz, DNP, RN  
Chief Nursing Officer, UC Medical Center

Kathie Hayes, MSN, RN  
Chief Nursing Officer, West Chester Hospital

John Hill, MBA, BSN, RN  
Director of Nursing, Daniel Drake Center for Post-Acute Care

Marilyn Schwemberger, MBA, MSN, RN  
Chief Nursing Officer, Lindner Center of HOPE

Julie Stark, MSN, RN  
Assistant Ambulatory Nursing Officer, UC Health





# UC HEALTH NURSING BY THE NUMBERS

Nurses are the single largest professional group at UC Health, representing almost a quarter of the clinical and non-clinical workforce across the healthcare system. Every patient treated at UC Health will interact with at least one nurse or team of nurses, who are focused upon prioritizing patients’ needs and providing superior, compassionate care.

Total RNs system-wide:

2,660

Total Staff RN:

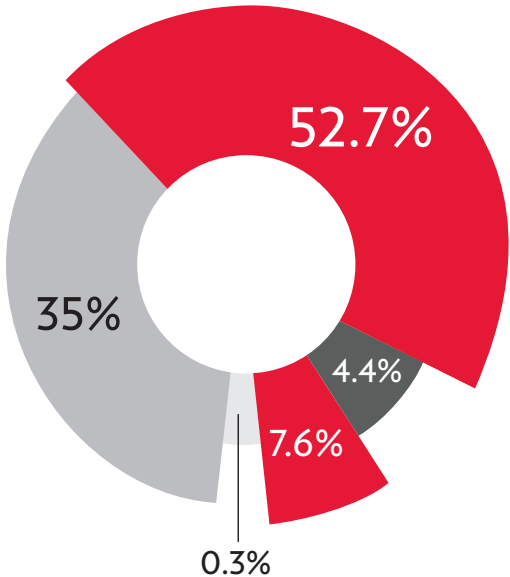
2,561

Total Advanced Practice RNs:

10

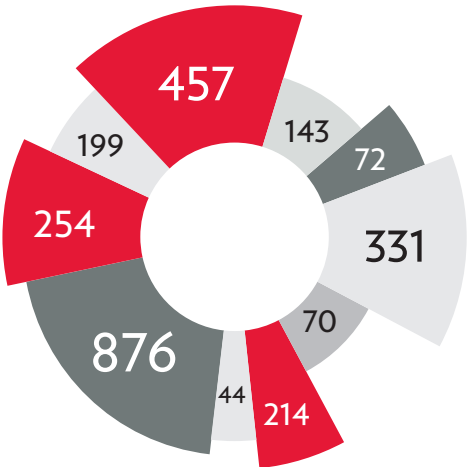
Total Nurse Leaders:

89



## Education\*

- Diploma of Nursing  
4.4 %
- Associate Degree in Nursing  
35 %
- Bachelor of Science in Nursing  
52.7 %
- Master of Science in Nursing  
7.6 %
- Doctor of Nursing Practice/  
Doctor of Philosophy in Nursing  
0.3 %



## Experience

- |                         |                         |
|-------------------------|-------------------------|
| 0-6 months: <b>254</b>  | 11-15 years: <b>214</b> |
| 7-12 months: <b>199</b> | 16-20 years: <b>143</b> |
| 1-3 years: <b>876</b>   | 21-25 years: <b>44</b>  |
| 4-5 years: <b>331</b>   | 26-30 years: <b>72</b>  |
| 6-10 years: <b>457</b>  | 30+ years: <b>70</b>    |

## Clinical Ladder

Nurses pursuing professional advancement

253

## Nationally certified RNs\*

462

*\*Figures only reflect hospital-based nurses*



“Be the change that you want to see.”

# STRENGTH THROUGH COLLABORATION

Nurses from Across UC Health Gather For Annual Conference

Nurses play a critical role on a care team, monitoring patients’ health and response to treatment, interpreting data and making recommendations for the best course of action.

These same skills also make nurses vital to transforming UC Health, leaders said at the fifth annual UC Health Nursing Retreat. The event brought together more than 150 nurses from across the system to hear from UC Health leaders, gain continuing education credit and participate in research poster presentations.

“Nurses are experts in bringing teams together and leading teams,” said Anya Sanchez, MD, vice president of multidisciplinary services and chief transformation officer for UC Health. “Our organization’s transformation journey will only succeed if we come together as a team.”

The theme of the retreat, held at the Daniel Drake Center for Post-Acute Care in fall 2017, was “Strength Through Collaboration.”

“You are valued and appreciated, and the work that you do is vital to our patients and to our organization,” said Pete Gilbert, executive vice president & chief operating officer for UC Health.

“Transforming a culture is hard work, and it takes all of us working together.”

