

CONNECTIONS IN CARING

2015/2016 Nursing Annual Report

NURSING PROFESSIONAL PRACTICE MODEL

Rochester Regional Health is proud to have developed our unique Nursing Professional Practice Model, which provides a foundation and direction for our staff, leading us professionally. We engaged our nursing staff in the creation of this model with the goal of empowering our employees while improving patient care. Our model provides a framework for professional nursing practices and healthy work environments, as well as paths to leadership. It involves:

Caring

Compassionate care for patients and families that involves trust, affirmation, holistic, connection, self-care and community presence.

Knowing

Evidence-based clinical decisions, actions and scholarship that include competence, critical thinking, “big picture,” reflective practice, intuition, lifelong learning and nursing as a profession.

Navigating

Guiding patients and team members through the healthcare experience, with the components of communication, hub, teamwork, support, advocacy and “master of all trades.”

Leading

Charting new directions and influencing patients, families and the nursing profession, with elements that include professionalism, respect, “making a difference,” global vision and acknowledgment.

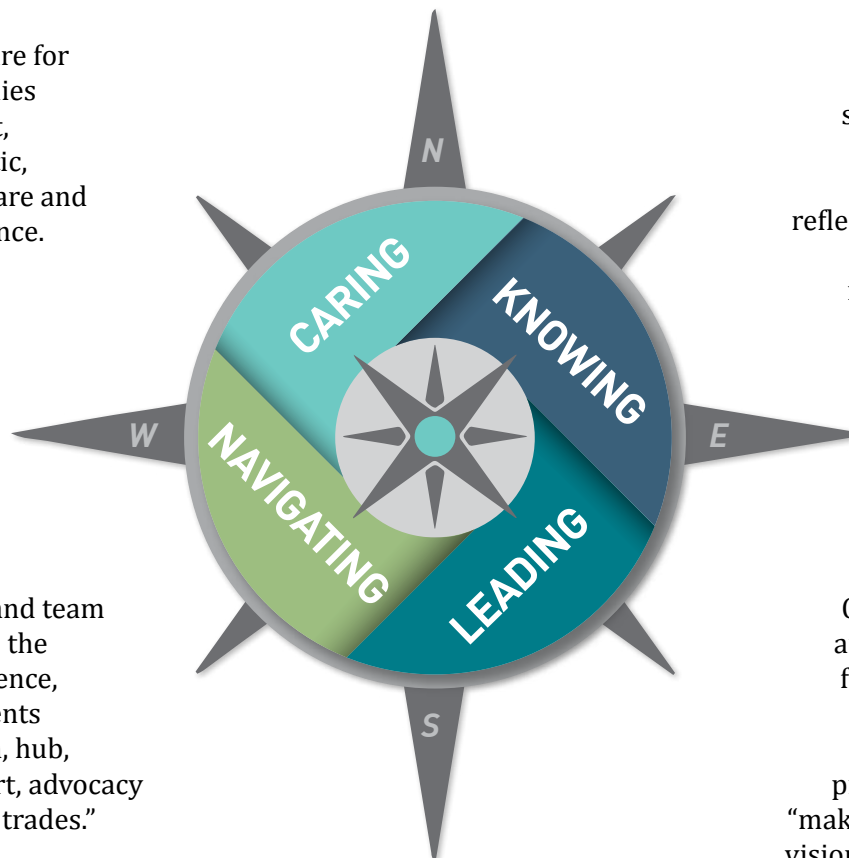


TABLE OF CONTENTS



4
LETTER FROM
OUR PRESIDENT
AND CEO

6
A WORD
FROM THE
CNO COUNCIL



9
CONNECTING TO
OUR VISION
THROUGH
TRANSFORMATIONAL
LEADERSHIP

Rochester Regional Health CNO Council	9
Nurse Leadership Development Program at Rochester Institute of Technology	10
Accelerated Nurse Leadership Cohort	11
St. John Fisher College Joins Educational Partnership	12
Engagement-Guided Recruitment	13



15
CONNECTING
WITH EMPLOYEES
THROUGH
STRUCTURAL
EMPOWERMENT

Advanced Practice Provider Council Offers Insight, Advocacy	15
New Vision Nursing Sciences Blends Academic and Career Education	16
Five Units Receive Beacon Awards	17



