



Looking ahead with excitement,
growth and resilience

NURSING ANNUAL REPORT 2019-2020
ST. MARY'S HOSPITAL

MISSION

Our Ministry:

Extends the compassionate ministry of Jesus by improving the health and well-being of our communities and brings good help to those in need, especially people who are poor, dying and underserved.

VISION

Inspired by God's hope for the world, we will be a ministry where associates want to work, clinicians want to practice, people seek wellness and communities thrive.

VALUES

Human dignity
Integrity
Compassion
Stewardship
Service

NURSING MISSION

Deliver compassionate, competent, holistic nursing care grounded in evidence and extend our Catholic identity to bring good help to those in need.

NURSING VISION

Be a destination for professional nursing talent to practice.

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Welcome

As I reflect on the practice of nursing during 2019 and 2020, I am filled with gratitude, admiration and pride in all that Bon Secours St. Mary's Hospital's nurses have accomplished during the most challenging and pivotal years of our profession. This two-year time span can be divided into nursing *before* and nursing *after* the COVID-19 pandemic. It's tempting to think that COVID-19 changed everything, and in a lot of ways it did. But the core of what it means to be a nurse and our nursing practice have stayed the same. Rooted in the work of Jean Watson's Theory of Human Caring, St. Mary's Hospital nurses brought the 10 Caritas processes to life over the past two years.



The COVID-19 pandemic called us to think differently and use our resources creatively to meet the needs of our community and to keep each other safe. Within the walls of our hospital, we faced the unknown and became family to each other and our patients. We accomplished all of this while continuing to excel by advancing the practice of nursing and achieving exceptional patient and nursing outcomes.

The World Health Organization (WHO) designated 2020 as the Year of the Nurse, and it truly was exactly that. St. Mary's Hospital nurses exemplify what it means to be called to care. This annual report is a celebration of nursing practice. It is with great pleasure that I share with you just a few of the stories of nursing at St. Mary's Hospital during 2019 and 2020. Each one of you has my utmost respect and appreciation, and I thank you from the bottom of my heart for the care you extended to your patients and each other during this time.

Jody Bishop, MSN, RN, NEA-BC
Chief Nursing Officer
St. Mary's Hospital

Magnet recognition highlights strong nursing culture

The American Nurses Credentialing Center's Magnet Recognition Program® distinguishes health care organizations that meet rigorous standards for nursing excellence. Only a select group of U.S. health care organizations (8% of all registered hospitals) have achieved Magnet recognition, widely recognized as the gold standard for nursing excellence.

According to a 13-year study published in the journal Health Affairs, patient outcomes were significantly better in hospitals that had been awarded Magnet status. It has also been linked to improved hospital financial performance.

For Bon Secours nurses, Magnet designation means having a voice within the organization and feeling empowered to make changes in the work environment through council membership, research projects and education. Magnet status is an indication that our nurses strive for excellence and continued improvements.

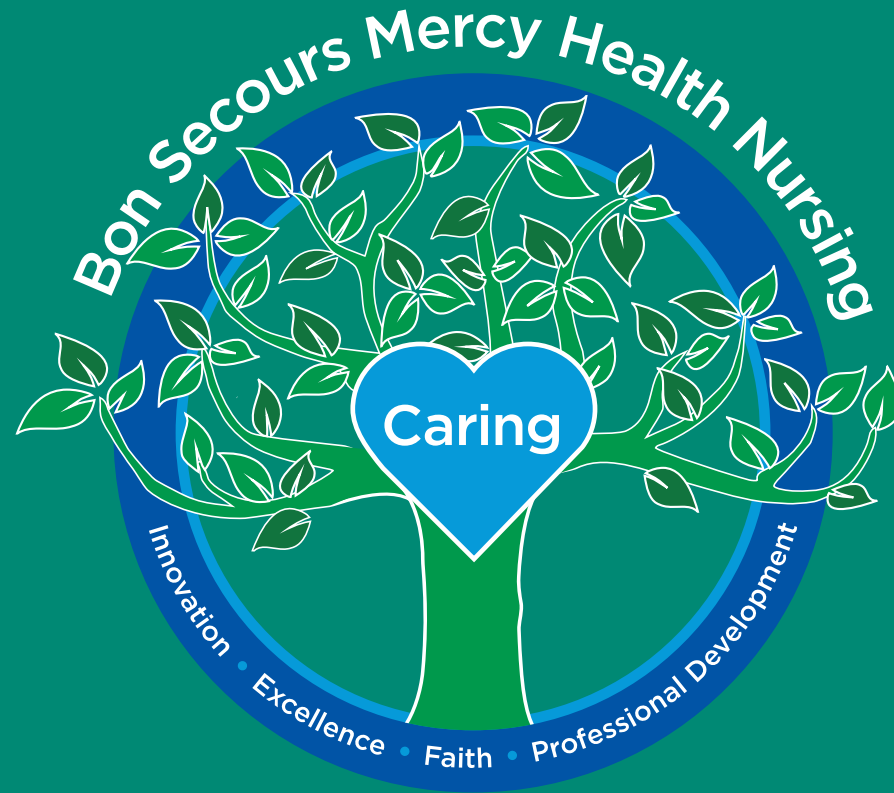
Bon Secours currently has four Magnet hospitals in Virginia:

- Bon Secours Mary Immaculate Hospital**
- Bon Secours Memorial Regional Medical Center**
- Bon Secours St. Francis Medical Center**
- Bon Secours St. Mary's Hospital**



Nurses adopt a unified professional practice model

Following months of work, Mercy Health and Bon Secours nurses adopted one unified nursing professional practice model in December 2020. This model and its core concepts – caring, innovation, excellence, faith and professional development – reflect our nursing culture while embracing and building upon our ministry’s core culture behaviors: empowered, unified, agile and committed to the ministry.



Caring

We embrace caring theory and science to promote nurse well-being and healthy relationships with each other and those we care for.