As the UC Health transformation journey enters its second year, Gilbert said it will be frontline staff—not executives—who will truly drive change across the organization.

Nurses don’t wait for someone to tell them to change an IV, and they shouldn’t wait to lead the way forward, said Ruby Crawford-Hemphill, assistant chief nursing officer at UC Medical Center.

“Be the change that you want to see,” she said. “We can’t wait for other people to change for us—we need to change for ourselves. Be proud to be a nurse, because we drive the change that the system wants to see.”

The conference was a collaborative effort by nursing leadership across UC Health, including clinical educators, nursing officers and program coordinators.



# GETTING GOLD

## West Chester Hospital Achieves Magnet Status

In 2017, West Chester Hospital achieved Magnet® status, the nation's highest honor for nursing excellence. The recognition is bestowed by the American Nurses Credentialing Center and includes a rigorous certification process.

West Chester Hospital, which is in its ninth year of operation, is among just 30 Ohio hospitals to achieve Magnet status.

"Magnet recognition provides our community with the ultimate benchmark to measure the quality of patient care," said Tom Daskalakis, chief administrative officer for West Chester Hospital. "Achieving Magnet status reinforces the culture of excellence that is a cornerstone of how we serve our community. It's also tangible evidence of our nurses' commitment to providing the very best care to our patients."

Hospitals that achieve this gold-standard designation are considered worldwide leaders in nursing practices and strategies. Magnet status validates the superior practices, professionalism and teamwork, and dedication to prioritizing patient care provided by West Chester Hospital.

Magnet recognition is also proven to benefit healthcare organizations and their communities in several ways, including higher patient satisfaction and higher job satisfaction among nurses.



Collective staff participation is critical to meeting the program's lengthy and rigorous process, which includes patient care documentation and an onsite visit from the Commission on Magnet Recognition.

Recognized organizations also must follow the Magnet Model, a system that uses empirical outcomes as a measurement for excellence. This model demands leadership advocacy, staff empowerment, exemplary care and innovation.

West Chester Hospital opened in 2009, equipped with the latest medical technology and drawing from the University of Cincinnati's tradition of academic research. One of the region's fastest-growing hospitals, it has received the Healthgrades Outstanding Patient Experience Award for seven consecutive years, placing it among the top 5 percent in the nation for patient satisfaction.



## FIVE CHARACTERISTICS OF THE MAGNET MODEL



TRANSFORMATIONAL LEADERSHIP



STRUCTURAL EMPOWERMENT



EXEMPLARY PROFESSIONAL PRACTICE



NEW KNOWLEDGE, INNOVATIONS & IMPROVEMENTS



EMPIRICAL OUTCOMES





## STRIVING FOR PROGRESS

### Nurses Lead through Positive Quality Improvement Outcomes

UC Health nurses continually work to improve the safety and quality of the healthcare they deliver by initiating quality improvement programs. These projects have yielded marked improvements that show the expertise, collaboration and professionalism of UC Health nurses is successfully changing outcomes for the better.

#### Bed Rental Reduction Program

Nurses at UC Medical Center were able to save more than \$600,000 in 2017 when they initiated a program to reduce the number of hospital beds rented from an outside company, the delivery of which can take up to four hours. The group leading the initiative purchased 33 beds and developed an algorithm for in-house bed requests. “Nurses were excited at the opportunity to have necessary bed options readily available for better patient care,” said Mary Beth Ludwig, BSN, RN, past president of the hospital’s Professional Practice Organization.

**\$600,000**  
Money saved

#### Hospital-Acquired Pressure Injury Prevention

Through standardization, ongoing education and review, and the appointment of unit experts, UC Medical Center nurses have successfully lowered the incidence of hospital-acquired pressure injuries stage 2 and greater by 29.69 percent in two years\*. The marked improvement earned a “Top Performer” title from Vizient, exceeding a targeted goal of 20 percent improvement during this same period.

**29.69%**  
Pressure injury reduction

#### Fall Reduction Program

A pilot program in UC Medical Center’s medical-surgical unit that nurses and patient care assistants launched in the summer has already dramatically reduced patient fall rates. Clinicians lowered the patient-per-thousand ratio by 44.9 percent in less than a year through proactive toileting and weekly fall reviews between a Fall Committee and the unit’s nursing leaders.

**44.9%**  
Fall reduction

\*Data from the Vizient Clinical Data Base/Resource Manager™ used by permission of Vizient. All rights reserved.



## BRAIN POWER

Nurses Play Integral Role in West Chester’s  
Advancing Neurology Services

#### EPILEPSY MONITORING UNIT OPENS

Patients who experience life-altering seizures or other neurological events can now receive answers at West Chester Hospital’s new Epilepsy Monitoring Unit.

