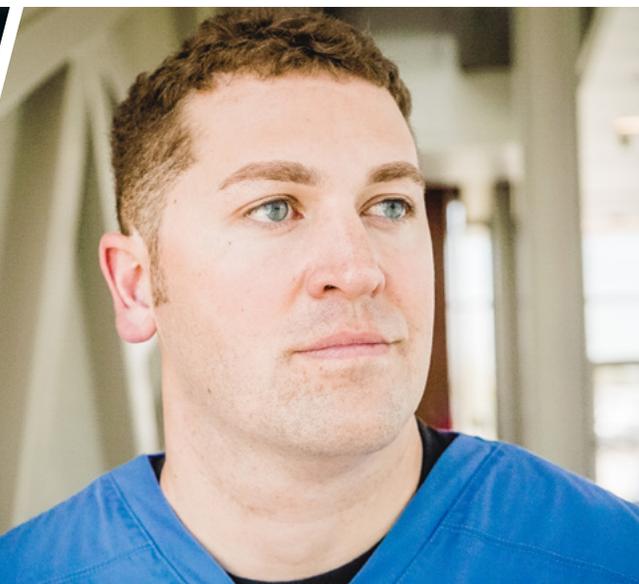




OCHSNER NURSING CONNECTION

2017-2018 Nursing Annual Report



EDITORIAL TEAM

Maria Nix, MSN, BSN, RN
Clinical Educator, Editor

Tracey Moffatt, MHA, BSN, RN,
System Chief Nursing Officer
and VP Quality

Ann Lockhart, MN, RN-BC,
AVP Nursing Practice

Ochsner Creative Media Services

OUR MISSION

SERVE, HEAL, LEAD, EDUCATE & INNOVATE.

OUR VISION

Ochsner will be a global medical and academic leader who will save and change lives. We will **shape the future of healthcare** through our integrated health system, fueled by the passion and strength of our diversified team of physicians and employees.

IMPACTING LIVES ACROSS LOUISIANA, THE NATION & THE WORLD

Ochsner serves patients from across **LOUISIANA, EVERY STATE** in the nation, and more than **70 COUNTRIES.**



Ochsner is **LOUISIANA'S LARGEST**

not-for-profit health system and one of the largest independent academic health systems in the United States.

OCHSNER BY THE NUMBERS

75+ Ochsner was founded more than 75 years ago by Dr. Edgar Burns, Dr. Guy Caldwell, Dr. Francis E. LeJeune, Sr., Dr. Alton Ochsner and Dr. Curtis Tyrone.



3 U.S. News & World Report "Best Hospital" Specialty Category Rankings

40 Owned, Managed, Affiliated & Specialty hospitals

Nearly **25,000** Employees

2.2M Clinic Visits in 2018

100+ Health Centers & Urgent Care Centers

27,000 Nurses, staff, and community members trained by Ochsner's Community Training Center in lifesaving AHA courses in 2018

811,000+ PATIENTS SERVED IN 2018

Nearly **8,000** caring individuals, employees, corporations and foundations supported causes across Ochsner Health System in 2018.

90 MEDICAL SPECIALTIES & SUBSPECIALTIES

72 nurse residents in 2017 and 2018

101 nurse technicians in 2017 and 2018

Ochsner.org



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A MESSAGE FROM OCHSNER HEALTH SYSTEM CHIEF NURSING OFFICER - TRACEY MOFFATT

DEAR OCHSNER NURSES,

I'm so privileged to lead nursing across a health system that provides access to exceptional healthcare for hundreds of thousands of patients and their families. Our patients come to Ochsner knowing they will receive extraordinary clinical care. And, major rating agencies agree! Ochsner is the only Louisiana hospital recognized by U.S. News & World Report as a "Best Hospital" across three specialty categories. Accolades from patients and rating agencies don't come by accident. And our amazing nurses play such a vital and integral role in everything we do.

I'm very excited to share our 2017-2018 Nursing Annual Report. The contents reflect the compassion, caring, and the exceptional skill of - YOU - our dedicated nurses who are committed to nursing professionalism and the advancement of nursing practice.

We know Ochsner nurses are special. You are the elite in a highly respected profession. And, we are committed to continue investing in programs that empower your personal and professional well-being and enhance and care for the mind, body, and spirit. Our nurses have access to hundreds of continuing education classes and professional development programs that encourage personal and professional growth, such as our Clinical Ladder Program. Ochsner's compensation and benefits for nurses are highly competitive.

We are all so busy - It can be easy to forget all that we have accomplished. The annual report allows us to reflect on all of the amazing work happening across our system every single day. This year, our nurses brought to life improvements that will keep patients safer, advance how we practice nursing, and enhance how we collaborate with our colleagues from every discipline across the organization to serve our patients.

In this report, you will read about Ochsner's Evidence-Based Practice Research Day, that provided nurses with an opportunity to share scholarly work and best practices and network with colleagues from across the nation. You will learn about our new simulation lab, meaningful presence of leaders, the re-designed patient flow center, and our collaborative staffing model. As your nursing leader, it's important for me to hear from every nurse in the organization and this year we've launched the Daily Connection, a process that allows us to break down barriers to do our most important work by escalating and resolving issues real time.

At Ochsner, we have a keen eye on the future. This year, Ochsner Medical Center, located on Jefferson Highway applied for re-designation as a Magnet® hospital after 3 consecutive designations. We are growing our future nursing workforce through innovative partnerships. We also announced an alliance with Chamberlain University College of Nursing at Ochsner Health System and opened a new college of nursing that will educate the next generations of nurses, support adjunct faculty positions, and secure clinical placements for nursing students. Lastly, we are innovating new models of care delivery through the advancement of virtual nursing care.

None of this would be possible without you. I'm so proud to BE an Ochsner nurse and so proud of all of you. What you do isn't easy, but it is so worth it. Take some time with me today to reflect on your incredible achievements. They will remind you why you joined the nursing profession and inspire you to keep growing. Keep up the great work! I can't wait to see what we achieve together in 2019!

Sincerely,

TRACEY MOFFATT, MHA, BSN, RN, SYSTEM CNO & VP OF QUALITY, OCHSNER HEALTH SYSTEM



[Click here to watch a message from Tracey Moffatt, System CNO & VP of Quality](#)



OCHSNER
NURSING

THE BEST AND THE BRIGHTEST WORK AT OCHSNER!

- 54 Ochsner and Ochsner affiliate RNs named Great 100 Nurses of Louisiana in 2017-2018
- Ochsner's System CNO Tracey Moffatt named 2017 City Business New Orleans Nursing Healthcare Hero
- ANCC Magnet® designated organization - Ochsner Medical Center
- ANCC certified Nurse Residency Program
- Specialty certification bonus offered
- Nursing Education Grant Fund supports continuing nursing education and professional development
- Clinical Ladder Program provides compensation for strong clinical and professional skills



**Ochsner
Medical
Center**



OCHSNER NURSING

OCHSNER NURSING MISSION is to guide efforts to advance the profession, to ensure a culture of safety, improve clinical outcomes, promote organizational growth, and further national prominence.

OUR 2020 VISION is nursing excellence through Relationship Based Care.

Ochsner Nursing By the Numbers

5,297 Number of Ochsner Health System Nurses
(4,409 RNs + 888 LPNs)

811,000+ Number of Patients Served in 2018

2015 Nursing Demographics Degrees and Designations		2017 Nursing Demographics Degrees and Designations	
18	Doctorally Prepared RN	51	Doctorally Prepared RN
1,384	ADN	1,473	ADN
2,035	BSN	2,087	BSN
356	MSN	427	MSN
266	APRN	358	APRN
562	Certified RN	850	Certified RN
		58	Certified APRN
3	Number of Magnet® Designations Ochsner Medical Center has achieved	3	Number of Magnet® Designations Ochsner Medical Center has achieved

Ochsner Nurses are Making a Lasting Impact

Ochsner Nurses have been a part of the fabric of New Orleans for more than 75 years. The vision of our founders was to make sure patients received individualized, comprehensive care and our nurses are a vital part of making that vision a reality.

As our healthcare system grows, our nurses carry out Ochsner’s mission using our core values: Patients First, Compassion, Integrity, Excellence, and Teamwork. Ochsner nurses have the opportunity to practice in multiple locations, in dozens of specialties and sub-specialties, across every service line and across every setting without ever leaving the health system. As a team of more than 5,000 nurses strong, we are making a lasting impact on the lives of patients and families in our community.

Each year, Ochsner employees receive letters from patients who express their gratitude for outstanding care. They share how care at Ochsner made a difference in their lives. The times when we have comforted them, supported them, and shared in the joys, fears, and challenges involved in their care. Our patients are at the center of everything we do at Ochsner, yesterday, today, and always.



Nurses nicknamed Camp Plaque “Splinter Village” because they often got splinters in their stocking feet from the wood floors.



[Click here to watch employees reading letters from patients](#)

Dear Ochsner,
 “Thank you so much for taking care of my sweet Samantha. Throughout our stay, you treated her like your daughter.”
 – Excerpt from an Ochsner Patient’s letter

Dear Ochsner,
 “Every day I came in for chemo, you would sit down and talk with me.”
 – Excerpt from an Ochsner Patient’s letter

OCHSNER NURSES DRIVE QUALITY





OCHSNER NURSES DRIVE QUALITY PATIENT CARE

Ochsner Baptist* Opens First Human Milk Bank in Louisiana

In Louisiana, the preterm birthrate is 12.3%, 3rd highest in the nation. As a leader in neonatal care, Ochsner understands the critical importance of human milk for infant growth and development that cannot be duplicated by formula. Mother's milk is especially crucial to vulnerable premature babies and significantly decreases the odds of life-threatening complications and infections. Despite their best efforts, sometimes mothers of preterm infants are unable to provide their own milk. Pasteurized human donor milk is the next best option.

Ochsner Baptist* has developed Louisiana's first human milk bank at Ochsner Baptist*. There are just 24 active milk banks accredited by the Human Milk Banking Association of North America (HMBANA) in the US.

"It has been an honor to work with the milk bank planning team to operationalize this project that will improve neonatal outcomes across Louisiana," says **Dr. Shelley Thibeau, PhD, RN**, Director of the Mothers' Milk Bank of Louisiana. The milk bank at Ochsner Baptist* receives milk from approved donors, then proceeds with pasteurization, packaging and distribution to critically ill infants throughout Louisiana and the surrounding region.

"One in eight babies is born preterm and a significant number of moms with premature babies are not able to breastfeed. Donor milk banking plays an important role in meeting the critical nutritional needs of these babies"



Mother's Milk Donor's Story: Kara Torres

“There were other mothers in the NICU who had to drive several hours to get to Ochsner Baptist*, mothers who couldn't get their milk supply to come in, and mothers who had very sick babies that really needed the nutrients that only breast milk can provide. You want to give your child the best of what's available, and when you aren't producing enough milk it causes even more stress and you doubt yourself as a mother. I know I did, at least. That experience in the NICU was life changing for me, and I made a promise to my son that once he was home with us we would do whatever we could to help the other sick babies get home, too. I saw information posted around the NICU about the importance of breast milk and that you could qualify to get human breast milk for your baby from a donor. I had never heard of this before. I always had that in the back of my mind that if I couldn't get enough of my own milk through pumping, support was out there for me and my son.

Once my supply came in, I knew that was a way for me and my son to give back. I signed up to be a donor once my son was a month old and have already donated over 1,000 ounces! I have the Ochsner NICU team to thank for this decision. They gave so much to me and my family, that we wanted to give back this very special gift. So once again, thank you so much to the NICU team and the Mother's Milk Bank staff. You were there for my family through the most difficult time of our lives and provided the support we needed to keep on fighting and hoping day after day.”

Saving Lives with Donor Milk

“Donor milk is processed using holder pasteurization which ensures donor milk safety and retains the beneficial nutrients and components of human milk,” says **Dr. Thibeau PhD, RN**, Director of the Mothers' Milk Bank of Louisiana. Research shows that the method of pasteurization used preserves approximately 50-90% of the immune factors that help protect babies from illness. Before pasteurized human donor milk is dispensed, bacteriological testing is done to ensure its safety.

The Mother's Milk Bank of Louisiana at Ochsner Baptist* is partnering with several depot locations across the state. A depot functions as a safe satellite storage for the milk bank. Six depots are available in New Orleans (Ochsner Baptist*), Northshore (St. Tammany Parish Hospital) Lafayette (Lafayette General), Lake Charles (Pink and Blue Avenue), and Baton Rouge (Baton Rouge Birth Center & Ochsner Medical Center - Baton Rouge), and more will be opening across the state.

To learn more, please contact Shelley Thibeau at 504.703.6455, sthibeau@ochsner.org or visit <https://www.ochsner.org/services/mothers-milk-bank-at-ochsner-baptist> or <https://www.facebook.com/mothersmilkbankoflouisiana/>

IMPACT

100 Number of Approved Milk Donors as of October 2018

Over 438 Gallons of human milk donated

212 Gallons of human milk processed

6 Number of Hospitals Served.

73 Gallons of human milk dispensed

FUN FACT: In our processing lab, our refrigerators and freezers are named after Mardi Gras krewes- Rex, Zulu, Iris, Barkus, Nyx, Muses, and Orpheus. The pasteurizers are named after New Orleans musicians- Harry (Connick), Louis (Armstrong) and Fats (Domino)



“The Daily Connection is a series of escalating conversations where front-line staff huddle in the morning at the start of their day and identify the barriers or challenges that might be in their way. Through a series of meetings, those issues get identified, escalated, then resolved with senior management.” **Tracey Moffatt, MHA, BSN, RN**, System CNO and VP Quality, Ochsner Health System.