Innovation

We continually seek to discover new knowledge, solutions and technology to advance care delivery and nursing science.

Excellence

We strive for excellence to deepen the impact of nursing through collaborative, evidence-based practice that achieves the highest quality outcomes.

Faith

We honor our faith tradition as we live out our nursing mission and vision of a compassionate, healing ministry.

Professional Development

We ensure learning experiences and career pathways that promote professionalism, autonomy, full scope of practice and diverse skills for contemporary roles.



Transformational Leadership

Transformational leaders stimulate and inspire others to achieve extraordinary outcomes. They align everyone's goals and objectives with the larger organization while transforming to meet the needs of the future. This requires vision, influence, clinical knowledge and strong expertise related to the professional nursing practice.



Nurses keep patients and families connected during pandemic visitor restrictions

The separation of patients and their families during the COVID-19 pandemic was heartbreaking for nurses at St. Mary's Hospital. Their compassion sparked innovative ideas to support and connect patients to their support systems who could not physically be present in the hospital. Nurses in the intensive care unit (ICU) quickly took action and engaged families to help patients feel closer to their loved ones in simple and meaningful ways. Nurses were inspired to find a way for patients to hear the voices of their loved ones. They created a program called **Be There Bears** in which family members' voices were recorded over the phone and then tucked into a plush teddy bear to be played for their loved ones in the ICU.

Once the message has been successfully recorded and placed in the stuffed animal, it is delivered directly into the arms of the patient. Nurses play the recording for patients any time they are in the room. The **Be There Bears** were initially used with patients on ventilators who were unable to communicate with their families, but the program expanded to other critically ill patients who might need their spirits lifted. Patients can hear even when sedated, and the well wishes from families go a long way toward their recovery. The messages ranged from a simple hello from a wife or child to elaborate songs sung by the entire family, and all were deeply personal and emotional. "The ones that get to me are the ones from children," said Chris Kegley, BSN, RN. "They're so basic and innocent. They hold so much hope. When you've seen everything we've seen, it's not hopeless, but you hear what they want and pray that it happens for them."

Additionally, the ICU nurses created **All About Me** pages inspired by similar sheets used in preschools. Nurses used the **All About Me** page to help them connect with the patient more personally during times when the patients could not speak for themselves and did not have their family there to speak for them. During visitor restrictions, the nurse called the patient's family members and completed the All About Me page over the phone. This simple tool enabled nurses to involve families in the personalized care of their loved ones.

The St. Mary's Hospital ICU received both local and national media attention for the **Be There Bears** program and was awarded **Special Recognition for Pandemic Heroism** by The LeapFrog Group for their exemplary work in 2020.



Nurse improved emergency care for patients with autism spectrum disorder

In the fall of 2019, Deborah Alder, BSN, RN, CPN, director nursing, Pediatric Emergency Department, was honored as one of two Press Ganey Nurse of the Year finalists for her outstanding work creating and implementing an autism spectrum disorder (ASD) cart in the Pediatric Emergency Department. Deborah used evidence-based practice to create the ASD cart to improve the patient experience for the pediatric patients and their caregivers. They quickly discovered the tools within it were beneficial to many children who needed sensory distractions.

The cart is similar in size to a code cart and has a variety of age-appropriate tools that target ASD sensory disorders (visual, auditory, tactile, olfactory and nonverbal). After an assessment that includes a collaborative conversation with the caregiver, the nurse determines which tool will provide the greatest relief to the patient's sensory dysfunction. Examples of items that are included in the cart are multi-color LED lights, light up wands, glitter, white noise machines, egg shakers, music, textured balls, stuffed animals, chew toys, fidget spinners, lavender oil and communication cards. Deborah included an educational program for medical and nursing providers, reinforced the program during Peds ED education updates and encouraged the use of the cart during invasive procedures, assessments, obtaining vital signs and throughout the care of patients in the pediatric ED.

Deborah's innovative and patient-centered idea directly contributed to increasing the Press Ganey patient satisfaction scores in the category nurse's attention to needs from 74.4% to 90.2%, placing the pediatric ED in the 90th percentile nationwide. More importantly, the implementation of the ASD cart has directly contributed to providing a calm and soothing environment which allows the medical and nursing teams to approach the ASD patient with a more holistic approach.



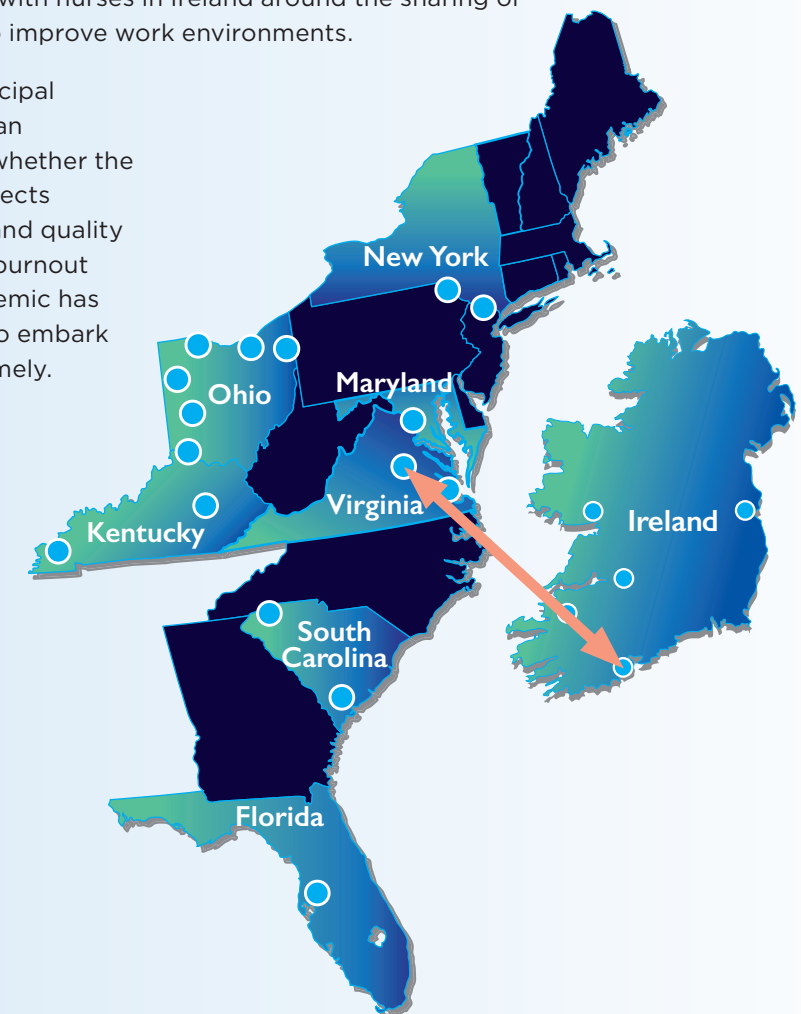
Chief nursing officer leads international twinning partnership