The inpatient unit uses continuous video monitoring and electroencephalogram (EEG) over a four-day stay to evaluate a patient’s brain activity, and identify and ultimately treat the underlying condition.

“This is something that is affecting peoples’ lives sometimes every day, so it’s definitely a big need for the community,” said Karen Daniel, RN, clinical manager of the Intensive Care Unit at West Chester Hospital.

Because clinicians need to analyze EEG waves during an epileptic episode, nurses work closely with patients to trigger a seizure in a safe and controlled environment.

The unit helps patients identify whether their seizures are the result of epilepsy or another condition.

Regardless of the diagnosis, nurses exhibit empathy and cultivate trust with patients, many of whom need emotional support and understanding as they navigate challenging conditions.

“The role of nurses on the Epilepsy Monitoring Unit is partly to help patients feel encouraged and validated,” said Kate Welling, RN, a charge nurse who works on the EMU.

#### WEST CHESTER ACHIEVES STROKE CERTIFICATION

The Joint Commission now recognizes West Chester Hospital as a Primary Stroke Center, a designation that includes the entity’s Gold Seal of Approval® for Advanced Certification for Primary Stroke Centers.

The distinction resulted from a rigorous on-site visit in the fall that measured the organization against more than 100 standards for stroke care.

“I think being able to establish ourselves as a Primary Stroke Center really gives patients in our community confidence that we exceed minimum standards in treating and caring for stroke patients,” said Courtney Smith, BSN, RN, West Chester Hospital stroke coordinator. “This lets them see that we have a reliable and recognized program.”

Nurses play a critical role in the recovery of stroke patients by providing rapid, around-the-clock care, through frequent neurological assessments and by closely monitoring patients’ conditions. Nurses on the Core Stroke Staff must complete eight hours of stroke education every year to maintain these highly specialized skills.

“In the middle of it all, we’re the eyes and ears of the patients, and we communicate with everyone else on the team to make sure that patients get the care they need,” Smith said.

“The role of nurses on the Epilepsy Monitoring Unit is partly to help patients feel encouraged and validated.”



# ON THE MEND

## Daniel Drake Center Expands Skilled Nursing Facility

The Daniel Drake Center for Post-Acute Care expanded its Skilled Nursing Facility in 2017 by 36 percent, from 60 to 82 beds, in 2017 to better serve the region's need for rehabilitative care.

The expansion occurred on the second floor of the Daniel Drake Center, when 20 long-term residents living there moved into a newly renovated community on the fourth floor.

The Skilled Nursing Facility expansion also included the addition of the center's third and largest therapy gym, complete with specialized equipment targeted for rehabilitation exercises.

With a more than 165-year history, the Daniel Drake Center is home to the only hospital-based Skilled Nursing Facility in Greater Cincinnati. Clinicians care for acutely ill or injured patients, specializing in orthopaedic surgery recovery, neurological impairment, heart failure treatment, cardiac and vascular surgery, major fracture treatment and therapy.

Skilled nursing care at the Daniel Drake Center provides an important step to long-term recovery for patients who no longer need to be hospitalized for their initial injury or illness.

"Once they're stabilized at the hospital, they need to rehabilitate before they are ready to go back home," said Chelsea Rhodes, senior physical therapist and Skilled Nursing Facility team lead.

The Skilled Nursing Facility expansion further meets the needs of patients in the area who can begin rehabilitation but still need long-term hospitalized care, especially because of highly specialized medical needs.

Nurses who work on the unit must undergo training to ensure they are proficient in skilled services that address a higher level of care.

"Because of this expansion, we will be able to take patients with a higher level of acuity, and we will be the facility that accepts patients that no one else feels competent to handle," said Melanie Croucher, RN, who works on the Skilled Nursing Facility.

The Daniel Drake Center's Skilled Nursing Facility capacity expanded by 36 percent.

“Because of this expansion, we will be able to take patients with a higher level of acuity, and we will be the facility that accepts patients that no one else feels competent to handle.”



# THE GIFT OF LIFE

## UC Medical Center Celebrates 50 Years of Transplant

For patients, receiving a transplanted organ is no small undertaking. Daily medications and frequent medical evaluations ensure the new organ is functioning as it should and that the recipient remains in good health.

For clinicians, the task to support and educate patients can prove almost as stringent—and it's equally crucial to lifelong success. Just as necessary, too, is clinicians' emotional support to the patients and their families throughout the long journey.

Susan Duncan, RN, is on the frontlines ensuring all these pieces come together, advocating for patients' wellbeing and determined to make a difference in their lives.

As a UC Health heart transplant coordinator, Duncan follows patients through every stage of the process. She educates them as they receive initial testing, and she's right there with them as they wait for a new organ to become available. After the transplantation surgery, she helps coordinate follow-up evaluations and maintains relationships.