After a successful pilot in April 2018, “The Daily Connection” escalation huddles process launched system wide. It connects caregivers to identify barriers to delivering our best every day. In most areas, front-line staff were already huddling prior to launching the Daily Connection pilot. The “escalation” piece was incorporated into these start-of-shift huddles for hospital inpatient areas, clinics and ancillary support service areas, allowing feedback from front-line staff to be communicated to senior leaders every day. The end goal of this Daily Connection is to

increase leader awareness of existing barriers so they can be addressed in a timely manner, and to ensure front-line staff that their concerns are heard and addressed quickly.

“What I really love about the daily huddle is that everybody comes together from all different departments and we bring issues, problems, and identify the fixes.” **Deidra Dudley, DNS, RN**, AVP Nursing, Medical Surgical Unit, Ochsner Medical Center – West Bank Campus. In The Daily Connection process, front-line staff discuss safety events, capacity constraints, equipment issues, technology issues, immediate threats and other barriers that are first reported in the front-line start-of-shift huddles. Unit/department leaders then escalate all barriers they are unable to solve to the next tier of leadership until all necessary barriers reach the regional executive team.

“One of the best parts about the Daily Connection Huddle is the 360o communication—when issues are brought up from the front-line staff, feedback is reported back to employees in a formalized manner,” says **Gail Gaudry, BSN, RN, MBA, CCM**, Director Performance Improvement, Ochsner Baptist*. The CEO from each region then escalates items he/she is unable to resolve to the system executive team. The final important piece to this process is the feedback loop. As barriers are resolved, executive leaders cascade solutions back to front-line staff through stoplight reports, leadership rounding, newsletters, forums and other means. Ensuring the right team members are present during huddles is important for a successful and effective discussion.

Since launching The Daily Connection huddles, campuses have seen positive impacts. Many barriers were fixed real time or even quicker than before because they were escalated appropriately to senior management. Armed with increased awareness, leaders now have a better sense of their barriers and how to tackle them or when it is appropriate to escalate. Front-line staff expressed that they felt heard because their leaders were closing the loop by sharing resolutions with them.

[Click here to watch a video about the Daily Connection](#)

* A Campus of Ochsner Medical Center

Sort, Orders, Treatment (SO_rT)

Implementing SO_rT Improved Efficiency and Decreased Left Without Being Seen rates in the Emergency Department (ED) at Ochsner Medical Center – West Bank Campus

THE CHALLENGE: In January 2018, the ED had a 7% Left Without Being Seen (LWBS) rate. With high turnover of ED doctors and nurses, the staff struggled to care for patients in an efficient timeframe.

“Our goal is to treat patients in a safe and timely manner,” says **Melissa Adams, MHCA, BS, BSN, RN**, Chief Nursing Officer, Ochsner Medical Center – West Bank Campus, *“We needed a process to improve the overall efficiency in the ED and reduce Left Without Being Seen rates, which puts patients at risk.”*



THE SOLUTION: The ED team partnered with clinical consultants who performed a 2-day assessment of processes and people in the ED. All ED stakeholders, the radiology department, lab, and transport were involved. The consultant team recommended that the Ochsner Medical Center – West Bank Campus ED team visit Lafayette General Medical Center who used a process called Sort, Orders, Treatment (SO_rT), which had led to efficient patient throughput and low LWBS rates. SO_rT is a process that incorporates an Advanced Practice Provider (APP) in the ED triage, supporting two triage nurses. The APP listens to the intake assessment and has the opportunity to enter orders for the patient before they go to the appropriate treatment area based on acuity. The team, including **Melissa Adams, MHCA, BS, BSN, RN**, CNO, **Latwunya Randall, BSN, RN**, Nursing Director, Emergency Department, **Adam Fleming, NP**, Lead APP, **Dr. Charlane Liles, MD, MSPH**, Medical Director- Emergency Medicine, **Jarrett Fuselier**, Director Med-Surg Intensive Care, ED Charge RNs, and consultant representatives, visited

“I am extremely proud of what this team has been able to accomplish in a relatively short amount of time to improve safety and efficiency in the Emergency Department. Their passion to create an excellent place to work and to receive quality care is evident. I look forward to their continued success and accomplishments.”

– **Melissa Adams, MHCA, BS, BSN, RN**, Chief Nursing Officer, Ochsner Medical Center – West Bank Campus.

Courageous Leadership: The Keys to Success

Communication. Staff were kept informed using huddle boards and data posted daily with door to provider and LWBS rates.

Collaboration and Shared Decision Making. Leaders had to be unified in decision making, including Nursing, Medicine, and Advanced Practice Providers. No changes were made without three leaders in agreement. *“As a team, we thought through every aspect from the necessary timing of the shifts to working with the space we had. We watched closely for any kinks throughout the day and worked to correct them quickly,”* Dr. Liles says.

Support from Leadership Team, Leader Presence, and Role Modeling. Latwunya and Dr. Liles came in regularly to work with staff. The leadership team conducted monthly stakeholder meetings and met weekly as a leadership team. *“We worked together to ensure that each member of the team had the needed tools to do his or her job well, including registration, triage nurses, SO_rT nurses and SO_rT providers,”* says Dr. Liles, *“We provided constant monitoring and feedback on the day and night shifts and closely watched the shift transitions for any pain points we could alleviate. Any negativity about change was met with understanding and support.”*

Focusing on people not numbers. *“The biggest change was made when we made it about the person who left versus the number of people who left. We began sharing who left without being seen (age, chief complaint, time of arrival, time left, comments noted in the chart). We talked with staff about why the patient left and provided comments from follow up phone calls,”* says Latwunya Randall, BSN, RN, Nursing Director, Emergency Department.

Lafayette General Medical Center to observe the SOrT process and soon after, conducted a LEAN event. In May, the role for APPs in ED changed to be present in triage for patient intake during the hours with peak volume of patients. The leadership team, which included Nursing, Medicine, and Advanced Practice Provider services, provided engaging communication using data and huddle boards that were updated daily with door-to-provider and LWBS rates. Most importantly, they were unified in decision making as a leadership team.

THE RESULT- CHANGING THE CULTURE:

Since adopting the SOrT process, the LWBS rate has decreased from 7% in January to 0.5% in August. At the end of January, the OMC - West Bank Emergency Department RN vacancy rate was 28.5% (15.3 FTEs.) As of August, the ED had zero vacancies. The ED wait times, known as door-to-room time, went from 48 minutes in January to 8 minutes in August. *“We focused on changing the culture,”* says **Latwunya Randall, BSN, RN**, Nursing Director, Emergency Department, *“What we used to do didn’t work and in order for us to do what we committed to do, we had to be open to change. We are committed to putting the patients first and we hold ourselves and each other accountable to follow the processes for safe and efficient patient care.”*

“The implementation of SOrT has been an incredible team effort and the unwavering support Latwunya and I had from our local executive leadership made implementation of the process possible and continues to allow us to improve upon its success,” shares **Dr. Charlane Liles, MD, MSPH**, Medical Director - Emergency Medicine, Ochsner West Bank Region. *“Bringing the provider to the front of the ED allows us to do what we are all here to do - care for the patient in the most efficient way possible. SOrT allows the workup and treatment to start within moments of the patient’s arrival, thus doing more and more to ensure we start the treatment as quickly as possible.”*



The OMC - West Bank Campus ED team celebrating at a Pelicans Game.

Metric	Description	Target/ Bench Mark	Jan	Feb	Mar	Apr	May	Jun	July	Aug
LWBS	% of patients who leave prior to being seen by provider	<2%	7.1%	3.5%	1.4%	1.5%	0.5%	0.2%	0.3%	0.5%
Door to Room	Arrival time to placed in room	40 mins	48 mins	26 mins	12 mins	10 mins	9 mins	8 mins	7 mins	8 mins
Door to provider	Arrival time to provider contact	30 mins	58 mins	37 mins	20 mins	17 mins	10 mins	8 mins	8 mins	9 mins
Discharge length of stay	Arrival time to discharged off the tracker board time	2.7 hrs	3.7 hrs	3.3 hrs	2.8 hrs	2.7 hrs	2.6 hrs	2.5 hrs	2.5 hrs	2.6 hrs
EKG	EKG completed < 10 mins of arrival time with c/o chest pain	<10 mins	24 mins	29 mins	20 mins	9 mins	8.66 mins	9.79 mins	9.69 mins	9.77 mins

NURSES PARTNER TO IMPROVE CARE FOR SEPSIS PATIENTS

“Nursing Pursuit of Value is a platform where nurses collaborate with other clinicians to identify opportunities to standardize evidence-based practice and eliminate variation to provide the highest quality patient care at the most affordable cost.”

– Nattie Leger, MSN, RN, LSSBB, AVP Supply Chain Nursing



Over the past year, Ochsner Health System has been focused on the early identification and treatment of sepsis, a life-threatening infection in the blood stream. Nationally, sepsis is a leading cause of death and a majority of the deaths can be prevented with early identification and treatment.

Each Ochsner hospital has a dedicated sepsis committee that reports up to a system sepsis committee. The multidisciplinary committees are comprised of MDs, RNs, Pharmacists and IT. ***“In the past year, the system committee set goals and coordinated activities to drive evidence-based practice for early identification and treatment of sepsis,”*** says **Nattie Leger, MSN, RN, LSSBB**, AVP Supply Chain Nursing. ***“The first step was creating a standardized definition for sepsis to assist providers in early identification and treatment of septic patients.”***

System committee members also reviewed current system sepsis order sets and revised the Emergency Department (ED) and In-patient sepsis order sets to standardize patient care across the system.

Additionally, the system committee collaborated with the local committees to

identify improvement projects that were completed at each hospital using either the Plan Do Study Act (PDSA) process or LEAN methodology. Campus representatives presented the results of their projects at the system level for approval and possible implementation. Some of the projects completed by local teams included:

- Ochsner Medical Center – North Shore Campus piloted a sepsis Nurse driven protocol on a Med-Surg unit. Using the protocol assisted nurses in early identification of sepsis and prevention of detrimental complications, such as septic shock, organ failure, decreased perfusion to vital organs and ultimately, death.
- Ochsner Medical Center – Baton Rouge ED created a triage sepsis checklist. Initially, it was a manual process where the nurse completed the 4-question checklist during triage. If 3 of the 4 questions were positive, the nurse would notify the Provider. After completing a couple of PDSA cycles, the team brought the checklist to the system committee for approval. The manual process was approved and the checklist was built into the electronic medical record with an automated best practice advisory

that creates a flag in the patient’s chart for the Provider to evaluate for Sepsis. This workflow was scaled system wide.

- Ochsner Medical Center ED led a LEAN project on sepsis “Perfect Care” which is compliance of 3-hour and 6-hour sepsis bundles of care that were adopted by the Center for Medicare/Medicaid Services (CMS) for treatment of septic patients. Studies have shown increased compliance with sepsis bundles improves survival in patients with sepsis. The group used the LEAN methodology to define, measure, analyze, improve, and control the problem. Key interventions that were implemented to increase compliance of the CMS bundle criteria were creating a sense of urgency at the point of entry at triage (the team used the Ochsner Medical Center – Baton Rouge triage sepsis checklist), making sepsis order set antibiotics available in the Pyxis, and creating a “Code Sepsis” protocol which provided the right team at the right time for the patient.

Designing a Proactive Expert Nurse Rounding Program to Reduce Codes Outside the Intensive Care Unit (ICU) at Ochsner Medical Center, located at Jefferson Highway

In 2017, Nurses at Ochsner Medical Center constructed an innovative multi-phase proactive expert nurse rounding program that has contributed to reduced cardiac arrests and resuscitation events outside the intensive care unit (ICU) and provided a support system for front-line staff nurses.

Historically, Rapid Response Systems (RRS) have been used reactively as a safety intervention to decrease rates of cardiac arrests and prevent unplanned transfers into the ICU. However, proactive resuscitation models have also demonstrated prevention of adverse events, dissemination of expertise, provision of staff support, and discovery of quality improvement opportunities.

A pre-intervention evaluation survey found that nurses lacked confidence in escalating concerns about clinical deterioration and triggering rapid response calls. The survey also found that existing RRS responders were struggling to manage competing priorities of on-demand rapid response consults in addition to ICU patient care.

“Proactive rounding adds a layer of protection for our patients by recognizing deteriorating conditions sooner. Coupled with artificial intelligence, we have been able to reduce inpatient unit cardiac and respiratory arrests. We are a safer organization due to our implementation of proactive rounding on identified patient populations.”