Even before the pandemic brought the issue of nurse resiliency to the forefront, Chief Nursing Officer Jody Bishop, MSN, RN, NEA-BC, committed St. Mary's Hospital to participate in the Magnet4Europe project. Magnet4Europe is the largest initiative to improve hospital work environments embarked upon to date. This international project is led by world-renowned nursing researchers at the University of Pennsylvania School of Nursing and KU Leven in Belgium.



In 2020, Jody initiated an ongoing nursing partnership between St. Mary's Hospital and Bon Secours Cork Hospital in Cork, Ireland. This structured twinning relationship is based on evidence that shows Magnet hospitals have lower clinician burnout, better nurse retention and safer care. As a three-time Magnet designated organization, Jody and the St. Mary's nursing Magnet team held bimonthly meetings with nurses in Ireland around the sharing of best practices and Magnet principles to improve work environments.

Additionally, Jody is serving as the principal investigator for the concomitant Clinician Wellbeing study, which will determine whether the value of positive work environments affects clinician well-being, patient outcomes and quality of care at St. Mary's Hospital. Clinician burnout due to the onset of the COVID-19 pandemic has made Jody's leadership and foresight to embark upon this important work even more timely.





Structural Empowerment

Solid structures and processes within our organization empower nurses to innovate, collaborate and achieve a higher understanding of the nursing profession. Nurses are empowered to meet the needs of our community. Determining the best ways to achieve organizational goals is fostered through strong interprofessional relationships.



Nurses pivot to respond to clinical needs during the COVID-19 pandemic

When the rest of the world shut down in March 2020, St. Mary's Hospital nurses went into action. Preparing for the worst, nurses quickly pivoted to convert existing hospital spaces to accommodate potential patient surges. Quiet operating rooms were converted to additional critical care beds. Yolanda Maurice, MSN, RN, CMSRN, director of nursing operations, and Samantha Streitz, BSN, RN, nursing administration manager, helped create and implement contingency staffing models based on buddy system staffing to fully mobilize and utilize all clinical and non-clinical associates to support patient care.

Additionally, St. Mary's Hospital pivoted traditional nursing units to designated respiratory units (DRUs) to care for COVID-19 positive patients together in cohort areas. The 4 West cardiac telemetry unit was the first step down to become a DRU.

Clinical nurse Emily Bader, BSN, RN, CMSRN, had been working in the ambulatory surgery post anesthesia care unit (ASU PACU) for two and a half years when all elective procedures were stopped. Prior to ASU PACU, Emily had worked on 4 West cardiac telemetry. During the initial COVID-19 crisis, she volunteered to go back to 4 West DRU full time for a few months to help. Emily shared, "I looked at the opportunity as a chance to pitch in and help where I could. I saw 4 West DRU as a learning opportunity and to be a part of something I never had been a part of before. It was really going back to the basics of nursing. During a time of uncertainty, it was nice to have a team of nurses to support each other. It gave me a greater appreciation for the profession and the teamwork we had during such a stressful time."

Emily is just one example of the many nurses that rose up and cross-trained in different areas. Nurses in other procedural areas helped across all the intensive care units (ICUs). ICU Nurse Director John Hegvik, MSN, RN, CEN, said that these nurses "supported the critical care teams and stepped in during a time when it was scary to take care of COVID-19 patients." Additionally, advanced practice nurses and nurse leaders worked together to quickly convert the ambulatory surgical unit to create additional ICU space in case it was needed. The initial COVID-19 response required agile thinking and showcased nursing flexibility, innovation and dedication to serve our community.



"I looked at the opportunity as a chance to pitch in and help where I could."



Mentorship program for clinical nurses helps transition to practice

Recognizing the value of mentorship in the transition to practice and to improve nurse retention, Donna Spainhour, MSN, RN-BC, GRN; Sabrina Fishburn, MSN, CMSRN; Jim Gregory, MSN, RN, CCRN, and Thomas Williams, BSN, RN, created a nurse mentorship program for clinical nurses. The nurse-led Professional Development & Retention Committee examined the literature and developed a structured mentorship program which included mentor training, mentor-mentee dyad matching and dyad recognition. The mentorship program provides a framework for personal and professional growth and development through a caring, meaningful relationship between the nurse mentor and mentee. The mutually beneficial relationship focuses on shared goals and development of the mentee through confidential, supportive communication, guidance and role modeling.

The first St. Mary's Hospital clinical nurse mentorship cohort met monthly in 2019 and included nurses from all areas of the hospital. The program evolved in response to feedback and was updated in 2020 to focus on the tenets of relationship-based care and professional development. Tools for the program include a Nurse Mentor Program guide, online training for active listening and coaching (30-minute resources) and a brief survey upon completion of the six-month program. Even the pandemic couldn't stop our mentorship program! Dyads continued to be matched and met regularly throughout 2020 despite the challenges.