"We do kind of marry them in a sense and become family with them because we follow them for the rest of their lives," Duncan said.



This long-lasting care requires transplant nurses to become experts in their field.

Before becoming heart transplant coordinator, Duncan was clinical manager of the Advanced Heart Failure and Transplant Treatment Center where she oversaw the merging of five cardiac subspecialties into one clinic. She has served as a nurse in almost every aspect of cardiac care—including open heart surgery recovery, cardiac rehab and clinical management.

Duncan is just one of several nurses whose highly specialized care and ongoing support make UC Health's transplant program a success. Her story joins a 50-year history of transplantation at UC Medical Center, an anniversary marked in 2017.

The health system's first transplant occurred Dec. 11, 1967, when a Cincinnati police officer received a new kidney through the then-experimental procedure performed by Dr. J. Wesley Alexander.

UC Health's transplantation program has grown tremendously since then, offering heart, kidney, pancreas and liver transplants performed by world-renowned surgeons.

Offering these life-saving surgeries in this region means local patients can stay close to home and be more connected with their families throughout the process.

"If our patients call me and they say, 'You know, I've been having cold spells for the last 24 hours and not feeling quite right,' we can get them in the clinic that same day to see somebody," Duncan said. "They don't have to drive two hours one way just to do that. To be able to provide that service and to be able to do it for the whole region is just a really, really special thing."

**"We do kind of marry them in a sense and become family with them because we follow them for the rest of their lives."**

Like many UC Health nurses, Duncan is committed to continually improving the delivery of care. She is coordinating with a colleague to develop a study to determine the best time to deliver education about post-transplant care to patients and their families. She is also developing a formal transition of care program for young heart transplant recipients as they enter adulthood.

What fuels Duncan's drive is simple—giving people hope for a better life.

"There's no better feeling for the job than being able to call the patient and tell them, 'Today is the beginning of the next chapter of your life,'" she said.

### UC Health Transplant Milestones in 2017:

- 100** kidney transplants performed in one year for the first time
- 8** heart transplants performed
- 105** liver transplants performed





## A WARM WELCOME

### Nurses Initiate ‘Gentle C-Sections’ for Parent-Centered Births

A group of nurses at West Chester Hospital last year initiated a new protocol for the “gentle C-section,” an alternative to the traditional Cesarean section that allows mothers to feel more connected to their birthing experience.

Gentle C-sections promote immediate skin-to-skin contact, given the baby is stable, and allow parents to become participants in the process.

Mothers are given the option to be slightly propped up to view the birth through a clear plastic drape, with a solid drape obscuring the incision site. The baby’s other parent can be given a sterile sleeve that allows him or her to cut the cord in the surgical environment as they would during a vaginal birth.

Once the baby is born, he or she is placed on the mother’s chest after dried and covered with a warm towel. The newborn’s vital signs can be taken during this skin-to-skin time, with a clinician close by for support. Mothers can opt for less sedation following the surgery to remain more alert during this important bonding experience.

Vicki Minnich, MSN, RN, clinical manager for the Labor and Delivery Unit at West Chester Hospital, said nurses started the program in concert with physicians and staff because they wanted to meet the needs of their patient population.

“We have this big effort to promote skin-to-skin for babies and moms, and it definitely enhances bonding,” Minnich said. “Parents love that they feel like they are part of their own delivery.”

Julia Case, BSN, RN, said parents who initially plan for vaginal deliveries appreciate the level of involvement they are given in gentle C-sections.

“I think it provides them their own experience being able to see it for themselves, just as they would have been able to in the vaginal delivery they were hoping for,” she said.

Many of the nurses who work in the Labor and Delivery Unit are mothers themselves, so they can empathize with their patients’ wishes.

“We have the privilege of coming to work every day and helping babies come into the world,” Case said. “When you only get to do it once, you want to have the best experience you can.”

“We have this big effort to promote skin-to-skin for babies and moms, and it definitely enhances bonding.”



## HEALTHY GROWTH

### New Nurse-led Low-Acuity Floor Emphasizes Collaboration

A low-acuity inpatient floor that opened in fall 2017 as part of University of Cincinnati Medical Center provides hospitalized patients in need of continuing medical attention with a collaborative, nurse-led care team.

The unit opened across the street from UC Medical Center—in the UC Health Business Center’s Ridgeway Pavilion—which in 2016 had seen its 5th and 6th floors converted for inpatient psychiatry services. A multidisciplinary team, led by nurse leaders, worked together to transform the 4th floor space for low-acuity patients, increasing the academic health system’s capacity for patients with more medically complex needs.

The 26-bed unit with private rooms primarily receives low-acuity patients from UC Medical Center units working to secure optimal post-hospitalization care.