– Deborah Ford, MSN, RN,
Chief Nursing Officer,
Ochsner Medical Center



In December 2017, nurses created an expert nurse rapid response team and launched a pilot of the proactive expert nurse rounding program. The program included 24/7 designated expert critical care nurses to proactively round on high risk non-ICU patients and respond to inpatient emergencies. ICU nurses volunteered to staff the program and received Advanced Resuscitation Training (ART) to become Rapid Response Nurses. The special training included didactics, simulation, and TeamSTEPPS evidence-based teamwork principles and covered topics like risk screening, monitoring, pre-arrest interventions, management of cardiac arrest, and immediate post-cardiac arrest care. Interdisciplinary weekly rapid cycle feedback meetings were set up to expeditiously optimize issues. Hospital-wide Daily Connection escalation huddles allowed for leadership support of adverse events and barriers to practice.

“The proactive rapid response nurse has been such a pivotal resource in managing some of our highest acuity patients,” says **Kiara Dillard, BSN, RN-BC**, Operations Coordinator, Medical-Surgical/Telemetry Unit, ***“They’ve provided their knowledge, skill, and support to caring for the patient and educating staff. It’s also helped to improve relationships between our departments, promoting trust and a unique collaboration from one clinician to another.”***

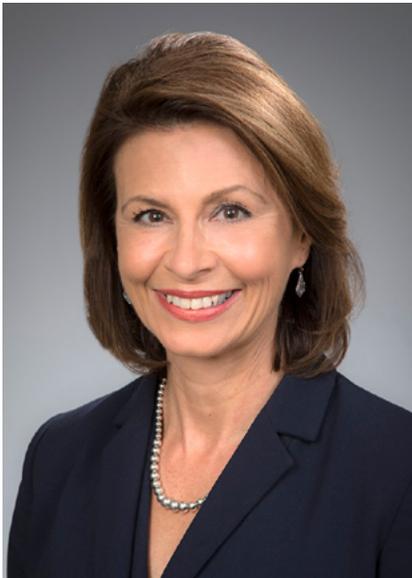
In the first six months, the rapid response nurses completed proactive round on 4000 high risk patient charts, made 1700 proactive rounds, responded to 400 RRS activations, facilitated 300 ICU transfers, proactively intubated 46 patients, and participated in 36 non-ICU cardio-pulmonary arrests. The biggest success was the ability for bedside nurses to be able to call for help and concerns without activating a rapid response, this resulted in over 1000 calls from floor RNs with patient concerns.

The program has contributed to a 74% reduction in non-ICU cardio-pulmonary arrests over an eighteen-month period, between January 2017 and June 2018. There has been a 36% decrease in cardio-pulmonary arrests inside ICU. Additionally, the Ochsner Medical Center team has seen an improved peer group ranking on the Hospital Survey of Patient Safety and in the areas of communication openness, non-punitive response to errors, and frequency of events reported suggesting a positive cultural shift in perception of patient safety.

PATIENT EXPERIENCE

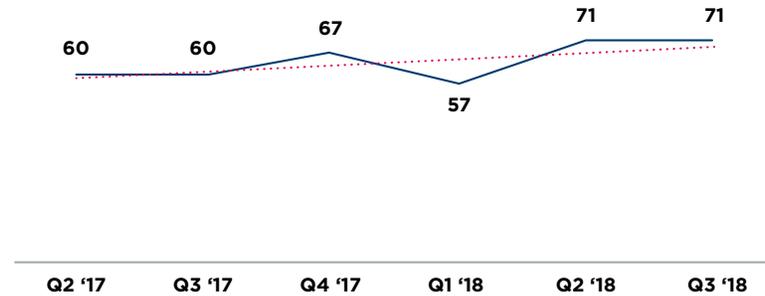
The sum of all Ochsner interactions, shaped by our culture, that influence patient perceptions across the continuum of care. The experience of care is highly personal. This definition for experience of care at Ochsner helps us to understand that our patients experience our culture and that the experience is enduring. The four core concepts to keep in mind when thinking about our individual and collective responsibility to deliver the very best, highly reliable care experiences are: All Interactions; Our Culture; Continuum of Care; and Perceptions.

Care experiences for our patients and families are improving across our system and YOU are making a difference! How you connect and communicate with our patients and each other reveals who we are and determines subsequent perception. System-wide patient experience HCAHPS scores increased from 2017 to 2018 in several categories, “Communication with Nurses” increased from the 60th percentile to the 71st percentile, “Rate the Hospital” increased from the 40th percentile to the 61st percentile, and “Response of Staff” increased from the 45th percentile to the 58th percentile.

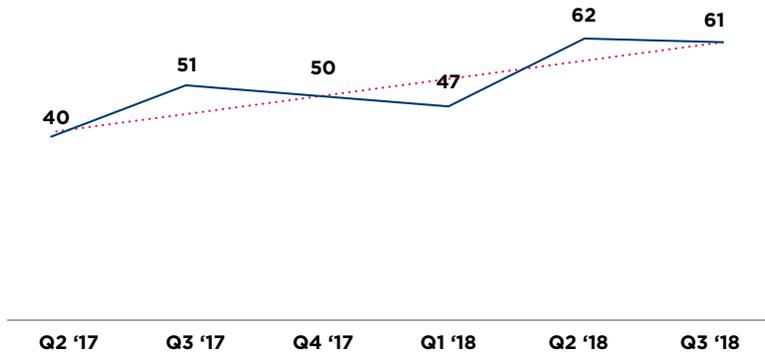


“HCAHPS trends in patient perception of Nurse Communication reveal incredible efforts on the part of our amazing, caring nurses to connect and communicate more effectively,” says Kim Pyles, M.Ed., FACHE, CPXP, VP Patient Experience and Service Excellence, **“This is so important, as you know that good communication reduces anxiety, increases adherence, and results in better outcomes - THANK YOU!”**

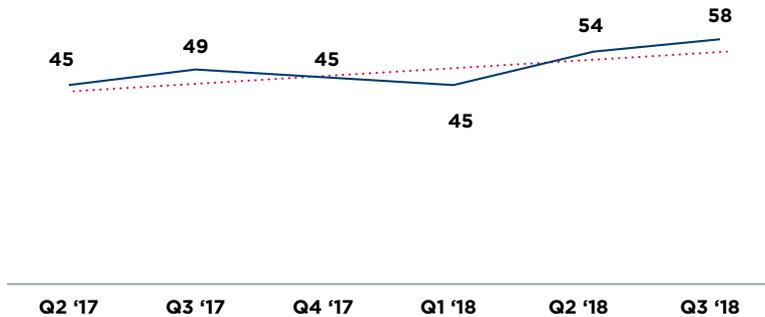
Communication w/ Nurses Trend - Percentile Rank



Rate Hospital Trend - Percentile Rank



Response of Staff Trend - Percentile Rank



OCHSNER'S INAUGURAL PATIENT EXPERIENCE SUMMIT

In 2018, Ochsner's Patient Experience team hosted the inaugural patient experience summit, themed *Celebrating and Recognizing the Impact and Best Practice of Our Medical-Surgical Teams*. Sixty attendees, including nursing leaders and patient experience representatives from across the system, attended the event held at Ochsner Medical Center - Kenner to focus on the power of alignment and consistency in care experiences. The inaugural summit featured speakers who spoke on a variety of topics, some of which included: *The Power of Self-Care in Leadership*, *The Power of Proactively Managing Expectations*, and *The Power of Leading with Courage, Authenticity, and Awareness During Times of Change and Disruption*. To learn more about the Patient Experience Summit, please contact Alison Soileau, AVP, Patient Experience at alison.soileau@ochsner.org.



Meaningful Presence of Leaders Brings Value to Patients and Employees in the Bayou Region

In 2017 the nursing leadership team in the Bayou Region began conducting weekend leader rounds on both the day and night shifts and the team was quickly able to identify opportunities to improve the work environment and staff engagement. The weekend leader rounding allowed leaders to have the chance to connect with staff members outside of their individual units and services, resulting in increased sensitivity to hospital operations and by January of 2018, the entire multidisciplinary leadership team decided to join in the positive activity.

The benefits of rounding include real-time reporting of equipment issues, supply needs, questions about current events, and opportunities to recognize our outstanding staff members. The ability to build relationships with staff members who may not have been familiar with all leaders has resulted in feedback that has proven invaluable. Hospital leaders from each service area, like radiology or the lab, have been able to round on their service-line and have walked away with ideas to improve the end-user's workflow.

During rounds, leaders have the opportunity to coach in real-time for simple things such as dress code and professionalism or give positive feedback and recognition that is so well deserved. Every Monday during our daily huddle, the findings from the weekend are discussed and action items are assigned. Each leader is then charged with reporting back to their team any changes or processes that resulted from rounding.

“On several occasions, staff members have commented on how much they enjoy the rounding and how they feel that their opinions are important and that they are valued as employees,” says **Jana Semere, MSHA, BSN, RN**, Chief Nursing Officer, Bayou Region: Leonard J. Chabert Medical Center and Ochsner St. Anne Hospital. ***“We will continue leader rounding and plan to create opportunities to share the changes made as a result of rounding in employee forums and newsletters.”***

Leader rounding in the Bayou Region has resulted in more **meaningful presence**, allowing leaders to connect more effectively with staff on every shift.



Jana Semere, MSHA, BSN, RN
Chief Nursing Officer, Bayou Region:
Leonard J. Chabert Medical Center and
Ochsner St. Anne Hospital.

“One of the best ways to influence people is to make them feel important. Most people enjoy those rare moments when others make them feel important. It is one of the deepest human desires.” – **Roy T. Bennett, The Light in the Heart**

TRANSFORMING CARE AT THE BEDSIDE AT ST. BERNARD PARISH HOSPITAL



Janice Kishner, RN, MSN, MBA, FACHE,
Chief Clinical Officer, St. Bernard Parish Hospital

“During a charge nurse journal club meeting, we were discussing methods used at other hospitals to improve team collaboration and communication with our patients,” says **Janice Kishner, RN, MSN, MBA, FACHE**, Chief Clinical Officer, St. Bernard Parish Hospital, ***“and our Operations Coordinator for the Emergency Department, Robert Westerfield, RN, shared his previous experience with being part of a team that championed Transforming of Care at the Bedside (TCAB).”***



Reference Rutherford P, Moen R, Taylor J, *American Journal of Nursing*, 109(11): 5-17, 2009.

The Institute for Healthcare Improvement (IHI), in collaboration with the Robert Wood Johnson Foundation, launched the TCAB initiative in 2003, creating a framework designed to improve care at the bedside through safe, patient-centered care, vitality and teamwork, and value-added care processes. Recognizing the value of the evidence-based practice to improve communication, team collaboration, and the patient experience, leaders at St. Bernard Parish Hospital formed a multidisciplinary TCAB team to incorporate the TCAB framework into patient care in the 32-bed medical-surgical unit.

The TCAB team included a charge nurse, physical therapist, patient advocate, respiratory therapist, pharmacist, social worker, dietician, case manager and the bedside staff nurse. The team committed to visiting every newly admitted patient for multidisciplinary patient rounds. The goal of rounding was to establish the interdisciplinary plan of care and begin advanced discharge planning by assessing the patient’s transition of care needs and any socioeconomic and support systems challenges.

Caregivers assess and plan for any learning needs relative to medications and treatments, evaluate the patient’s compliance with the previous discharge plans, and assist with any financial or insurance coverage issues that may impede an effective discharge plan. During patient rounds, the TCAB team ensures that the patient and their significant other understand the goals of the care plan, encourages the patient and family to ask questions or express concerns, and updates the communication board.

The approximated discharge date is written on the communication board so the team and patient know that the entire team is working towards an effective transition to the next level of care. The TCAB team developed an education folder that stays on the bedside table that includes all teaching materials and follow up paperwork. In leader rounds, nurse leaders ask patients if their team has rounded on them and if they have any questions or concerns. Additionally, leaders verify that the communication boards are up-to-date and reflect the plan of care as described by the patient or significant others. ***“We believe this initiative has greatly improved team collaboration and we have seen improvements on our patient experience scores in categories such as ‘nurses listen carefully to you’, ‘communication about medication’, ‘care transitions’, and ‘good understanding managing health,’”*** says **Janice Kishner**.

“These improvements would not be possible without the amazing team we have and the great leaders and coaches we have bringing those best practices to the team and then supporting the team to consistently carry out those best practices. It is truly an honor to serve the community with such an amazing team and I am very excited for things to come.”

– Terrell Neal, MBA, BSN, RN, Chief Nursing Officer/Chief Operating Officer, St. Charles Parish Hospital



EVERY PATIENT, EVERY TIME AT ST. CHARLES PARISH HOSPITAL

“Every Patient, Every Time.” This is the mantra for staff members at St. Charles Parish Hospital (SCPH), from Chief Executive Officer, Austin Reeder. The SCPH team has been focused on getting it right for every patient every time and it is apparent when you interact with the team, with patients, and when you look at the outcomes the team has been able to produce for patients and staff. *“For our team, Every Patient, Every Time means providing all our patients and their family members and visitors with the very best experience and that we don’t allow them to be harmed under our watch,”* says **Terrell Neal, MBA, BSN, RN,** Chief Nursing Officer/Chief Operating Officer, St. Charles Parish Hospital.