In 2019 and 2020, program participants had an overall retention rate of 88%. Mentees (new-to-practice nurses with six months to one year of experience) who completed the program had a retention rate of 78%. Experienced nurses, serving in the role of mentor, had a retention rate of 91%. The mentoring relationship demonstrated positive results for both the mentees and the mentors.

Stop, Pause, Breathe!

Caring advocates bring visual reminders to every patient room to encourage mindfulness



Consistent with the tenets of Jean Watson's Human Caring Theory, the Nursing Caritas Committee created the Breathe Project in 2019 to bring attention to caring presence, mindfulness and centering practice to promote caring relationships. The group commissioned a local artist to design artwork featured on magnets placed on the doorframes of every patient room to call on the senses and visually remind staff to pause, reflect and be present in every moment. The doorframe was chosen as a central location that is passed before every patient interaction.

Stop, Pause, BREATHE! reminds us the simple act of stopping and breathing before entering a patient's room helps us to be present in the moment. This helps maintain situational awareness and a presence of mind centered on self-care and care of the patient. Taking that extra moment allows us to be authentically present with our patients and deliver the care that is needed. Even with several patients to care for, each patient needs to feel that in that moment, they are the only patient. This is the kind of care we all want to give and brings joy to the work we do.

Just BREATHE! It is good for you and good for our patients! Since its original inception, the Breathe Project has expanded to include a monthly nursing newsletter to encourage connection with the hospital's Mission, vision and values and a quarterly award to honor a provider who demonstrates a collaborative nature and commitment to excellence in patient care.



Exemplary Professional Practice

Nurses are autonomous to deliver patient-centered care while collaborating with the interprofessional team and families. Outcomes related to patient experience, quality and work environment stem from a deep understanding of evidence-based practice.

Nurses help to achieve record low primary cesarean section rates

The St. Mary's Hospital labor and delivery (L&D) team is committed to supporting vaginal birth whenever possible for their patients. A vaginal birth is particularly important for a woman's first birth, as it significantly reduces future health and pregnancy risks. The first full-term vaginal birth is known in the medical community as a nulliparous, term, singleton, vaginal (NTSV) delivery. In 2018, the St. Mary's Hospital NTSV team refocused their efforts and set the goal to maintain or decrease the cesarean section rate below the national benchmark.

The interdisciplinary team included nurses, providers, leadership and quality representatives. To achieve this goal, the collaborative team met monthly. The group developed a plan to both lower the cesarean section rate and ensure it stays below the national benchmark of 24.9%. Steps to accomplish this goal included focusing on the tools in the L&D toolbox for low intervention birth and shifting to transparency in provider cesarean section rates. Tools used to promote low intervention births included education for new nurses (a focus on L&D nurse preceptors orienting and training new nurses in techniques to optimize vaginal delivery), the addition of hydrotherapy tubs and nurse midwives.

Many L&D **nurses are trained doulas** and have undertaken additional training on the spinning baby technique and other positioning techniques, such as use of the peanut ball, to promote vaginal delivery. These experienced nurses serve as super users and preceptors to promote and train other new nurses on nursing interventions to help promote a vaginal delivery. Doulas are professionals trained in continuous physical, emotional and informational support to a mother before, during and shortly after childbirth to help her achieve the healthiest, most satisfying experience possible.

The **spinning baby** concept is based on adding balance to one's body so that gravity and movement help with the birth process. L&D nurses use these techniques to help their patients balance muscles, align with gravity, and move their bodies toward flexible strength to promote vaginal delivery. The peanut ball is most commonly used when patients need to remain in the bed, whether because of epidural use, complications or simply because they are exhausted. There are two main ways in which peanut balls are used, with plenty of room for variation. The first is in a semi-reclined position, one leg over the ball, one leg to the side of the ball. The ball is pushed as close to the hips as is comfortable. This position is commonly used to promote dilation and descent with a well-positioned baby.

Hydrotherapy is a low-intervention tool to promote relaxation, decrease anxiety and manage pain using water. In 2019, L&D purchased two hydrotherapy tubs and developed and educated staff on the policy and procedure for the set-up and use of the tubs. The tubs have been a great addition to help patients achieve the birth experience they desire.



Additionally, St. Mary's Hospital has increased the number of **nurse midwives** practicing in L&D. The midwives are available 24 hours a day, seven days a week through the Obstetric Hospitalist Group (OBHG) and Bon Secours Richmond OB-GYN. Patients often want to have a nurse midwife attend their delivery to help guide and support their desire for a low-intervention birth.

The broader obstetric collaborative team reviews monthly cesarean section rates along with any outliers. The L&D clinical nurse care leader tracks statistics related to NTSV rate and shares them with the team monthly. Historically, the data was presented to the group blinded by provider and many providers did not know their cesarean section rates. In November 2019, the group decided to shift to a model of open transparency and unblind the data to help facilitate open communication about clinical practice.

The interventions of the NTSV team resulted in the overall reduction of the NTSV rate at St. Mary's Hospital in the years 2018, 2019 and 2020. The rates reduced from 28.7% to 23.3% and 21.3% respectively.

Advanced practice nurses lead prone positioning in awake COVID-19 patients

During the onset of the COVID-19 pandemic, St. Mary's Hospital advanced practice nurses (APRNs) noted that COVID-19 positive patients whose respiratory status declined to the point of intubation had poor outcomes.