Nurses are joined by physicians, pharmacists, social workers and other clinicians and staff who all are dedicated solely to patient care on this floor. Twice a week on Mondays and Thursdays, nurse-led interprofessional rounds occur at the bedside with the patient and family.

“Everybody has such high engagement because they have this focused patient population,” said Lexi Wells, RN, clinical manager of the floor.

Patients’ length of stay on the floor can range from three days to six weeks.

“Because our lengths of stay can be longer, the nurses develop relationships with the patients and the families,” Wells said. “You get to know them, you get to understand their plan. You can anticipate their needs and understand their journey.”

The floor provides patients with entertainment and other activities to nurse their emotional, social and psychological needs, too.

“This patient population needs a little bit more of a therapeutic milieu as well as the medicine nursing care piece because of their extended stay,” said Jane Goetz, MSN, RN, director of nursing administration at UC Medical Center.

Nurses are also dedicated to maintaining excellence on the floor in a variety of areas.

Weekly interprofessional huddles “ensure they are building a unit of high-reliability as far as safety, quality and patient experience,” Goetz said.

“Because our lengths of stay can be longer, the nurses develop relationships with the patients and the families.”



# HEALING HEARTS, MINDS AND SOULS

## Lindner Center of HOPE Nurses Herald Unique Roles in Psychiatry

Some nurses at Lindner Center of HOPE, a mental health and addiction treatment facility in Greater Cincinnati, have always felt a calling to psychiatry. Others came upon it by chance.

But all say Lindner Center of HOPE is the perfect fit, allowing them to form personal connections with patients, rejoicing in their progress and success while still caring for their physical needs much like a hospital bedside nurse would.

"I enjoy helping others and helping others help themselves," said Catherine Klein, BSN, RN. "I feel I get to do this in psychiatric nursing. You get to build a professional, caring relationship with the clients because you see them frequently. To hear them talk about being able to go back to work, being able to do their hobbies again or continue with their college classes makes my job the best job there is."

Located in Mason, Ohio, Lindner Center is a state-of-the-art comprehensive mental health center that provides full and partial psychiatric hospitalization, outpatient services and diagnostic and short-term residential services. The center delivers evidence-based practices through a partnership with UC Health to treat the full spectrum of mental health disorders, including mood disorders, eating disorders and substance use disorders.

Nursing at Lindner Center takes on many unique forms, often prompting nurses to seek specialized training or continuing education to become well-versed in psychiatric care.

Kimberly Allen, BSN, RN, serves on an adult inpatient unit, where she collaborates with a multidisciplinary treatment team and responds to patients' needs, which may include medication education, working with family members and de-escalating patients who are experiencing emotional or psychological distress.

The unit operates in a community setting, encouraging patients to leave their rooms and socialize.

"This setting allows for patients to learn from and be supported by many staff members at once, along with their peers," said Allen, who has completed 60 hours of psychiatric-related continuing education.

Sharon Tedesco, BSN, RN, is a staff nurse on the adolescent residential unit. In addition to monitoring patients, Tedesco

completes detailed assessments of new patients and communicates regularly with patients and their families.

"I consider it a great honor when patients trust me enough to share their feelings with me and I appreciate the faith and trust it takes for them to do so," Tedesco said.

As an administrative shift coordinator, Lynn Raver, RN, considers the most important part of her role "making sure the staff and patients have what they need in order to have a safe and successful shift."

Raver responds to needs as they appear, ready to give a patient extra attention or help another with an insulin pump (psychiatric nurses address medical needs every shift also).

Klein works in the Neuromodulation Unit, which administers electroconvulsive therapy and transcranial magnetic stimulation. There, she works one-on-one with patients to focus on their path to recovery.

"I get to go that extra step to know the client, their support system, family and friends," she said.

Despite their widely varying duties, nurses at Lindner Center of HOPE are fueled by one common cause.

"I believe mental health treatment is such a necessity, and good treatment can help alleviate suffering," said Molly Westermeyer, BSN, RN, who also holds a Psychiatric-Mental Health Nursing Certification from the American Nurses Credentialing Center. "Psychiatric nursing is truly a chance to use nursing skills and make a real difference every day in someone's life."

Says Allen, "To have the opportunity to hold space for the deep healing of another is a true blessing to me. You know you are in the right place when you leave feeling energized, versus drained by the end of the day."

## Neuromodulation Offers Innovative Treatment Options

Lindner Center of HOPE combines scientific research and cutting-edge technology in its Neuromodulation Unit, offering highly effective treatments for mental health disorders when other treatments have proven unsuccessful.

Transcranial Magnetic Stimulation Therapy delivers highly concentrated magnetic field pulses targeted to nerve cells in the brain, shown through extensive scientific research to lessen the symptoms of depression or even eliminate it completely. The procedure is non-invasive and does not require anesthesia or sedation.