The SCPH team has seen steady improvement of In-Patient Experience scores for “Rate the Hospital.” In 2016, the hospital performed at the 44th percentile; In 2017, improved to the 66th percentile, and in 2018 the team is performing at the 91st percentile. The SCPH team has also achieved improvement in Out-Patient Ambulatory Scores for “Recommend the Facility,” performing at the 29th percentile in 2017 and at the 79th percentile in 2018. Along with Patient Experience scores, in 2017 SCPH achieved all targets in the M7 In-Patient Quality bundle. The team is working towards the same goal in 2018, getting it right for Every Patient, Every Time which means allowing ZERO harm for our patient.

Patient-Centered Care in the Behavioral Health Unit

A large portion of the care provided at St. Charles Parish Hospital is in the In-Patient

Behavioral Health Unit (BHU). In 2018, the Nursing leadership team in BHU worked with staff members to implement new processes to improve the level of safety in the unit which is extremely crucial in such a vulnerable, high risk patient population. In addition to process changes like modifying the process for how the team completes every 15-minute safety checks, a validation process was implemented to ensure processes are successful and that patients are receiving the safest care. Since the institution of the validation process, the team has conducted just under 9,000 visual audits of the process to ensure our patients are safe.

Caring for Patients and Caregivers

Every Patient, Every Time, means SCPH team members are getting their needs met as well and are feeling engaged at work. This past year the SCPH Employee Engagement scores increased by 24% year-over-year and Culture of Safety Survey also increased by 10% year-over-year. At SCPH, the front-line team leads the way in partnering with patients to come up with ways to improve upon the services provided. SCPH has a very engaged front-line team, constantly making suggestions on ways to improve their work and the patient’s outcomes. Employees are empowered to share their voice and input on how to improve care through employee forums, leader rounding, senior leader rounding, and in rounds during meeting moratorium. Patients are very engaged as well. The Patient Family Advisory Council has partnered with the team on several initiatives over the past year to incorporate patient feedback into processes.

ENHANCING CARE COORDINATION FOR PATIENTS

In January 2018, St. Tammany Parish Hospital began a journey of transformational change to enhance Care Coordination for patients and position the organization to improve population health. Based on an assessment of the Care Coordination Department, **Kathy Felps DNS, RN**, Director of Nursing, Adult Health and **Julie Nevers MN, BSN**, Department Head of Care Coordination targeted strategies to redesign staff workflow, elevate the level of work product, eliminate variability, and improve throughput.

Nurse leaders also engaged Physician colleagues to discuss a clinical model with a goal to keep the patient at the center of care, enhance satisfaction, and streamline communication. As an outcome of these discussions, the team adopted the Accountable Care Unit Model, which places the Hospitalist, Nurse Manager, and RN Care Coordinator at the bedside for structured interdisciplinary rounds. Now, months later and still early into the journey, change is ever present. The team has seen improvements in staff workflow and continuity of patient care which is making a positive impact on patients.



Kathy Felps, DNS, RN
Director of Nursing, Adult Health,
St. Tammany Parish Hospital



Julie Nevers, MN, BSN
Department Head of Care
Coordination, St. Tammany
Parish Hospital



**Kerry K. Milton,
RN, MSHA**
Senior Vice President/
Chief Nursing Officer,
St. Tammany
Parish Hospital

“We had a system that needed improvement and felt fragmented and frustrating for our patients, their families, physicians, and our nursing staff. Instead, we wanted our RN Care Coordinators to serve as the Chief Navigators for the patient’s progression of care and transitions in care. What we needed was a shift in the role expectations of our workforce. We took that opportunity and ran with it.” -

Kerry K. Milton, RN, MSHA,
Senior Vice President/
Chief Nursing Officer,
St. Tammany Parish Hospital

New Clinic! The Cardiology Clinic at Ochsner LSU Health Shreveport

Ochsner LSU Health Shreveport brings new access to cardiology patients in the region. *“We are so excited that our nurses played a central role in the long-awaited renovation of the department of cardiology and the new Cardiology Clinic at Ochsner LSU Health Shreveport,”* says **Sheree Stephens, MSN, RN, CPHQ**, Chief Nursing Officer and Vice President of Quality, Ochsner LSU Health Shreveport. During the design phase, nurses were involved in renovations, selecting supplies, designing new templates, and hiring additional staff. The new clinic houses all cardiology services for the first time under one roof. The following clinics run five days a week in the new location: a mid-level driven Heart Failure service, EP & Arrhythmia/Device Clinic, General Cardiology clinic, and 3 new faculty clinics. Prior to the move, cardiology clinics were held at the Ambulatory Care Clinic and in the heart station in the hospital. Previously, the Heart Failure Service was located in two rooms in the main hospital, requiring a long walk for patients to be seen. The new clinic layout offers a dedicated registration area, two waiting areas, and fifteen exam rooms. The new clinic also offers patient parking and a circle drive for patient drop off, something many patients desperately need for easier access.

PATIENT
SAFETY



An automated external defibrillator (AED) and an emergency evacuation chair was placed near Ochsner's Center for Academics. The new emergency response equipment will provide a better response to medical emergencies that occur outside the inpatient setting.

“Many thanks to every member of the RCA and LEAN teams, quality and safety committees, and departments for their persistence and dedication in implementing a standardized process. These important stakeholders persevered until they arrived at these major improvements for patient safety throughout the campus.”

- Beth Walker, SVP COO,
Ochsner Medical Center,
executive sponsor of the
LEAN project.

EMPOWERING A CULTURE OF PATIENT SAFETY IN THE AMBULATORY SETTING:

Redesigning Rescue and Resuscitation Procedures to Respond to Non-Inpatient Medical Emergencies

In 2018, the Ambulatory Nursing team worked in collaboration with the Performance Improvement (PI) department and representatives from the multidisciplinary team across the Ochsner Medical Center to redesign the process for responding to medical emergencies that occur outside of the inpatient hospital setting at Ochsner Medical Center.

Ambulatory Nursing, the PI department, and the Resuscitation Committee appointees reviewed Safety on Site (SOS) reports submitted by staff members regarding rescue calls and resuscitations that had been carried out for patients, visitors and even members of the care team. SOS reports, Ochsner's early warning incident reporting system that alerts staff members to opportunities for safety improvements, described challenges faced by rescuers. The workgroup reviewed barriers to resuscitation efforts and collaborated with the OMC - Patient Safety Executive Council (PSEC), a multidisciplinary committee chaired by **Dr. Armin Schubert, MD, VPMA** Anesthesiology, to analyze causes that brought about challenges and opportunities for improvement using LEAN tools and Root Cause Analysis methodology.

“We recognized an opportunity to standardize our procedures for emergency response in the ambulatory setting,” says **Shirley Divinity, RN-APN, MN, MS-HCM, CPHM**, Manager, Performance Improvement. “We worked with the multidisciplinary team to implement a new process that empowers our team to provide safe, consistent care during emergencies that occur outside of the hospital setting.” As of May 1, 2018, principal improvements implemented as part of the redesigned rescue and resuscitation procedures for the Ochsner Medical Center include:

- ONE NUMBER for the entire campus: To Summon Help Just Call 4444.
- Standardization of team composition and qualifications.
- A standardized script and procedure for operators answering the calls.
- A uniform algorithm for initial response and higher level of care.
- Strategically placed AEDs and emergency equipment.
- Simple and effective signage directing personnel to resources for emergency response.
- Easy-to-operate call towers for emergency calls throughout the campus.
- Emergency evacuation chair for rescue and transport from bridge to academic center.



Shirley Divinity, RN-APN, MN, MS-HCM, CPHM, Quality Manager
Center for Quality Excellence
Office.

STRENGTHENING THE CULTURE OF SAFETY THROUGH OCHSNER MEDICAL CENTER – NORTH SHORE SAFETY ADVISORY COMMITTEE

In 2016, the Ochsner Medical Center – North Shore (OMC – North Shore) Safety Committee recognized the opportunity to increase the impact of the committee and strengthen the culture of safety for the entire hospital. The Safety Committee was intended to identify and address important safety issues and was comprised of Directors and Managers from various clinical units and non-clinical areas. At the time, committee members struggled with a lack of attendance at

“The OMC-North Shore Safety Advisory Committee helps our team address and resolve safety concerns effectively. Nurses are empowered by the administrative leadership team to be the eyes and ears of safety for the OMC-NS campus through participation in the committee. Each week more team members express interest in becoming a part of the Safety Advisory Committee which has resulted in an annual rotation of membership to encourage all staff members to serve as safety advisors on the committee.”



– **Cheryl Woods, DNP, MSN, RN**, Chief Nursing Officer, Ochsner Medical Center – North Shore

meetings from representatives across the hospital and wasted minutes spent reminding leaders to attend. Committee members also found that safety concerns that had been identified through other methods bypassed this important committee.

OMC – North Shore nursing leaders discussed ways to improve the committee to ensure it was an effective outlet for improving safety

concerns and gained insight from a new Board member, Mr. Freddie Douglas. Mr. Douglas is the Safety Officer for the National Aeronautics and Space Administration (NASA) at the John C. Stennis Space Center, one of the most highly reliable organizations in the country. Mr. Douglas shared NASA’s approach to safety and the OMC – North Shore team had the opportunity to visit NASA to learn about the NASA safety model.

Learning from NASA

OMC – North Shore leaders learned that the NASA safety meeting was led by staff level representatives with leader oversight. NASA staff members led and directed conversations during safety meetings and each area of the facility was represented. NASA’s committee devoted time to ensuring that their employees were not only safe while working, but also safe in getting to and from work and while at home.

The Safety Committee Redesign

After visiting NASA, OMC – North Shore leaders made the decision to completely redesign the Safety Committee. To expand membership and empower front-line staff members, directors from across the hospital were asked to nominate 2-3 staff level individuals to become members of the new Safety Advisory Committee. During the first meeting in March 2017, approximately 10-12 nominated members attended. Safety concerns were brought forward by the group and the issue was immediately addressed.

By the second meeting, more interest had been generated and the meeting was standing room only. Committee members decided that going forward, leaders would not be present unless they were invited to attend. Members of the re-designed committee drafted a charter outlining the members’ responsibility of bringing forth to the committee any type of safety issues that could impact patients, visitors, physicians, and staff members. Month after month, the meeting room has been filled to capacity and in the first 6 months of existence, the Safety Advisory Committee identified 13 significant safety issues that were effectively addressed and resolved.



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The OMC - North Shore team stands in front of the rocket that will go to Mars in the near future while visiting NASA to learn about the NASA safety model. Pictured from left to right: Dr. James Newcomb, MD, (VPMA), Pattsey Rice, BSN, RN, (Retired), Julia Lavigne, MSN, RN, Director of Quality, Cheryl Woods, DNP, MSN, RN, CNO, and Freddie Douglas, III, Director, Safety and Mission Assurance Directorate, NASA.



PROGRESSIONS IN ADVANCING CARE AND THE NURSING PROFESSION

THE VIRTUAL INNOVATIVE PATIENT (VIP) CARE MODEL SUPPORTS PATIENT CARE IN THE MEDICAL SURGICAL/TELEMETRY UNITS AT OCHSNER MEDICAL CENTER – KENNER

The Nursing team at Ochsner Medical Center – Kenner (OMC – Kenner) is piloting a new program for the system that will support nursing care in their Medical Surgical and Telemetry Units, enhance the patient experience, improve quality, and create new opportunities for nurses. This project has been possible through a partnership with the IS, Epic, Telemedicine, Nursing Informatics, and Nursing Pursuit of Value teams. Virtual Innovative Patient (VIP) Care model will introduce virtual nurses as part of a redesigned patient care team and an innovative technology platform. The VIP pilot launched in October 2018 starting with 24 Medical Surgical/Telemetry beds and plans to increase to 74 by January 2019.

What does the VIP Care model look like?

VIP Care includes a virtual nurse who is assigned a team of patients and is responsible for remote monitoring throughout the shift. The virtual nurses perform monitoring support from a specially designed location away from the direct patient care area, using monitors with views of the patient rooms, telemetry, EPIC, and a dashboard. The virtual nurse will provide education, round with the team, assist with admission assessment, validate documentation or support new nurses. Patients, families and the patient care team will be able to access the virtual nurse by tapping the monitor touch screen or iPad that will be available in the room.

This program offers our most experienced nurses a unique opportunity to practice with less physical demands while sharing their valuable expertise. *“This is an exciting time for the Medical-Surgical and Telemetry units at OMC – Kenner. The team has designed & implemented a unique model of care augmented with the latest technology to enhance both quality and patient experience while balancing the workload of the staff and allowing all team members to function at the top of their license and/or certification,”* shares **Nattie Leger**, AVP Supply Chain Nursing.

The plan is for one virtual nurse to serve approximately 18-24 patients. Each room will be equipped with a touch screen monitor, camera, speaker and iPad.

“This revolutionary care technology paired with a redesigned delivery model will help us continue to improve quality and further advance the patient experience. Thank you to the Med Surg/Telemetry care teams who always put our PATIENTS FIRST. We’re excited to be able to pilot this at our campus and lead innovation as we advance this platform to include additional applications and enhancements across the system,”

- **Sylvia Hartmann**,
MN, RN, NEA-
BC, Chief Nursing
Officer, Ochsner
Medical Center –
Kenner.