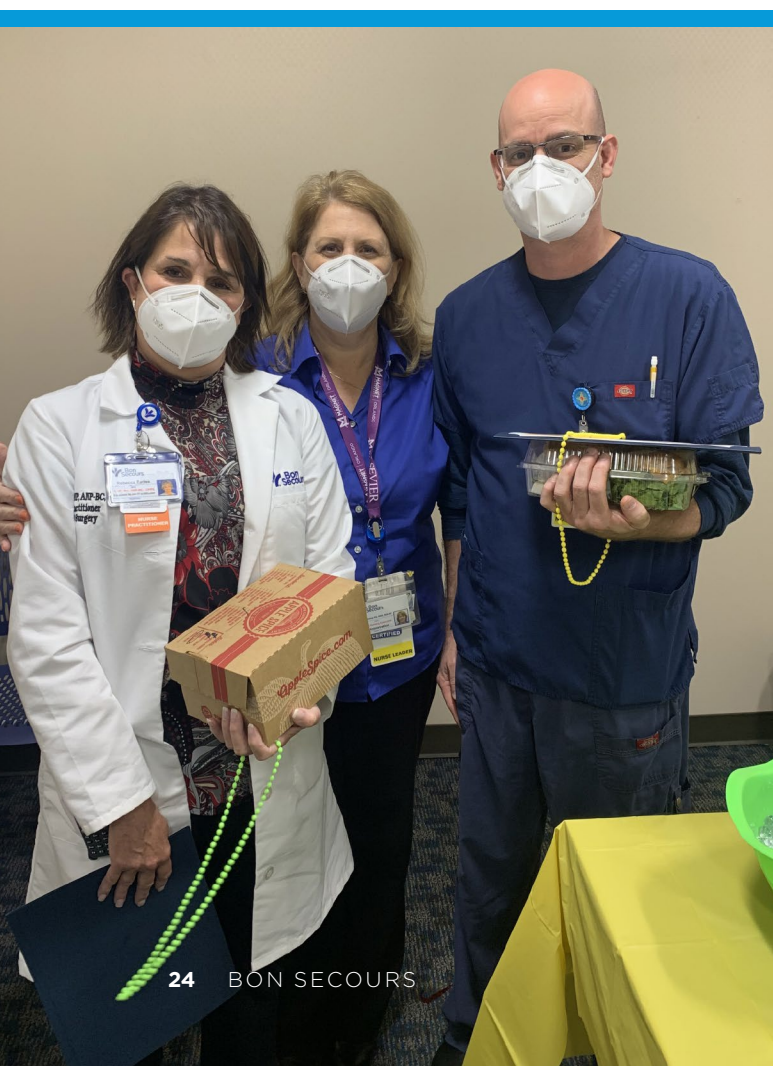
Once the patient was admitted to the intensive care unit (ICU), the nurses began prone therapy according to their ICU protocol. Believing earlier implementation of prone therapy could possibly prevent respiratory decline and lessen the need for intubation, Rebecca B. Eades, DNP, RN, ANP-BC, CPPS; Donna Spainhour, MSN, RN, GCNS-BC, and Christi Adams, MS, RN, CCRN, CCNS, consulted with experts in prone positioning to establish guidelines for prone positioning of awake patients in progressive and general care areas. Prone positioning (placing the patient on their stomach), commonly used for sedated and intubated patients, improves oxygenation while mobilizing secretions. These are important aspects for the care of a patient with COVID-19.

Following a literature review, the APRNs consulted with key stakeholders to discuss the feasibility of prone positioning for awake patients. After collaborating with physical therapy, respiratory therapy, pulmonology anesthesia and hospitalists, they developed

and implemented a decision tool for prone therapy. They created resources for each dedicated respiratory unit (DRU): a binder containing the protocol, patient education materials and signs for the patient door.

The protocol was adapted with time for patients on enteral feedings. Following implementation, a barrier was identified with a large number of Spanish-speaking patients. To better serve their patients, they collaborated with translation services to develop the patient education materials in Spanish.

The APRNs encouraged COVID-19 positive patients on the DRUs to use prone therapy and pulmonary hygiene, and educated the medical team. This interprofessional endeavor led to prone therapy being used daily on each DRU. Following initiation of this decision tool, there was a reduction in the number of patients on acute and progressive care units who required intubation.



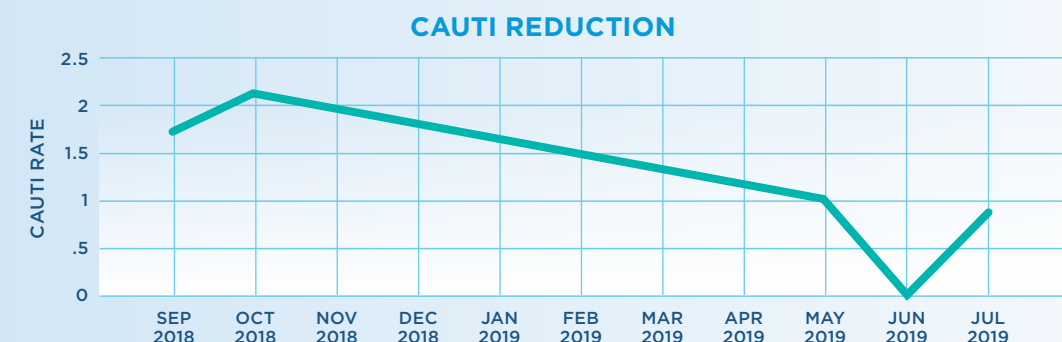
Nurse-driven CAUTI protocol reduces overall rates

Appropriate urine testing approach and collection techniques are critical nurse-sensitive components of a urine culture stewardship program. The St. Mary's Hospital catheter-associated urinary tract infections (CAUTI) team collaborated with the Antimicrobial Stewardship Committee, Infection Prevention and the urology nurse coordinator to reduce the St. Mary's Hospital CAUTI rate. They began by reviewing the literature related to urine culture stewardship. The team worked together to create an evidence-based adult inpatient urinary tract infection (UTI) evaluation algorithm. The algorithm was created to be a single resource to find information needed for the interprofessional teams caring for patients. New practices defined in the algorithm included:

- Urine collection techniques based on patient characteristics
- Appropriate symptoms for testing
- Most appropriate lab test based on symptomatology

Given the scope of the algorithm, the team created a comprehensive interprofessional education plan prior to roll-out. Education began in March 2019 and occurred during nursing shared governance council meetings, nursing orientation and nursing residency using a variety of methodologies. The algorithm was implemented on April 15, 2019.