Lindner Center of HOPE is the area's leading provider of electroconvulsive therapy (ECT), an extremely effective treatment that applies electricity to the scalp, causing changes in brain chemistry. ECT is most commonly given to patients with severe depression, mania or schizophrenia, especially when more traditional methods haven't been effective.

Lindner Center of HOPE is a charter member of the National Network of Depression Centers, a consortium comprised of 25 academic medical centers dedicated to the research, treatment and education of depressions and mood disorders.





## CAPTAINS OF THE SHIP

### Charge Nurse Boot Camp Teaches Leadership Skills

What began as a Clinical Ladder project for a group of nurses on a UC Medical Center inpatient unit has transformed into a system-wide Continuing Education course in just two years.

Beverly Lathan, BSN, RN, helped initiate Charge Nurse Boot Camp after noticing a lack of standardized guidelines and training for charge nurses.

After conducting surveys and literature research, Lathan and Catherine Browning, BSN, RN, launched a pilot course in the acute care surgical inpatient unit to teach charge nurses the skills needed to excel in their roles.

The pilot course was met with success—and that’s when the group decided to widen their reach.

“We knew this was happening on our floor,” Lathan recalled. “We thought, this needs to be a hospital-wide course. We wanted to get everybody on the same page.”

The group partnered with administrators, nurse educators and others to develop curriculum that centers upon eight key skills that charge nurses need to learn with proficiency to manage their responsibilities.

**“Being in an academic health system, that’s just part of our culture—always wanting to learn something new, always wanting to better yourself to handle your position.”**

Within a matter of months, Charge Nurse Boot Camp launched, with courses offered to current and prospective charge nurses. Now, any nurse at UC Health is invited to take the course.

The course, which provides three continuing education credit hours, has now trained about 150 charge nurses.

“Being in an academic health system, that’s just part of our culture—always wanting to learn something new, always wanting to better yourself to handle your position,” Lathan said. “It is also part of nursing culture to be a lifelong learner, to always be developing yourself.”

It’s not just medical skills—like how to manage a central line or care for a chest tube—that charge nurses need to know, Lathan said. Course facilitators teach students important leadership skills, like conflict resolution and effective communication.

“Nurses value this course because it’s part of their equipment, their tools,” Lathan said. “I would value it as much as any bedside tool.”

For Charge Nurse Michael Shannon MSN, RN, the course was a welcome reminder of skills he had learned on the job over the past two years. It also helped fill in some knowledge gaps for processes he leads while on the job.

“I asked to enroll because I wanted to do the job correctly, share what I had figured out and lastly, improve so I could make my unit better,” said Shannon.



Shannon found Charge Nurse Boot Camp “helped establish a clear set of guidelines” for the role.

“The course helped me understand that when I’m in charge, I’m running the shift,” he said. “I am making sure that all patients are properly cared for. I am making sure the other nurses are not getting overwhelmed, getting behind and are effectively caring for their patients. I am doing what I can to make the shift run smoothly.”

**“Bridgeway Pointe is much more than assisted living—it’s a community where residents can peacefully age in place.”**



## CARE OF ALL KINDS

### Bridgeway Pointe Residents Call Nurses Second Family

Suffering from renal failure, 80-year-old Gail Boggs and her family chose UC Health’s Bridgeway Pointe assisted living community as her last home.

Bridgeway Pointe is connected to the Daniel Drake Center for Post-Acute Care, so she was easily able to receive the three-times-a-week dialysis treatments at the Daniel Drake Center without having to go outside.

But after 10 treatments, Gail decided to spend her final days without invasive medical care, and instead surrounded herself by the loving nurses at Bridgeway Pointe, whose mission is to care for residents as if they’re family. Staff members called in hospice care to make her remaining weeks comfortable and meaningful.

“With someone that had the labs that she had and with the shape her kidneys were in, we did not expect her to live past three months—and that was optimistic,” said Melanie Milton, LPN.

So it came as a complete surprise when the 80-year-old lived a fulfilling year and three months, even surviving the loss of her son, daughter-in-law and three friends.

As it turned out, the place she chose for the end of her life may have been the reason it lasted longer than anyone ever expected.

“We believe the comprehensive medical, social and emotional support provided by our nurses, along with Gail’s positive attitude, may have prolonged her life,” Bill Wexler, Bridgeway Pointe executive director, said. “Bridgeway Pointe is much more than assisted living—it’s a community where residents can peacefully age in place.”

Bridgeway Pointe is a 102-apartment building with three neighborhoods designed for minimal assistance, additional assistance or memory care.

Licensed nurses are on site 24 hours a day, with physician services available every week, ensuring residents have access to medical attention at any time.