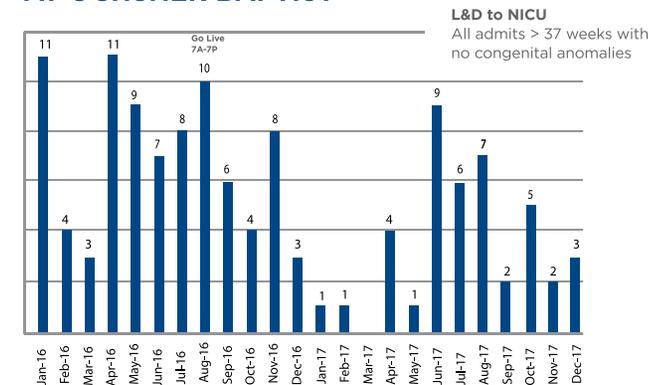
With Ochsner's TeleStorkSM program, a service of the Maternal Fetal Medicine team, nurses provide remote fetal monitoring and uninterrupted surveillance of fetal electronic strips.



“We know that the use of telemedicine improves patient safety,” says **Donna Martin, MSN-HCSM, RN,** Chief Nursing Officer, Ochsner Baptist*, *“and with TeleStorkSM, we provide*

an added level of safety and support for patients in labor through remote monitoring.”

2016-2017 NICU ADMISSION PERCENTAGES AT OCHSNER BAPTIST



TELESTORKSM:

Remote Monitoring of Mothers in Labor at Ochsner Baptist*

Ochsner's TeleStorkSM program, a service of the Maternal Fetal Medicine team, provides unmatched specialized care to ensure healthy outcomes for pregnant patients. The multidisciplinary team at Ochsner Baptist* recognized a need for additional observation in Labor and Deliver Units and created TeleStorkSM. TeleStorkSM incorporates live streaming of fetal tracings with up-to-date patient information to a TeleStorkSM registered nurse located on a separate remote bunker.

Nurses monitor mothers in labor 24/7 from the TeleStorkSM bunker allowing them to assist with fetal strip interpretation, bring real time emergencies to front line nurses, and quickly identify labor distress to allow for rapid intervention. Early identification of distress and rapid interventions minimize complications during delivery and lead to improved birth outcomes for babies, such as decreased admissions to the Neonatal Intensive Care Unit (NICU).

With TeleStorkSM, the Ochsner Baptist* L&D team has seen over a 50% decrease in NICU admissions. Since launching the TeleStorkSM bunker in 2016, the decrease in the percentage of NICU admissions is below the national average. Bedside nurses have expressed feeling relieved to have the added monitoring and support from TeleStorkSM nurses.

With positive outcomes from TeleStorkSM at Ochsner Baptist*, the telemedicine program was scaled and implemented at Ochsner's four local community and rural hospitals in 2016. In 2017, the program was expanded across the system, meaning every laboring patient on a monitor at every campus is monitored by a TeleStorkSM registered nurse in the remote monitoring bunker at Ochsner Baptist*. Future plans include partnering with rural hospitals in Louisiana and Mississippi to assist in monitoring high risk patients. Additionally, telemonitoring will be offered to new nurse orientation with 12 hours of TeleStorkSM bunker observation for new graduate nurses. The TeleStorkSM team is also collaborating with nurses around the system to improve communication with remote facilities.

* A Campus of Ochsner Medical Center

The Value of Ochsner's Electronic Intensive Care Unit (EICU) Nurses and the Telesitter Program

EICU nurses provide proactive patient care for patients in every intensive care throughout the system and support bedside nurses from the EICU Bunker located at Ochsner's Elmwood Campus 24/7. EICU nurses round on patients, perform chart reviews, ensure best practices, and are available to react during emergencies and assist with documentation.

One Nurse's Story

Shelli Gravois BSN, RN Intensive Care Unit, St. Charles Parish Hospital shares her story about the value of EICU remote nurses: *"Working nights, I am very thankful for the availability and assistance provided by the EICU nurse and doctor during the shift. Recently, I had a patient in the unit who was quickly deteriorating. The EICU nurse and doctor were readily available throughout the entire shift, following the patient's case closely and making changes in the plan of care as needed. When the patient went into cardiac arrest towards the end of the shift, the EICU doctor and nurse were right there in the room through remote monitoring cameras, along with our team. The EICU nurse was very helpful with charting the code events and the doctor assisted during the code and care of the patient afterward. Having these valuable resources available to assist in providing the best care possible to our patients gives me peace of mind during every shift I work."*

"Remote nurses in the EICU bunker are doing more than monitoring. They are using software that offers high level surveillance of a patient's vital sign trends, providing more detail about patients and red flags that may indicate a need for early intervention," says **Anita Campbell, MSN, RN, CCRN**, Nursing Director, EICU. *"And through Ochsner's Telesitter program, that launched in 2016, Patient Safety Assistants monitor patients in medical-surgical units across the system remotely from the EICU bunker. The Telesitter program pairs technology to provide safety and decrease falls utilizing a Patient Safety Assistant who monitors 12 patients each."*

Since the beginning of the EICU and Telesitter programs, results show:

- 26% reduction in overall System Fall Rate
- 51% reduction in Unit Fall Rates participating in the Telesitter Program
- 91% of Ochsner patients are less likely to fall (remain safe) due to the Telesitter Program

These programs have also collaborated with TelestorkTM and Virtual Innovative Patient (VIP) Care sharing lessons learned and ongoing inpatient telemedicine best practices.

"It feels good to help nurses and to know that the support I offer allows the bedside nurse to be more present with the patient." - Wayne Noveh, Jr., RN Critical Care, EICU.

EDUCATION FOR EVERY PHASE OF A NURSING CAREER

System Nursing Professional Development (SNPD) provides Ochsner nurses and staff with continuing education opportunities and structured professional development programs to foster personal and professional growth. Ochsner nurses are dedicated to education at every stage of their careers – from novice to expert – and people are taking note. The quality of Ochsner’s System Nursing Professional Development Department was recognized through presentation at the American Nurses Credentialing Center (ANCC) professional conference in May 2018. The Nurse Residency Program, which supports new nurses as they transition to nursing practice, also achieved accreditation from the ANCC in 2017 as a Practice Transition Program.

One of the reasons nurses choose careers at Ochsner is for these significant educational resources. In 2017, 5,143 Ochsner nurses participated in Continuing Nursing Education (CNE) classes across the system and through August 2018, 4,104 nurses completed CNE classes. And in 2017, nearly 1,000 nurses participated in the Clinical Ladder Program, which recognizes and rewards professional development, nursing professionalism and the application of clinical nursing expertise in direct patient care.

With the opening of the new Chamberlain University College of Nursing at Ochsner Health System earlier this year, the Ochsner team looks forward to bringing new, highly-qualified nurses into our system to better care for our patients and reduce what has become a serious nursing shortage across our region.

“Through nursing professional development programs, we cultivate a culture of life-long learning and support evidence-based nursing practice to improve the quality of care for our patients and enrich the lives of nurses. Our programs provide nurses with the unique opportunity to engage with and learn from our nursing leaders and nurse educators across Ochsner Health System, who value time spent mentoring nursing leaders of the future,”

says **Ann Lockhart, MN, RN-BC, AVP** Nursing Practice, System Nursing Professional Development and Nursing Informatics, Ochsner Health System



Ochsner’s Clinical Simulation and Patient Safety Center:

A well-considered approach to continuum of care went into Ochsner’s Clinical Simulation Center’s design, so that an actual patient experience can be simulated during each clinical stage - from admitting to triage, emergency medicine, operating room, and ICU/CCU. During every clinical stage, task training and high-fidelity simulation are thoughtfully incorporated to provide a fully immersive experience. The 8,500 square foot, two floor Simulation Center is located in the Center for Academics across from Ochsner Medical Center, located at Jefferson Highway, and hosts 16 immersive simulation rooms along with classroom space. The goal is to allow various learners to develop professionally and within teams to improve patient safety as much as possible.

Nurse Legislative Day

One unique opportunity offered through SNPD is Nurse Legislative Day, a program that empowers nurses with raised awareness of the legislative process. The program is offered as part of SNPD’s Executive Nurse Strategy Series that keeps nurse leaders informed and connected with peers throughout Ochsner Health System. Over the past two years, Nurse Legislative Day has welcomed guest speakers such as **Dr. Karen C. Lyon, PhD, APRN, NEA.**, Executive Director of the Louisiana State Board of Nursing (LSBN), **Jennifer Wright, DNP, APRN, FNP-BC**, Chief Nursing Officer, LSBN, and **Catherine Levendis, JD, AVP**, Public Health Policy, Government Relations, Ochsner Health System.

During these presentations, our nurses learn about the nurse leader’s role as partner to the LSBN, advocacy efforts by LSBN to advance nursing practice, education, and leadership, legislative updates, and federal health reform legislation. **Jeffrey Hamilton, MSN, MBA, RN, OLI- RN Consultant**, System Nursing Professional Development and coordinator for Nurse Legislative Day, says, *“Our nurses enjoy staying informed on legislative issues and look forward to this program each year.”* Nurses can learn about current legislative activity, how to get involved in health policy, and find resources on the Louisiana State Nurses Association (LSNA) website, here: <https://www.lsna.org/health-policy/> or on the American Nurses Association Government Affairs website, here: <https://www.nursingworld.org/practice-policy/advocacy/state/>.



“It is so important for nurses to be aware of and engaged in the policymaking process at all levels. Decisionmakers very much need and want the expertise of practicing health professionals to inform new legislative and regulatory proposals. This direct input is crucial in creating sound healthcare policy that best serves

our providers and ultimately our patients.”

– **Catherine Levendis, AVP**, Public Health Policy, Government Relations, Ochsner Health System

Preparing Our Future Nurses: Chamberlain University College of Nursing at Ochsner Health System

In 2018, Ochsner Health System and Chamberlain University celebrated the opening of a new school of nursing in New Orleans. Chamberlain University College of Nursing at Ochsner Health System is located on the West Campus of Ochsner Medical Center. The new campus is Chamberlain's first in Louisiana and its 21st campus in the country.

"This affiliation creates a unique and proactive opportunity to fulfill the demand for nurses through a new program that encompasses interdisciplinary learning and simulation training that supports clinical experiences for nursing students," says **Tracey Moffatt, MHA, BSN, RN**, System Chief Nursing Officer and Vice President of Quality for Ochsner Health System. Over the past several years, statewide nursing education capacity reports indicate that well over 1,400 *qualified* nursing students have been denied admission into Louisiana pre-RN licensure programs due to lack of capacity. Chamberlain University College of Nursing at Ochsner Health System expands baccalaureate nursing education opportunities in New Orleans, addressing the current nursing shortage Louisiana is facing and providing the Chamberlain Care® culture and robust support for student success.

Chamberlain's inaugural class began April 30, 2018. The Chamberlain Bachelor of Science in Nursing (BSN) degree program is different from most in that it provides direct entry into a nursing program. The program is designed to be completed in as few as three years of year-round study. *"The alliance continues to provide opportunities for our nursing students and to impact our community,"* says **Bruce Smith**, Dean, Campus Operations, *"Chamberlain has participated in nursing educational events partnering with Ochsner's Academic Outreach in the STAR Program, Nursing Day with YouthForce NOLA, and the Regional HOSA Meeting at Ochsner Medical Center. Our students have also participated in activities like Code Yellow and HAZMAT exercises at Ochsner Medical Center, which only enhance their educational journey."*

Through a Joint Advisory Committee, Ochsner and Chamberlain nursing leaders have the opportunity to partner on nursing strategy and curriculum. Ochsner nurses have access to a variety of post-licensure degree programs at Chamberlain, including the RN to BSN Online Degree Completion Option, Master of Science in Nursing (MSN) and Doctor of Nursing Practice (DNP), receiving special tuition pricing for these programs. To learn more about pursuing a nursing degree, please visit: https://www.chamberlain.edu/nursing-school/louisiana/New-Orleans?utm_source=neworleans&utm_medium=unknown&utm_campaign=vanityurl.



The Chamberlain University College of Nursing at Ochsner Health System program features Chamberlain's SIMCARE CENTER™, providing high-tech simulated patient care in clinical learning environments for students.

"We are thrilled to begin this exciting new chapter through an educational alliance with Ochsner Health System. Together, we will focus on improving patient care through strong academic-service collaboration in areas like evidence-based practice, nursing research, interprofessional education and care teams, and testing new models for transitioning Chamberlain students into nursing practice."

– **Jennifer Couvillon, PhD, MSN, RN-BC**,
Campus President, Chamberlain University College of Nursing at
Ochsner Health System

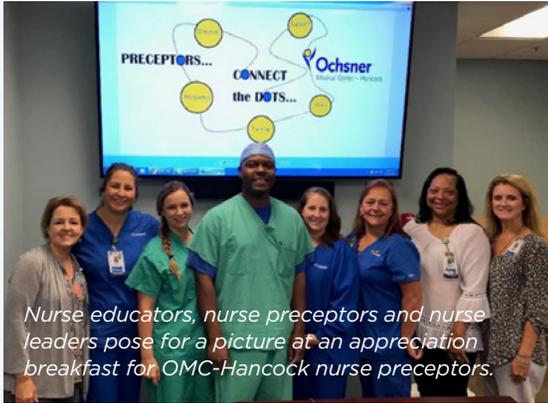
Dr. Couvillon transitioned from her role at Ochsner in 2018 to lead the new school of nursing.