In the three months following implementation, the CAUTI rate decreased significantly, to 0.94, 0.00 and 0.84 respectively.



Oncology nurses adopt new care delivery model

A 2017 fact sheet on the shortage of nurses from the American Association of Colleges of Nursing (AACN) projected that the United States will experience a shortage of registered nurses (RNs) that is expected to intensify as baby boomers age and the need for health care grows. Additionally, nursing schools across the country are struggling to expand capacity to meet the rising demand for care given the national move toward health care reform. To address challenges with retention and recruitment of direct care staff, 6 East acute care oncology at St. Mary's Hospital developed and implemented a new care delivery model.

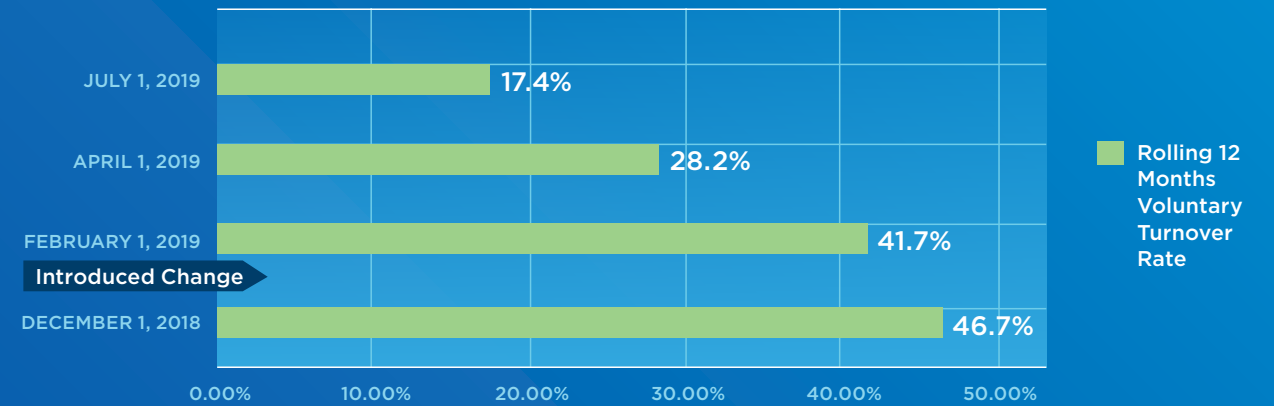
A literature search revealed a care hub approach that was documented as an effective care delivery model with clearly defined roles for all staff members practicing to the full extent of their education and training. The hub model paired teams of clinicians with varying skills together with well-defined roles to care for a larger group of patients. Each hub was led by a coordinating RN and allowed for integration of licensed practical nurses (LPNs) and supported new-to-practice RNs in learning fundamentals of practice. The project included the development of reporting and assigning tools, team workflow maps and policies to support changes in nursing practice.

Education related to the new care model was completed for all staff during several sessions in October 2018 with full implementation at the beginning of 2019. The 6 East acute care oncology unit council championed the hub model and Ann Lass, MSN, RN, CMSRN, 6 East nurse director, helped lead the change.

Ann recalled, "It took courage and creativity for everyone on the unit to try this new approach to providing patient care."

Over the course of 2019, through the unit council and nurse led focus groups, the model was adapted to become more flexible. Implementation of this innovative nursing hub model resulted in decreased nursing turnover and positive trends in both patient perception of communication with nurses and responsiveness of hospital staff.

6 EAST ONCOLOGY



CAHPS



Communication with nurses improvement resources

- O.P.E.N. communication styles
- Nurses listen carefully to you
- Nurses explain in way you understand
- Bedside reporting at shift change
- Nurses treat with courtesy/respect

CAHPS



Response of hospital staff

- Increasing patients' perceptions of response time for call buttons
- Call button help as soon as wanted it
- Five foot rule
- Help toileting as soon as you wanted



New Knowledge, Innovation and Improvement

Our current systems of health care are redesigned to meet the needs of our patients, community and organization. Nurses are at the forefront of generating new knowledge and innovation, having visible contributions to the art and science of nursing.

Nursing research study examines patient perceptions of nurses with tattoos

Tattoos have become increasingly popular and hospitals across the country are struggling to determine appropriate dress code policies for professional nurses. Clinical nurses Sharon Filegar, BSN, NCC-M, IBCLC (mother infant unit), and Camille Brenke, BSN, RN (women's specialty unit), championed a multi-site nursing research study evaluating patient perceptions of nurses with visible tattoos. Both Sharon and Camille serve on the St. Mary's Hospital research council and led data collection for the study. Together, they enrolled 107 participants, using iPads to survey adult inpatients.



Survey questions were designed to measure patient perceptions, including:

- The importance of the appearance of the nurse
- The patient's comfort level with a nurse with visible tattoos caring for them
- The quality of care perceived to be provided by a nurse with visible tattoos
- The perceived importance of the size and number of tattoos in being comfortable with the nurse caring for them
- The perceived importance of the content of the tattoo artwork in being comfortable with the nurse caring for them

In 2020, Sharon presented the results of the study to the St. Mary's Hospital research council, nursing leadership council and the annual Bon Secours Nursing Evidence Based Practice and Research Symposium. The 2020 symposium was hosted virtually by St. Mary's Hospital. Study findings indicate that the old image of the nurse with a cap, white dress and white hose is a thing of the past. Professionalism is not defined by appearance but by a nurse's knowledge, communication and actions. The results from the study are being used to inform future revisions of the St. Mary's Hospital nursing dress code policy.