Bridgeway Pointe offers many amenities, including a courtyard, chapel, library and art room.

“It’s less of a facility feeling and more of a community, where you build those relationships and you bond with people,” Milton said. “A lot of the residents do feel like we are their second family. We don’t see our relationship with residents as a nurse-patient one. It’s much deeper than that.”

As Gail’s primary nurse, Milton saw her several times a day—once every morning to discuss her condition but sometimes for social or emotional needs.

“If it was a nice day and she wanted to go out in the courtyard and she needed someone to push her wheelchair, I would do that,” Milton said.

That’s how all the nurses at Bridgeway Pointe treat every resident.

“It can be hard enough when your life changes as you age,” Milton said. “Why not make life a little simpler by having people around you who care and try to make you feel comfortable and loved and valued?”



# HAVING HEART

## Nurses Raise Money for Stroke, Heart Disease

Every year, tens of thousands of people participate in the American Heart Association (AHA) Heart Mini in downtown Cincinnati, raising funds to combat heart disease and stroke.

For Jessica Cooper, BSN, RN, the cause is personal.

“Without the support and the research from the AHA, my little girl wouldn’t have survived beyond a year,” said Cooper, president of UC Medical Center’s Professional Practice Organization and emergency department nurse.

Five years ago, Cooper gave birth to her daughter, Bella.

“We discovered on the second day of her life that she was born with a heart defect,” Cooper said. Bella was diagnosed with Tetralogy of Fallot, a defect that affects four parts of the heart. At six months old, Cooper’s daughter underwent open heart surgery to repair the abnormality.

The diagnosis catapulted Cooper into a years-long passion project: raising awareness and funding for heart disease treatment and research. Shortly after Bella’s birth, Cooper became a UC Medical Center team captain for the Heart Mini in honor of her daughter.

“Team Bella” has raised more than \$22,000 in support of the AHA and recruited hundreds of team participants.

Cooper isn’t the only UC Health nurse who walks or runs every year in the Heart Mini. Nurses across the health system participate every year, helping raise thousands of dollars for research and education for the American Heart Association.

“I think UC Health encourages employees to go outside of the hospital and be a part of volunteer opportunities that can ultimately advance healing and reduce suffering for our patients,” Cooper said.

“I think UC Health encourages employees to go outside of the hospital and be a part of volunteer opportunities ... ”



## GIVING BACK

Here are other ways UC Health nurses get involved in the community:

- Air Care and Mobile Care nurses partner with area high schools and local EMS before prom night to stage a mock drunk driving accident. Using a wrecked car and a student actor, the Air Care team flies onto the scene to reenact their rescue, care and transport of the student. The demonstration gives students a real-life representation of the consequences of drinking and driving.
- Trauma nurses train community members how to respond in an emergency situation if someone suffers massive bleeding. “Stop the Bleed” is a one- to two-hour course designed to teach the public how to perform CPR and apply dressings and tourniquets in the event of a mass shooting or explosion.
- Surgical Intensive Care Unit nurses volunteer with Habitat for Humanity, helping build houses for those in need.





# AWARDING EXCELLENCE

## NURSE SPOTLIGHT:

### Florence Nightingale Award Winner Travis Doty

A certified clinical transplant coordinator by the American Board for Transplant Certification, Travis Doty works with some of UC Health’s most critically ill patients and serves as their initial point of contact with the liver transplant program, evaluating them for transplantation and managing their care until they are transplanted.

The nature of his work allows him to develop deep and lasting relationships with his patients. The trust he is able to build has helped many through to transplant who struggled to even make it to the waiting list.

Said one of his nominators for the Nightingale Award: “I think my favorite part of Travis is he does not give up on patients and is a believer of second chances; this is a prerequisite of a fabulous liver transplant coordinator.”

Doty marked his 20th year as a nurse at UC Medical Center in 2017, and his sixth as a nurse coordinator for the liver transplant program—a role he describes as “the best job of my life.”



## DAISY AWARD

UC Health is proud to recognize nurses who go above and beyond, providing outstanding clinical care while also demonstrating extraordinary compassion and kindness.

The DAISY Award for Extraordinary Nurses honors unsung heroes across the nursing profession who provide outstanding care and performance. It is named for Patrick Barnes, a two-time cancer survivor who died in 1999 and whose family was touched by the extraordinary care and kindness Patrick’s nurses had shown.

### 2017 DAISY Award Recipients

Tesa Porter	Kim Puryear
Katie West	Holly Viox
Meredith Gregory	Kelly Shahan
Antonette Gunderson	Maria Gonzalez
Brittany Bonsall	Jennifer Hacker
Kim Williams	Chris Wilcher
Jake Cornett	Beth Stewart

## GOOD CATCH/PRIIDE IN PATIENT SAFETY AWARD

At UC Health, the commitment to providing better, safer and smarter patient-centered care extends beyond the bedside.