"Ochsner has a long history as a leading academic medical center demonstrating a consistent commitment to train the next generation of physicians, nurses, leaders and employees. This partnership is a natural extension of our commitment to prepare the caregivers of the future and continue the high-quality care provided to our patients. As the healthcare destination for our state and for our region, expanding affiliations with strong nursing education programs provides an opportunity to further elevate the nursing profession across Ochsner."

– **Warner Thomas**, President and CEO, Ochsner Health System



The Advantage of Being Part of a System



Nurse educators, nurse preceptors and nurse leaders pose for a picture at an appreciation breakfast for OMC-Hancock nurse preceptors.

At **Ochsner Medical Center – Hancock**, the Nursing Education Department made support for nurse preceptors a priority and committed to expanding the opportunity to participate in the Preceptor

Academy to all nurse preceptors. The Preceptor Academy is a day-long training that covers topics such as managing communication, mastering the teach-back method, identifying hospital resources, and a self-assessment designed to increase understanding into personality styles. *“The Preceptor Academy strengthens the orientation process by providing consistent education to preceptors who train and orient nurses at the bedside,”* says **Stuart Redfearn, MSN, RN** Clinical Educator, System Nursing Professional Development. **Marion Brewer, RN**, OMC – Hancock, who completed the training said that she found Preceptor Academy inspiring and felt it prepared her to precept using effective tools.

Since 2018, the NPD team at OMC – Hancock has been able to identify and train 15 preceptors that cover all nursing units—ICU, Medical Surgical, PACU, OR, Emergency Department and Women’s Services. OMC – Hancock now has a resource for each unit who provides the support of a consistent team member committed to performing in the roles of: Educator, Role Model, Protector, Evaluator, and Socializer.

Nursing leaders and the OMC – Hancock Nursing Education department hosted a celebration and appreciation breakfast for nurse preceptors. *“We are so excited to be a part of Ochsner Health System. We have been truly blessed by the outpouring of knowledge, the willingness to share information, and the support that System Nursing Professional Development has provided our facility and staff,”* says **Brenda Steudlein, BSN, RN, CAPA**, RN Education Coordinator, OMC – Hancock.

Ochsner’s Nursing Integration Councils

Ochsner’s Nursing Integration Council model offers a forum to share best practice between service line nursing leaders. Each year, nurse leaders, educators, and informaticists collaborate to ensure the use of best practices in each clinical specialty throughout the system. The integration councils report to the CNO Council and make recommendations to improve system processes, nursing education, and care delivery. Here are several examples from system integration council work in 2017 and 2018:

System Education Council focused on Using Case Studies in Annual Nursing Education and Professional Presentations.

Emergency Council focused on Sharing Best Practices in Patient Experience Across the System and Improving Charting and Workflows.

Respiratory Council focused on Using the SimCenter to Train Respiratory Care Team.

Surgery Council focused on Using Text Notifications During Procedure to Keep Families Informed, Improve Patient Experience, and Implementing New Blood Scanning Procedure.

Wound Care Council focused on Preventing Pressure Injuries Using Braden Subscales and Written Order Guidelines

Spiritual Care Council focused on Supporting Multi-faith Chapels and Sacred Spaces

Nursing Informatics: Working Together to Enhance Patient Care and Ease Nursing Practice

In the past year, Ochsner’s System Nursing Informatics team has worked collaboratively with multiple disciplines to enhance the use of technology for nurses at the bedside. This year, our Nursing Informatics team, nurse educators, pharmacists and others have collaborated across the system on multiple medication safety initiatives which will improve patient care and ease the practice of nursing efficiency. Some of these medication safety initiatives included infusion pump upgrades with standardization of drug libraries, response to national medication and equipment shortages, enhancements to a web-based nursing medication management application, implementation of wireless glucometers, increasing use of barcode scanning of medication and blood products, and improvements to infusion pump safety features. Together we are changing lives!



“The value of being a part of Ochsner Health System goes well beyond improving patient safety and quality outcomes for our patients. It creates educational and training opportunities to facilitate our nurses to continue to develop professionally. The resources directed to the Nursing Professional Development (NPD) department at Ochsner Medical Center Hancock have made an instant impact on the lives of our staff, patients, and community we serve. Learning is a lifelong endeavor and we are thankful to have the opportunity to invest in our nursing staff with quality professional development offerings and to improve the lives of our patients.”

– **Kimberly Varnado**, Chief Nursing Officer, Ochsner Medical Center – Hancock.

THE CENTER FOR EVIDENCE BASED PRACTICE (EBP) AND NURSING RESEARCH

Nurses Share Innovations and Best Practices in Healthcare at Ochsner's Annual Evidence Based Practice (EBP) Research Conference

Each year, Ochsner hosts the EBP/Research Conference. The conference offers nurses the opportunity to disseminate scientific evidence and to engage nurses at all levels in scholarly discussion about improving patient experience, promoting population health and reducing healthcare delivery cost. Additionally, the professional conference is an excellent opportunity to network and learn from nursing colleagues from across the United States and abroad. The 2017 keynote speaker was Janice Palaganas, PhD, RN, the Director of Educational Innovation and Development for the Center for Medical Simulation in Boston, and Lecturer for Harvard Medical School. She spoke about using simulation for teaching interprofessional care.

“The most valuable part is the line-up of informed and passionate speakers. Each year, the keynote speaker provides new information and new insight into what nurses can accomplish using Evidence Based Practice. Attendees are empowered to think outside the box after listening to these forward thinkers. One of my favorite parts of each conference has been seeing new nurses from the Nurse Residency program enjoy participating as poster presenters”

– **Dottie Landry, MSN, RN**, Clinical Research Coordinator and Clinical Education Specialist, L.J. Chabert Medical Center



“Our department’s goal is to facilitate growth in nurses’ EBP and research competencies to move beyond knowledge of the principles to understanding how to apply these in practice. These are the steps for changing practice and improving outcomes for our patients.” – **Jessica Peterson, PhD, RN**, Senior Nurse Researcher, Center for Evidence Based Practice and Nursing Research, Ochsner Health System



The Center for Evidence Based Practice and Nursing Research encourages you to embrace the opportunity to access the many services we provide to engage nurses in EBP and research opportunities. We are available to assist with work-related projects, academic-related assignments as you pursue higher education and accrue clinical ladder points.

- Internet resources and online help: <http://research.ochsner.org/nursing>.
- Research & EBP project proposal development.
- Peer review of abstracts, manuscripts, and presentations.
- Request a consult: https://is.gd/CENR_request



The Ochsner Nursing team leading the planning and implementation of the new surgical hospital includes Stephanie Debarbieris, MSN, RN, CEN, NE-BC, AVP Nursing, Angie Baldrige, RN, CNOR, Director of Sterile Processing, Holly Paline, RN, CAPA, Director of Peri-Operative Services, and Jennifer Milam, MSN, RN, Director of Peri-Operative Services - Ochsner Medical Complex - High Grove

NEW FACILITY! OCHSNER IS COMMITTED TO THE BATON ROUGE COMMUNITY

Ochsner Medical Complex – High Grove is a five-story medical office building and a next-generation surgical hospital. The complex will offer Primary & Specialty Care, Full-Service Diagnostics, Surgical Suites & Non-Invasive Procedure Rooms, Physical & Occupational Therapy, Infusion, Retail Pharmacy, Vision Center and an O Bar. Physicians begin seeing patients on January 15, 2019 for office visits. With an O Bar onsite, Digital Medicine and Virtual Visits will become a fixture, enabling patients to take control of their healthcare when and where it's convenient for them.

The surgical hospital is scheduled to open in Summer 2019 and will feature four surgical suites, two endoscopy suites and two interventional pain rooms. The Operating Room has been pre-designated as a Stryker Surgical Suite Showplace Facility. The hospital features 10 patient rooms offering patient-centered care using the groundbreaking model for Ochsner Optimal Hospital. Optimal Hospital reimagines traditional inpatient operations with the patient at the center and is designed to improve the entire patient experience focusing on safety, quality and comfort.



“We are excited about the opening of the new facility and the opportunity to expand our services for the Baton Rouge community. Nursing leaders have been engaged and leading in the design of both the facility and the care delivery model in this state-of-the-art complex.”

– Dianne Teal, MSN, RN, NEA-BC, FACHE, Chief Nursing Officer, Ochsner Medical Center – Baton Rouge.

Innovative Devices and Materials for Optimal Hospital at Ochsner Medical Complex – High Grove



PATIENT TABLETS: Patients are offered tablets to view their health data and daily schedule, learn about their care team and condition, take notes, and request comfort items, as well as access select entertainment portals, giving them greater control over their care and experience.



QUIET HOURS AND RED NIGHT LIGHTING: Sleep is integral to healing. Nightly “quiet hours” are observed and monitored to minimize noise disturbances that can awaken patients. When checking on patients at night, staff use red night lighting, which is less disruptive to circadian rhythms than standard blue or white lighting, to minimize patient disruption.



COPPER-INFUSED LINENS AND SURFACES: Copper is naturally antimicrobial, shown to kill 99.9% of bacteria within two hours of contact, as well as many viruses and fungi. Infusing sheets, gowns, towels and surfaces, like table tops and grab bars, with copper takes advantage of these properties, reducing the risk of infections.



STAFF SMART DEVICES: Physicians and nurses can instantly receive vitals alarms and alerts, review patient lists, check conditions, retrieve records, evaluate test results, confirm treatments and coordinate care from their smartphones, tablets, and smart watches using apps that connect them to each other and to our electronic health record system.



RECOGNIZING AND CELEBRATING OCHSNER NURSES

2017 SPIRIT OF LEADERSHIP NURSE OF THE YEAR IS KENESHA BRADLEY, RN, APRN, ACNS-BC

Each year, Ochsner's Spirit of Leadership Awards program honors employees who stand out from the rest in engagement, leadership qualities and actively living our Core Values.

The 2017 Spirit of Leadership Nurse of the Year award went to **Keneshia Bradley, RN, APRN, ACNS-BC**, Clinical Nurse Specialist, Ochsner Medical Center – West Bank Campus, Nursing Administration. Keneshia began her nursing career in the medical-surgical unit and quickly rose to the role of charge nurse. Since accepting the role as the first Certified Nurse Specialist at Ochsner Medical Center – West Bank Campus, Keneshia has made an impact on numerous nurses, patient care technicians and other caregivers. *“Keneshia Bradley, CNS has a sense of curiosity about learning and teaching that is infectious,”* says **Melissa M. Adams, RN, BSN, BS, MHCA, CNO**, Ochsner Medical Center – West Bank Campus. Keneshia has reignited the Interdisciplinary Care Committee by providing a session on Evidence-based practice to enhance each team's knowledge of process improvement and research of best practices. She formed the Interdisciplinary Falls Team where she led many successful innovative initiatives to reduce falls such as the activity boxes for patients with dementia and the remote camera and sitter to monitor patients who are at highest risk for falls. Keneshia is a Green Belt in LEAN and has facilitated many workouts and Kaizen events. Keneshia is always available when asked to facilitate or co-facilitate a team as she views every opportunity as an opportunity to satisfy her quest for increasing her knowledge and the knowledge of others. Keneshia is a joy to work with and an inspiration to all who meet and work with her.”

“For those of you who work with Keneshia, you know that she's not one to brag about herself,” says **Tracey Moffatt, MHA, BSN, RN**, System CNO and VP of Quality. “When recently asked how she felt about the award she showed her true humility that is at the core of many great nurses, *“I don't do what I do for recognition. I do it for the patients.”* Keneshia has been with Ochsner since 2009 and she says that she believes that “nursing found her.” After realizing that pre-med wasn't the right fit, a friend recommended that she should consider nursing as a career and she has loved it ever since. She says her favorite part of her job is learning about barriers that her colleagues experience. *“The fact that someone trusts me enough to help, makes me want to get it done right the first time. It gives me great satisfaction!”*



CELEBRATING OCHSNER REGISTERED NURSES NAMED AMONG THE “GREAT 100 NURSES OF LOUISIANA!”

Ochsner is always proud to see so many of our nurses recognized by the Great 100 Nurses of Louisiana Foundation. The Great 100 Nurses of Louisiana Foundation was founded in New Orleans in 1986 as a way to recognize outstanding nurses and their accomplishments and successes. The honorees are selected by their peers and patients, based on their concern for humanity, their contributions to the profession of nursing, and their mentoring of others. In the 2017-2018 ceremonies, 54 Ochsner affiliated nurses were named Great 100 Nurses of Louisiana.