	Very comfortable	Comfortable	Neutral	Uncomfortable	Very uncomfortable	No response
I am comfortable having a nurse with visible tattoos taking care of me	57.8% (n=226)	22.8% (n=89)	13.8% (n=54)	2.5% (n=10)	0.8% (n=3)	2.3% (n=9)
	Very comfortable	Confident	Neutral	Unconfident	Very unconfident	No response
I would be confident in the nursing skills of a nurse with visible tattoos	58% (n=227)	26.8% (n=105)	9.7% (n=38)	1.8% (n=7)	0.5% (n=2)	3.1% (n=12)

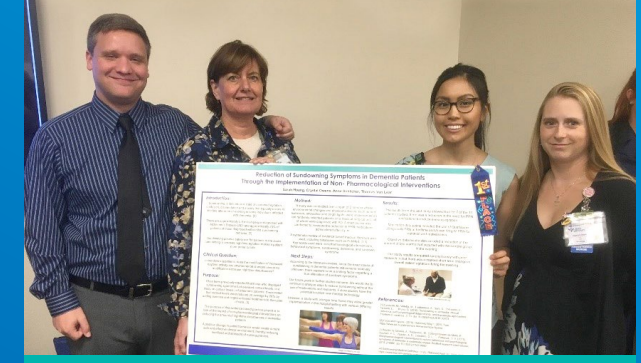
Nurses improve education for cardiac surgery patients

In August 2019, Christine Holt, BSN, RN, clinical care leader of the cardiovascular surgery unit (CVSU), came together with a team comprised of clinical nurses, physical therapists, occupational therapists, nurse practitioners and physicians who formed the Cardiac Surgery Operations Sub Committee.

The team was formed to assess and evaluate current practices related to sternal precautions for post-op cardiac surgery patients with a median sternotomy. The team found that traditional sternal precautions were confusing for patients to follow and did not promote the activity progression and independence needed for optimal recovery. The goal was to use current best practice guidelines and evidence-based care to promote patient recovery and improve patient health management practices.

The adoption of new, evidence-based Move in the Tube teaching guidelines replaced the traditional, more restrictive sternal precautions. Move in the Tube principles allow patients to do any movement within an imaginary tube around their body that does not cause pain. These guidelines help them regain their independence and mobility. Christine helped champion the change with the direct care nurses on CVSU to help make patient education consistent and easier for patients to follow.

This evidence-based change in discharge teaching led to an increase in the Consumer Assessment of Healthcare Providers and Systems (CAHPS) score for good understanding managing health from 52% in November 2019 to 63% in March 2020.



New-to-practice nurses use non-pharmacological interventions to reduce sundowning symptoms

The Bon Secours Nurse Residency program helped grow the spirit of inquiry within Sarah Hoang, BSN, RN; Crystal Owen, BSN, RN; Anne Schlicher, RN, and Thomas Van Lear, RN, at the beginning of their nursing careers. A central goal of the nurse residency program is to help nurses incorporate research and evidence-based practice into everyday nursing practice. Sarah, Crystal, Anne and Thomas were part of the same residency cohort and worked together to complete an evidence-based practice project.

The clinical question they sought to answer was: In sundowning patients, does the modification of increased daytime activity and environmental changes versus no modification decrease nighttime disturbances? After a systematic review of the literature, the group implemented environmental changes and physical activities, such as bed exercises, ambulation and bright lights on a medical-surgical unit with patients with a diagnosis of Alzheimer's disease. The pilot study revealed a reduction in the need for PRN medications to reduce evening agitation and a reduction in the number of bed alarms. Their findings correlated with prior research in demonstrating a marked short-term change in overall patient agitation during the evening.

The Nurse Residency Program graduation ceremony included a poster presentation session where the group's work was awarded first place. Sarah, Crystal, Anne and Thomas submitted an abstract and were selected to present their work at the 2020 Vizen/AACN Nurse Residency Program Annual Conference in New Orleans, Louisiana (which was cancelled due to COVID-19 pandemic).