We also proudly recognize nurses at UC Medical Center and West Chester Hospital who speak up to prevent harm or potential harm to a patient.

The “Good Catch Award” at UC Medical Center and “PRIIDE in Patient Safety Award” at West Chester Hospital, named after UC Health’s values platform, reward those who have acted to address a safety concern, or whose quick intervention with a patient resulted in an improved health outcome.

### 2017 Nursing Good Catch/PRIIDE in Patient Safety Winners

Scott Brush	Christopher Ellis
Dominique Cooper	Joel Sobel
Kim Williams	Carly Coey
Melyssa Hoff Donnellon	Patty Parker
James Wang	West Chester Hospital Obstetrics Nursing Staff

# SELECTED PRESENTATIONS AND PUBLICATIONS

## POSTER PRESENTATIONS

### “Nursing Competencies in an Urban Academic Teaching Hospital”

Laura Startsman, MSN, RN  
QSEN Institute Summit on Leadership and Quality Improvement, Oct. 19, Cleveland

### “Charge Nurse Boot Camp”

Beverly Lathan, BSN, BC-RN, Mary Beth Ludwig, BSN, RN, CNOR, Catherine Browning, BSN, RN, Krishona Poignard, MSN, BC-RN, Margaret Lewis, MSN, RN, NEA-BC, Lisa Seiler, BSN, RN, CCRN, CNRN, Barbara Ehrhardt, MSN, RN  
Ohio Nurses Association 2017 Annual Conference, Oct. 6, Columbus, Ohio

### “Chasing the Dragon—A Death Ride Down the Heroin Highway”

Lisa Seiler, BSN, RN, CCRN, CNRN  
Greater Cincinnati Stroke Symposium, Sept. 29, Cincinnati

### “Taking the HAPI Out of Critical Care: Pressure Injury Prevention in the SICU”

Jill Hickman, MSN, RN, NE-BC, Nancy Brown, BSN, RN, CWOCN-ET, Margaret Lewis, MSN, RN, NEA-BC, Bonnie Sullivan, RN, CCRN, Lynn Downing, BSN, RN, Erica Hamilton, RN  
Ohio Hospital Association Quality Summit, June 14, Columbus, Ohio

### “Identification & Prevention of Pressure Ulcers Acquired During Perioperative Care”

Cam Felismino, MSN, BC-RN, Daniel Peters, RN, Tausha Gooden, RN  
Association of Operating Room Nurses (AORN) Global Conference, April 1, Boston  
Philippine Nurses Association of America North Central Region Conference, April 21, West Chester, Ohio  
American Society of PeriAnesthesia Nurses’ National Conference, April 30, Indianapolis

### “Knowledge, Compliance and Confidence Regarding Isolation Precautions”

Laura Elliott, BSN, RN, Jessica Biretta, RN  
National Nurse Residency Program Conference, March 21, San Diego

### “Improving Patient Experience through Interprofessional Collaborative Bedside Rounds”

Amy Costanzo, PhD, MSN, BC-RN, Denise Gormley, PhD  
National Academies of Practice Annual Meeting & Forum, Philadelphia

### “Building Bridges Toward Equity”

Julie Bell, MSN, RN  
Conference to Eliminate Racial Disparities in Breastfeeding and Infant Mortality, May 3, Cincinnati

### “Every Second Matters in Saving Maternal-Child Life”

Harrieth Gabone-Mwalupindi, PhD, MSN, RNC-OB  
World Congress on Midwifery and Neonatal Nursing Conference, Aug. 28, Philadelphia

### “Nurse Preceptors’ Self-reported Teaching Skills Competencies: Training Preparation Survey”

Harrieth Gabone-Mwalupindi, PhD, MSN, RNC-OB  
World Congress on Midwifery and Neonatal Nursing Conference, Aug. 28, Philadelphia

## PODIUM PRESENTATIONS

### “Transcultural Nursing: Approaches to Population Health that Reduce Health Disparities”

Sara Frazee, MSN, RN, CNN, CDN, Jason Huff, MSN, RN, FNKF, Becky Lee, PhD, RN, PHCNS-BC, CTN-A  
Conference of the Transcultural Nursing Society, Oct. 18, New Orleans

## PUBLICATIONS

### “Reducing Door-in Door-out Intervals in Helicopter ST-segment Elevation Myocardial Infarction Interhospital Transfers”

Air Medical Journal  
Michael A. Schneider, BS, Jason T. McMullan, MD, Christopher J. Lindsell, PhD, Kimberly W. Hart, MA, Diana Deimling, RN, Debra Jump, RN, Todd Davis, MD, William R. Hinckley, MD



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