[Click here to watch a video of Ochsner's Great 100 Nurses, 2018](#)

Photo above, right: The 2017 Great 100 Nurses of Louisiana

Photo below, right: The 2018 Great 100 Nurses of Louisiana



2017 GREAT 100 NURSES OF LOUISIANA

OCHSNER BAPTIST*

Leslie Chirinos
Lisa Dickens
Gina Kanzig
Elizabeth Licata
Lacie Rivere

OMC - BATON ROUGE

David Howell
Kayla Rogers

L.J CHABERT

Kate Baumann

OCHSNER MEDICAL CENTER

Amy Belknap
Lori Besselman
Theresa Buchert
Albertina Burgos
Michelle DeFrisco
(Ochsner Health Center for Children-
New Orleans)
Rachel Ferguson
Angie Hakenjos
Heather Rouyer
Felicia Stevens
Dominique Yancey

OMC - KENNER

Ashley Abboud
Julie Delaney
Deshine McGlothlin

OMC - NORTH SHORE

Jamie Macheca

OMC - WEST BANK CAMPUS

Natalie Beasley
Nancy Caillouet
Juie Hess
Melanie Kendrick

OCHSNER HEALTH SYSTEM

Andrea Thibodeaux
(Nursing Informatics)
Jeffrey Hamilton
(System Nursing Professional
Development)

PARTNER HOSPITALS: TERREBONNE GENERAL MEDICAL CENTER

Kerrie Raymond

ST. TAMMANY PARISH HOSPITAL**

Christine Bromley
Donna Mayeux
Nicole Sesser

ST. CHARLES PARISH HOSPITAL***

Crystal Davis Taylor

2018 GREAT 100 NURSES OF LOUISIANA

OCHSNER BAPTIST*

Kiyan McCormick
Ashley Monteleone
Joan Jarreau
Brittany Sweeney
Phylis Panquerne

OCHSNER HEALTH SYSTEM

Jennie Miele (System
Nursing Professional
Development)
Ahnyel Jones-Burkes
(Center for Quality
Excellence)

OCHSNER MEDICAL CENTER

Amy Belknap
Nicky Culotta
Sylvia Laudun
Amy Finnegan
Terry Tate
Kendall Young
Mary Harvey
Jillian MacMahon

OMC - KENNER

Holly Chuter

OMC - WEST BANK CAMPUS

Megan Olsen

OCHSNER ST. ANNE HOSPITAL

Shannon Atkinson

SLIDELL MEMORIAL HOSPITAL**

Shelly Dolan

ST. BERNARD PARISH HOSPITAL***

Luke Cenac

ST. TAMMANY PARISH HOSPITAL**

Adam Allen
Michelle Theard

CONGRATULATIONS TO OCHSNER AFFILIATED NURSES RECOGNIZED AS NEW ORLEANS CITY BUSINESS HEALTHCARE HEROES!

New Orleans City Business honors outstanding men and women in the health care industry whose contributions have increased the well-being of the community every year. The 2018 Ochsner Health System and partner honorees include **Stephanie Bush, RN**, Ochsner Medical Center, **Cate Dwight, RN**, St. Tammany Parish Hospital, **Euclide D. Gaines, Jr, RN**, St. Bernard Parish Hospital. Ochsner Health System and partner honorees also include **Dr. Nicholas DiSalvo**, Ochsner Baptist*, **Dr. Marianne Maumus**, Ochsner Health System, and **Jennifer Couvillon**, Chamberlain University College of Nursing

* A Campus of Ochsner Medical Center

** Affiliated with Ochsner Health System

***Managed by Ochsner Health System

CONGRATULATIONS TO OCHSNER HEALTH SYSTEM AND THE OCHSNER NURSING TEAM RECOGNIZED AT THE 2018 LOUISIANA STATE NURSES ASSOCIATION (LSNA) NIGHTINGALE GALA!

Each year, nurses and organizations that employ nurses throughout the state of Louisiana are recognized among their peers for excellence in nursing at the Annual Nightingale Gala. On March 3rd, 2018, Ochsner Health System and 11 Ochsner Nurses were celebrated as nominees at the 2018 LSNA Nightingale Gala. The Nightingale Gala, hosted by the Louisiana Nurses Foundation, was held at the Renaissance Hotel in Baton Rouge, LA. Ochsner nurse nominees joined family, friends, colleagues, and Ochsner's Chief Nursing Officers, to celebrate the occasion. Congratulations to all Ochsner Nurse Nightingale Nominees!

In 2018, Ochsner Health System was recognized as LSNA Hospital of the Year (161 beds or greater).

"Hospital of the Year (161 beds or greater): This award recognizes a hospital employer of registered nurses that demonstrates recognition of professional nursing and innovation in leadership in the described licensed bed categories." LSNA, 2018.

Ahnyel Jones-Burkes, RN, was recognized as LSNA Registered Nurse of the Year.

"Registered Nurse of the Year: This award honors the registered nurse who best exemplifies the ongoing demonstration of excellence in the art

and science of nursing practice." LSNA, 2018.

Dr. Karen Rice was recognized as LSNA Nurse Researcher of the Year.

"Nurse Researcher of the Year: This award recognizes a research focused registered nurse who had led significant nursing research leading to an improvement in direct patient care and has shown to impact healthcare delivery or the community." LSNA, 2018.

Reference: Louisiana State Nurses Association (LSNA). (2018). 2018 Nightingale Awards and Gala. Retrieved from: <https://www.lsna.org/nominate/>



left to right **Tracey Moffatt**, CNO & VP of Quality; **Ahnyel Jones-Burkes, MSN, RN-BC**, Ochsner Health System, LSNA Registered Nurse of the Year

Nurturing Care for the Caregiver with Nurses Week Mindfulness Sessions

During Nurses Week 2018, in addition to many events and celebrations across the system, Ochsner Health System celebrated nurses with a Care for the Caregiver activity: Mindfulness Based Stress Reduction sessions, offered at several locations throughout the system. Mindfulness practices, such as breathing exercises, meditation, and yoga can help calm the mind and body and help nurses manage stress throughout the day. Visit the System Nursing Professional Development SharePoint site to find Care for the Caregiver resources like a guide to mindfulness practice, tools for self-care, and Ochsner's Menu of Supportive Resources Guide for Employees. <http://at.ochsner.org/sites/NPD/SitePages/Care%20for%20the%20Caregiver.aspx>.

[Click here to watch a video about Mindfulness in Healthcare](#)

"The little things? The little moments? They aren't little."

- Jon Kabat-Zinn

OCHSNER LSU HEALTH SHREVEPORT - MONROE MEDICAL CENTER ACHIEVES BABY-FRIENDLY DESIGNATION AND IMPROVES QUALITY OF CARE FOR PATIENTS THROUGHOUT THE HOSPITAL

In the Spring of 2018, Ochsner LSU Health Shreveport - Monroe Medical Center (Monroe Medical Center), became the first Northeast Louisiana hospital to achieve the prestigious Baby-Friendly designation. The Baby-Friendly Hospital Initiative, a global program sponsored by the World Health Organization (WHO) and the United Nations Children's Fund (UNICEF) encourages and recognizes hospitals and birthing centers that offer an optimal level of care for breastfeeding mothers and their babies.¹

“Through the many steps to complete the Baby-Friendly designation process, we discovered several opportunities to improve the quality of care and services we provide to our patients, not only in Women’s and Children’s areas, but hospital-wide,” says **Traci Jordan, MSN, RN**, Director of Nursing, Ochsner LSU Health Shreveport - Monroe Medical Center. *“We discovered a need for dedicated patient education providers which led to the creation of new nursing positions that not only immensely benefited our patients, but also provided support for our entire nursing staff.”*

In partnership with a sister hospital in Shreveport, Monroe Medical Center created the OB Nurse Navigator role. In this role, nurses provide intensive prenatal education on the very first prenatal visit and develop an ongoing relationship with the patient through the pregnancy. Added support from OB Nurse Navigators, helps ensure compliance with prenatal visits and promote a healthier pregnancy and delivery.

The Monroe Medical Center nursing team has expanded education support into the cardiology service line with a lead cardiology clinic nurse who has an established relationship with patients and visits them on the first postoperative day or prior to discharge to personally go over cardiac specific discharge instructions. The nursing team plans to expand the practice to the orthopedics service line next.

Reference: 1.Baby-Friendly Designation at Ochsner. Retrieved from <https://www.ochsner.org/services/womens-services/baby-friendly>



“Our nurses are leading the way and discovering better and more creative ways to improve quality of care for patients and better support the entire patient care team in the process,”

- **Traci Jordan, MSN, RN**, Director of Nursing, Ochsner LSU Health Shreveport - Monroe Medical Center



CONGRATULATIONS TO OCHSNER LSU HEALTH SHREVEPORT ON RECEIVING THE BLUE DISTINCTION CENTER FOR MATERNITY CARE AWARD!

This year, the inpatient Women's Services team at Ochsner LSU Health Shreveport received the Blue Distinction Center for Maternity Care award from Blue Cross Blue Shield. The award signifies expertise in Women's Services, a commitment to quality care for vaginal and cesarean deliveries, fewer early elective deliveries, and overall patient satisfaction. The recognition as a Blue Distinction Center for Maternity Care is a result of multiple improvement efforts across the Women's Services department and involvement with the Louisiana Perinatal Quality Collaborative (LaPQC). In August of 2017, the Labor Unit and Perinatal Unit joined the LaPQC and became active participants in the LaPQC initiative Reducing Severe Maternal Morbidity in Louisiana. Through ongoing participation in the initiative, the Ochsner LSU Health Shreveport team attends learning sessions,

participates in monthly coaching calls, and submits quality improvement data.

As part of a project that aimed to reduce the risk of postpartum hemorrhage for mothers, the Women's Center team implemented several improvements that enhanced staff workflows and patient safety. Improvements focused on integrating clinical practice with the electronic medical record, patient education, and staff education. Additionally, the March of Dimes awarded Ochsner LSU Health Shreveport a grant covering a low-dose aspirin therapy program in August 2018 that will support the Women's Center in promoting the health and well-being of prospective mothers and their babies by reducing the risk of preeclampsia, a condition in pregnancy characterized by high blood pressure, and preterm birth.

“Since joining the LaPQC, our facility has demonstrated a lower percentage of early elective deliveries and a large part of this achievement is due to our focus on two specific obstetric quality improvement initiatives related to postpartum hemorrhage and preeclampsia,” says **Renee Sowell, MN, RN**, Executive Director, Women's & Children's Services.



Sheree Stephens, MSN, RN, CPHQ, Chief Nursing Officer and Vice President of Quality, Ochsner LSU Health Shreveport, ***“Our team is committed to promoting the health and well-being of prospective mothers and their babies in Region 7 and throughout the state of Louisiana. We have made remarkable strides in this effort, but there is much work to do and our team is up for that challenge.”***



The multidisciplinary team in the Labor and Delivery and Perinatal Unit at Ochsner LSU Health Shreveport including nurses, physicians, clinical assistants, lactation consultants, surgical technicians, and advanced clinical assistants.

SLIDELL MEMORIAL HOSPITAL AND ST. TAMMANY PARISH HOSPITAL HONORED AT HARVARD BUSINESS SCHOOL

In July 2018, representatives from Slidell Memorial Hospital (SMH) and St. Tammany Parish Hospital (STPH) presented their project entitled *Maximizing the Cath Lab Experience* at the Consortium for Community Health Leadership program held at Harvard Business School in Boston, Massachusetts. The SMH/STPH team completed the project while participating in the 2018 Consortium for Community Health Leadership Program, sponsored by Harvard University, Wellsley Health System, Ohio State University, and Ochsner Health System. Out of 16 teams who participated in the program the SMH/STPH was selected to present their work.

The multidisciplinary team included **Lynn Strain, MSN, CCRN, RN**, Chief Nursing Officer, SMH, **Lucy Walker, RN**, Cath Lab Manager, SMH, **Vasanth Bethala, MD**, Medical Director of Cardiology Services, SMH, **Shannon Holly, AART**, Department Head of Cardiovascular Services, STPH, **Hamid Salam MD**, Medical Director of Cardiovascular Services, STPH, and stakeholders such as representatives from physician offices, hospital staff members, and patients and their families. The team identified that the cath lab throughput from the office to the day of the procedure was disjointed and prolonged which resulted in frustration and dissatisfaction from patients, office and hospital staff, and providers. The goal of the project was to streamline the pre-operative catheterization lab process and improve the patient experience.

The team identified solutions that focused on patient and family preferences, physician preferences, work-life balance of staff members, and streamlining scheduling to reduce redundancy and gaps between procedures. The team used systems incentive-thinking and considered lessons learned from other facilities to broaden their perspective and look at solutions from a different paradigm, where consideration was given to volume strategies, a customer-centered environment, award-winning service, and customer loyalty. To resolve the issues with the current process, the team analyzed the current process of patient throughput in the pre-operative catheterization lab and requested input on the

process from various stakeholders including patients, physicians, physician office staff, and representatives from scheduling services, the radiology department, the laboratory department, and the Heart Center team.

The project resulted in a streamlined process and multiple improvements for patients and staff including the following:

- An improvement of cases scheduled and performed between 0700 and 1400 from 66% to 83%.
- A reduction in the wait time for patients from 120 minutes to 60 minutes.
- An increase in procedures starting on time from 88% to 97%.
- Staff satisfaction improved where 95% of staff felt the new process was more organized.
- 100% stating that they were able to increase productivity and decrease gaps in the schedule.





“Our journey is not complete. Future initiatives include family education and informational handouts, pagers for family members, and an improved handoff tool. In the next phase of the project, our team will create prototypes for improving the intra-operative process and post-operative process. We will continue to use continuous improvement methodologies learned at Harvard to create an organized and efficient Cath Lab process which will be patient-centered, with an emphasis on providing a pleasant patient experience.”