Awards

Professional Excellence Awards

Carnation, Daisy and Florence Nightingale
Collaboration Awards

Hospital Awards

Awards



2019 Nursing Professional Excellence Awards

Nursing Special Merit Carnation Caregiver of the Year Award

Anthony (Tony) Jones Materials Management

Certified Nurse of the Year Award

Deborah Alder, BSN, RN, CPN

APRN Excellence Award

Mary Beth Stonich, MS, RN, FNP-BC, PCCN

Sonja 'Sam' Kees Caritas Nursing Award

Jennifer Hawkins, RN

Patient Safety Award – Nursing

Dana Kenny, RN

Patient Safety Award – Nursing Support

Wayne Usher, EMT-P

SMH Magnet Excellence in Nursing Leadership Award

James Gregory, MSN, RN, CCRN, Nurse Director CCU

SMH Magnet Clinical Nurse of the Year Award

Markus Mines, BSN, RN

Rose Black – Patient Experience Award

Mark Gregg, BSN, RN

Francine Barr Nursing Scholarship

Colleen Kupesky, BSN, RN, CCRN-CSC

CNO Excellence Award

Ann Lass, MS, MSRN Nurse Director 6 East

2020 Nursing Professional Excellence Awards

Nursing Special Merit Carnation Caregiver Award

Alicia Hudalla, PCT – 7 South ICU

Certified Nurse of the Year Award

Jennifer Black, MSN, RN, OCN – 6 East

APRN Excellence Award

Michelle (Shelly) Milburn, MSN, BSN, AGCNS-BC – Program for Diabetes Health

Sonja 'Sam' Kees Caritas Nursing Award

Michelle Vaughan, BSN, RN – 7 South ICU

Patient Safety Award –Nursing

Tabitha Daniels, RN – 5 West

Special Merit Patient Safety Award

Jason Ebright, Patient Transport

Patient Safety Award – Nursing Support

Samantha Bailey, Paramedic Short Pump Emergency Center

SMH Magnet Excellence in Nursing Leadership Award

Jonathan Hegvik, MSN, RN, CEN 7 South ICU

SMH Magnet Clinical Nurse of the Year Award

Megan Wright, RN 7 South ICU

Rose Black – Patient Experience Award

Andrew Burcham, BSN, RN – 7 South ICU

Francine Barr Nursing Scholarship

Suzy Fike, BSN, RN, CEN – Women's Specialty Unit

CNO Excellence Award

Beth Manning, MHRM, PHR, SHRM-CP – Nurse Retention Specialist

2020 Nursing Team Award

5 South Orthopedic Joint Replacement Center

2020 Interdisciplinary Team Award

Proning Team

Carnation Award Winners

Sharika Ross
Abby Graham
Scott Gunn
Miriam Assadri
Rachael Chesner
Bryson Nesbitt
Alex Clark
Tara Kadel

Jae Washington
Rhonda Gregory
Chante Scott
Stacey Williams
Marie Bailey
Sharika Ross
Clayton Owens
Angela Williams

Christian Alvarez
Catherine Wilkins
Megan Crawford
Leslie Price
Jazmine Carter
Sharon Gilmore
Theresa Boyd

Daisy Award Winners

Ellen Geho
Alison Dyer
Jennifer Fortune
Mallory Carter
Nicole Mitchell
Lynn Stevens
Sandra Erhart
Andi Malott
Shirly Costazo

Jordan Kellas
Zach Irby
Teri Dix
Alex Peterson
Jessica Combs
Sandra Stevens
Jenn Karabin
Carter DeChristopher
Kim Nguyen

Kiki Anthony
Cecilia Ngwa Faison
Keyley Rae
Jill Mella
Ashley Sizemore
Margaret Lowman

Florence Nightingale Collaboration Award Winners

Mark Bladergroen

Lee-Ann Parker

Manu Kaushik

2019-20 Hospital Awards

St. Mary's Hospital received a number of recognitions in 2019-2020.

American Association of Cardiovascular and Pulmonary Certification

The AACVPR certification is a recognition of a hospital's pulmonary rehabilitation center's commitment to providing exceptional medical care to patients and improving their quality of life.

American Heart Association 2020 Get with the Guidelines: Gold Plus with Target Stroke Honor Roll Elite

This award is given to hospitals who are recognized for at least a year of 75% or higher achievement of door-to-needle times within 60 minutes for applicable stroke patients.

Anthem Blue Distinction Plus for Maternity Care

This distinction is awarded to hospitals that demonstrate expertise and a commitment to quality care for vaginal and cesarean section deliveries.

Joint Commission Advanced Certification for Total Hip and Knee Replacement

Hospitals receiving this award must have served a minimum of 10 patients, use a standardized clinical care delivery method based on evidence-based care and clinical practice guidelines, data collection and performance measurement data and participate in the American Joint Replacement Registry.

Joint Commission Comprehensive Stroke Certification

The Joint Commission's Advanced Stroke Certification is offered in collaboration with the American Heart Association/American Stroke Association. It is awarded for an organization's commitment to continuous performance improvement, providing high-quality patient care and reducing risks.

Leapfrog Safety Grade A Top Hospital award

Top Hospital awards are presented to hospitals that have better systems in place to prevent medication errors, higher quality on maternity care and lower infection rates, among other praiseworthy qualities.

U.S. News Best Hospital for 2020-21

The Best Hospital rankings are based on an extensive evaluation that recognizes care that was significantly better than the national average, as measured by factors such as patient outcomes. St. Mary's Hospital ranked third in the Richmond, Virginia metro area, and sixth in Virginia overall.

Virginia Living Magazine 2020 Top Hospital

The list recognizes hospitals for excellence and innovation in quality patient care and is researched and chosen by Virginia Living's editors based on patient reviews, national and state rankings and other factors for outstanding health care delivery.

In addition, several specific departments were recognized:

American Association of Critical-Care Nurses 2020 Beacon Award Gold Level for Excellence

Awarded to the Cardiovascular Intensive Care Unit (CVICU)

The Beacon Award for Excellence is a significant milestone on the path to exceptional patient care and healthy work environments. The gold-level Beacon Award is given to hospitals that demonstrate staff-driven excellence in sustained unit performance and improved patient outcomes that exceed national benchmarks.

American Heart Association 2020 Get with the Guidelines: Heart Failure Stroke Gold Plus Achievement Award with Target Stroke Honor Roll Elite

Awarded to the Stroke Program

This recognition is given for two or more consecutive years of 85% or higher adherence on all achievement measures applicable and 75% or higher adherence with additional select quality measures in heart failure, stroke and/or resuscitation.

Leapfrog Group Special Recognition: Heroism During the Pandemic

Awarded to the Intensive Care Unit team

This award recognizes those who demonstrated an extraordinary commitment to patient safety during the COVID-19 pandemic.

Bon Secours Mercy Health

Bon Secours is part of Bon Secours Mercy Health, one of the 20 largest health systems in the United States and the fifth-largest Catholic health system in the country. The ministry's quality, compassionate care is provided by more than 60,000 associates serving communities in Florida, Kentucky, Maryland, New York, Ohio, South Carolina and Virginia, as well as throughout Ireland.

Bon Secours Mercy Health provided care for patients more than 11 million times in 2019 through its network of more than 1,000 care sites, which includes 50 hospitals, as well as home health agencies, hospice, skilled nursing and assisted living facilities. Consistent with its commitment to serve each patient with dignity, Bon Secours Mercy Health provides more than \$2 million per day in community benefit.

The Mission of Bon Secours Mercy Health is to extend the compassionate ministry of Jesus by improving the health and well-being of its communities and bring good help to those in need, especially people who are poor, dying and underserved. For more information, visit <https://bsmhealth.org/>.



bonsecours.com