- Lynn Strain, MSN, CCRN,
Chief Nursing Officer, Slidell
Memorial Hospital

CONGRATULATIONS TO OCHSNER MEDICAL CENTER-JEFFERSON HIGHWAY ON APPLICATION FOR A FOURTH DESIGNATION FOR MAGNET® RECOGNITION!



In February 2018, the nursing team at Ochsner Medical Center on Jefferson Highway, submitted an application for a fourth designation as an American Nurses Credentialing Center (ANCC) Magnet® accredited hospital. The Magnet® Recognition Program recognizes organizations who foster nursing excellence. There are fewer than 500 Magnet® hospitals in the United States (U.S.) and less than 10 percent of all U.S. hospitals have Magnet® status. This places Ochsner Medical Center in the top 10 percent of hospitals in the country recognized for nursing excellence.

The Magnet® application process is a multiyear commitment and requires tremendous dedication from nurses at all levels of the organization. ANCC Magnet® accredited hospitals are based on over 30 years of scholarly inquiry and outcomes data. Magnet® recognized hospitals maintain designation for four years, then may reapply. Magnet® hospitals collect, report, and benchmark their data to the National Database for Nursing Quality Indicators (NDNQI) using standardized definitions.

Magnet® designation is associated with benefits for nurses including high job satisfaction, high quality patient care, and improved nurse sensitive indicators, such as lower incidence of falls, hospital acquired injuries, and central line associated blood stream infections. Further, the

image of nursing and value of nursing is reported as higher in Magnet® Hospitals, subsequently enhancing an organization’s ability to recruit and retain nurses.

“We submitted our responses to the required criteria to include greater than 30 criteria that required at least a four-point linear improvement in outcomes that exceed the initial start of a project and that is no small feat!” says **Debbie Ford, MSN, RN**, Chief Nursing Officer, Ochsner Medical Center, ***“I’m so proud of our nursing team and organization and am pleased to announce that we have been given the approval by the ANCC to proceed to a site visit in early 2019.”***

“Working in a Magnet® organization requires nurses to maintain one standard of nursing practice, excellence. The privilege to showcase that excellence in the 66 sources of evidence is a journey and one that can only be completed through the same teamwork and commitment to excellence that our nurses exhibit in their practice. We had a team of nurses and leaders working over this last year to showcase the work of our teams. We are very proud of their work and even more proud to know that our nurses exhibit this standard of excellence in their practice every day, every patient, every time.” - **Louise Saladino, DNP, RN, CCRN-K**, AVP Nursing, Magnet® Program Director.

LOOKING AHEAD TO 2019 AND HOW TO SUPPORT OHS NURSING

OCHSNER'S COLLABORATIVE STAFFING RESOURCE CENTER

Healthcare staffing remains a challenge for hospitals across the United States. Although not unique to Ochsner, we remain committed to improving staffing as we leverage different strategies and solutions aimed to enhance nursing recruitment and retention, while also creating new and exciting employment opportunities in our markets.

Staffing challenges are not solely related to unfilled jobs. Units that are “fully” staffed often still face gaps due to illness, vacations, changes in patient acuity, variability in patient volume, along with other normal operational factors. While recruiting and retaining employees are essential to stabilizing core staff, we must also develop a portion of our workforce that is nimble and ready to meet the ever-changing demand that we encounter as a healthcare organization.

Ochsner Nursing is launching a **Collaborative Staffing Resource Center (CSRC)** to support variable staffing needs. The CSRC will be phasing in over the next few months with a full launch in April 2019.

The **CSRC** is a team that enables consistent and reliable patient care staffing through a system-wide approach to staffing within nursing departments. This transition from a unit-centric approach to an enterprise model of resource management optimizes the nursing workforce in three ways:

- Leverages data to more effectively match staff resources to demand.
- Fills gaps between expected demand & scheduled resources.
- Uses flexible resources to meet variable demands.

The **CSRC** has three key goals: to improve staffing, reduce time spent filling open shifts by leaders and unit support staff, and reduce overall costs by decreasing reliance on external agency.

A key component of the **CSRC** is growing a robust team of clinical professionals who are flexible, adaptable, highly skilled, and have a desire to work across several locations and patient care units.

“Through creating this new opportunity, we expect to not only achieve the three identified goals, but also reduce the need to float our core unit staff that usually prefer to work on their home unit,” says **Bruce S. Weinberg**, AVP Nursing Workforce Management.

“This can truly be a win for our patients, staff, leaders, and the organization.”



Several operational workgroups are creating the CSRC structure, operational processes, policies/standards, and details around the employment opportunities. As the workgroups make further progress look out for additional information. Until then, please feel free to direct questions to CSRC@Ochsner.org.

NURSES PLAY AN INSTRUMENTAL ROLE IN LAUNCHING THE PATIENT FLOW CENTER

Patient Flow CENTER

In 2018, Ochsner launched the Patient Flow Center, located at Ochsner's Elmwood Campus, which expands on referral services to offer a process for centralized bed planning. Ochsner's Regional

Referral Center manages patient transfers throughout system and the region has seen remarkable growth and exceeded 11,000 transfers and 4,000 telemedicine consults in 2018. The new Patient Flow Center brings together every aspect of patient flow, streamlining workflows and communication in the transfer process to support continued growth going forward. The Patient Flow Center includes the Regional Referral Center for patient transfers, central patient bed placement for Ochsner Health System, psychiatric placement team, non-emergent ground dispatch (transport), emergent dispatch (Acadian ambulance), flight care dispatch, and facilitation of all telemedicine consults. Nurses who lead many aspects of patient flow are taking note of the benefits the new process. *"The Patient Flow Center allows all aspects of patient flow to communicate effectively in real time to avoid delays in transfers, direct admissions, and admissions in the Emergency Department," Yolanda Carmbs, RN, House Supervisor at OMC - Baton Rouge, "We can see a big difference regarding bed placement and it's been a wonderful change."*

The Patient Flow Center has improved workflows for nurses and staff members who coordinate bed placement for patients, leveraging technology and automating processes and is saving time. With the new centralized bed-placement process that went live across the entire system in 2018, nurses make fewer calls to get a patient assigned to a bed which saves time and expedites care delivery. All the improved workflows in the Patient Flow Center are estimated to eliminate over 500,000 unnecessary phone calls across the system.



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The new process for centralized bed planning through the Patient Flow Center has reduced the number of phone calls needed for bed placement and expedited care delivery for patients.

"Going live with centralized bed placement was anxiety producing for the team because we thought we would lose control of the process, but that was far from the truth," says **Donna Martin, MSN-HCSM, RN, CNO** at Ochsner Baptist*, *"With centralized bed planning, the patient is truly put first as our teams work together to ensure the patient is placed in the right level of care. Throughout the transition, our core values of Patients First and Teamwork have been evident."* In 2019, the Patient Flow Center will incorporate the case management department, go live with a "Transportation Request Workflow" that allows staff to request non-emergent, emergent, and PEC transportation via an order in EPIC, and go live at five remaining hospital campuses.

PROCESS: CENTRALIZED BED PLANNING

Example Workflow (ED Admission):

-  ED provider inputs admit order
-  ED to AC
-  AC to IP unit to request bed
-  Nursing unit to AC to give bed
-  Local AC assigns bed
-  AC to ED to give bed assignment

New Workflow (ED Admission):

-  ED provider inputs admit order
-  PFC AC assigns bed
-  IP unit receives alert notification, accepts request
-  ED & AC receive notification of bed assignment

* A Campus of Ochsner Medical Center

PHILANTHROPY UPDATE

The generosity of donors creates incredible opportunities for nurses not available through other sources and inspires innovation in education and research. In 2017, donated funds supported various projects and provided support for nurses to participate in continuing education through attendance at professional conferences. Professional conference attendance helps nurses remain current with evidence-based practices and the knowledge and skills gained helps nurses change and save lives. *“The Nursing Education Fund helps offset costs of continuing education,”* shares **Cherie Steinkampf, BSN, WOCN, CWCN, CCCN**, who attended the Southeast Regional Wound Ostomy Continence Nurses Conference in 2017 with support from Ochsner’s Nursing Education Fund at Ochsner Baptist*. *“Prior to working at Ochsner, I had never received funding from my hospital to attend a conference.”* Cherie is knowledgeable about current treatment practices for wound and ostomy care and physicians and patients see her as an expert in her field.

A New Opportunity to Support Nurses: The Patty Hanson Nursing Scholarship Fund

The Patty Hanson Nursing Excellence Fund was created in 2015 to launch nursing education, research, and development programs that leave an immediate and broad impact on nurses at Ochsner. In 2018, when Ochsner formed an educational alliance with Chamberlain University, the Patty Hanson Nursing Excellence Fund was dedicated as a scholarship for Chamberlain nursing students. The Patty Hanson Nursing Scholarship was established by her husband, John Hanson, in her loving memory. Patty was an Ochsner nurse and a dedicated advocate for nursing education during her career. She created programs, authored medical publications, delivered addresses, and taught new nurses nationally. The scholarship is awarded to an Ochsner employee who has demonstrated a passion for the nursing profession and commitment to higher learning. The 2018 recipients of the Patty Hanson Scholarship are Jada Davis and Princess Jones, both nursing candidates pursuing the Bachelor of Science in Nursing degree.

The Nursing Innovation Funds: One Moment

The Nursing Innovation funds support opportunities that embody Ochsner’s Mission to Serve, Heal, Lead, Innovate and Educate. The first project these funds will support is promoting an environment where the well-being of our colleagues is a priority. It’s important that we find ways to find the right balance between work and life. Sometimes that can be something as simple as taking a moment to step away and recharge. That’s why having a space for healing the mind, body, and spirit is important, a place for One Moment of quiet and stillness, so our nurses have an opportunity for restoration throughout their day if needed. This quiet space is just one more tool we hope to give our staff, ensuring they find balance in their day and approach every encounter with compassion. This effort is made possible through donations to the campus Nursing Innovation funds.

None of this is possible without the generosity of our donors. If you would like to support a nursing fund at Ochsner Health System, visit www.ochsner.org/NursingFunds.



Family and friends of Patty Hanson gather near her portrait displayed at Chamberlain University College of Nursing at Ochsner Health System. The portrait commemorates Patty's extraordinary accomplishments throughout her nursing career and provides inspiration to the aspiring nurses.



Through the Patty Hanson Scholarship Fund, Ochsner Health System has awarded two partial scholarships to Ochsner employees who have been accepted to the Chamberlain University College of Nursing at Ochsner Health System BSN program. The inaugural scholarship recipients are Princess Jones and Jada Davis. Photographed above: Tracey Moffatt, MHA, BSN, RN, Ochsner Health System CNO and VP Quality, Princess Jones, Patient Care Technician NSU at OMC, and Jennifer Couvillon, RN-BC, PhD, CNE, President, Chamberlain University College of Nursing at Ochsner Health System.

WHAT WE LOVE ABOUT OUR NURSES!

“As an Ochsner Nurse, you empower our patients with every interaction. You are the front-line in patient experience and fulfill one of the system’s most important functions.”

- Warner Thomas, President and CEO, Ochsner Health System

“Our patients, families, and community rely on the dedication of our nurses to achieve positive clinical outcomes.”

- Mike Hulefeld, Executive Vice President and Chief Operating Officer, Ochsner Health System

“I have worked at Ochsner for over 23 years and have to say that I am amazed at the nursing staff that we have here. I have always found the nurses both in the clinic and the hospital to be very professional and skilled. I believe that these people truly wake up every morning with the commitment that they are going to do great things for their patients. As I make rounds through the clinic and hospital, it is clear from the comments from the physicians how much they value the relationships with their nurses. It always makes me proud to see so many every year in the Top 100 Nurses list. It is this level of skill and dedication that will help lead us to being the safest and highest quality health system in the region.”

- Dr. Robert I. Hart, M.D., FACP, FAAP, Executive Vice-President & Chief Medical Officer, Ochsner Health System

“Nurses serve as a vital part of Ochsner Health System, especially in our efforts to increase immunization rates around the system. Without nurses, we will not be able to meet the Healthy People 2020 goal of vaccinating patients to prevent vaccine-preventable diseases. We have had tremendous support from nursing clinical coordinators, nursing educators, nursing informaticists, and the nursing staff around the system in this effort. I’m looking forward to achieving outstanding vaccination rates together and have enjoyed working with the nurses at Ochsner.”

- Dr. April D. Green, Clinical Pharmacist- Population Health, Ochsner Medical Center

“It is hard to express how important nurses are – because they aren’t just important, they are essential. I rely on nurses to help me assess, treat, and care for my patients as I go about my day making sure that my patients are treated well. I can’t imagine working without nurses in the same way that I can’t imagine working without my hands. In addition, as colleagues, they sometimes support the entire team and keep us all focused on what is important – the patient, since that is their continuous focus. Nursing keeps us focused on caring for the patient, not just treating a disease, and that’s why we all went into healthcare in the first place. They are the ultimate patient advocate at the bedside.”

- Dr. Eric Ehrensing, Infectious Disease, Ochsner Medical Center