19
CONNECTING
WITH PATIENTS
USING EXEMPLARY
PROFESSIONAL
PRACTICE

Helping New Mothers With the Bonding Process	19
Building the Rochester Regional Health Clinical Ladder	20
Reducing Infection Rates	21
Hosting Evidence-Based Practice Immersion Programs	21
Recognizing Blue Distinction Centers for Maternity Care	21
Achieving WHO-UNICEF Baby-Friendly Facility Designation	21
Earning Centering Pregnancy Certification	22
Introducing Pediatric Core Teams	23
Award-Winning Training at Isabella Graham Hart School of Practical Nursing	24



27
CONNECTING
WITH THE FUTURE:
NEW KNOWLEDGE,
INNOVATIONS AND
IMPROVEMENTS

Preparing for Safe Sleep Throughout Rochester Regional	27
Bridging the Gap With an Intensive Nursing Care Unit	28
Reducing Hemolyzed Phlebotomy Specimens	30
New Process Increases Emergency Department Efficiencies	30
Introducing the Pupillometer in the SICU	31
Facilitating Hospital Transitions to Long Term Care	31
Navigating Pathways to Excellence in Long Term Care	31

LETTER FROM OUR PRESIDENT AND CHIEF EXECUTIVE OFFICER



Eric J. Bieber, MD
President and CEO

DEAR ROCHESTER REGIONAL HEALTH NURSES,

Exceptional patient care starts with exceptional nurses. Rochester Regional Health employs more than 3,650 of the most exceptional nurses, all committed to high-quality care delivery that embodies our system's mission: to enhance lives and preserve the health of our patients in the eight-county area we serve.

Our nurses' clinical excellence and impeccable patient care are reflected in their recent distinctions, which include five Beacon Awards, nine March of Dimes Awards, 18 individual and three team Daisy Awards, and Magnet designation for Rochester General Hospital.

Rochester Regional Health nurses are fortunate to have progressive leadership in our CNO Council. Since its formation, the Council has implemented a new, evidence-based clinical ladder, and they have elevated patient experience scores with quality metrics and Daily Safety Checks.

Through our nurses' vision for strategic growth, we have secured academic partnerships with Rochester Institute of Technology and St. John Fisher College, two of our region's leading higher education institutions. I am proud to support Rochester Regional's nurses with these investments in their professional development.

Our nurses are an ever-growing integral part of Rochester Regional Health's success. I thank each one of you for all you do for our system, patients, families and communities.

Sincerely,

A handwritten signature in black ink, appearing to read "Eric J. Bieber MD".

Eric J. Bieber, MD
President and CEO

ABOUT ROCHESTER
REGIONAL HEALTH



16k+
SYSTEM
EMPLOYEES



< 5
HOSPITAL
LOCATIONS



3,600+ >
NURSES



87+ PRIMARY CARE &
AMBULATORY
LOCATIONS

60+ PATIENT
TESTING SITES

2,500+
MEDICAL STAFF

8
SENIOR LIVING
FACILITIES

936
LONG TERM
CARE BEDS



1,600+
SYSTEM
VOLUNTEERS

370k+
BEHAVIORAL
HEALTH
OUTPATIENT
VISITS

**CINDY
LOVETRO**

*BS, RN, CDONA, LNHA
CNO, Long Term Care*

**SHERI
FAGGIANO**

*MSN, RN
ACNO, Unity Hospital*

**JENNIFER
GALES**

*MSN, RN
VP, CNO, Unity Hospital*

**BARBARA
BUSCAGLIA**

*MS, RN, NE-BC
CNO, Primary Care and Ambulatory
Specialty Institute'*



**KRISTIN
OPETT**

*MSHA, BS, RN
VP, CNO, Rochester General Hospital*

**JOANN
PELLEGRINO**

*MS, RN, CNOR, RNFA
ACNO, Rochester General Hospital*

**TERRI
GLESSNER**

*DNP, RN, ACNP, BC, NEA, BC, CCRN
VP, CNO, Eastern Region*

MEGHAN ALDRICH
DNP, RN, CPNP
CNO, Ambulatory Specialty
Medicine and Surgery

DEBORAH C. STAMPS
EdD, MS, RN, GNP, NE-BC
System Vice President,
Quality, Safety & Innovation



MARILYN ALMETER-MILBRAND

MSN, BSN, RN
VP, CNO, United Memorial Medical Center

A WORD FROM THE CNO COUNCIL

Dear friends and colleagues,

On behalf of more than 3,650 nurses, it is a privilege to share the 2015 – 2016 Rochester Regional Health Nursing Annual Report with you. This year's report is a celebration of the rich tradition of high-quality, compassionate care that defines Rochester Regional Health's nurses. It's also a way to highlight our connections to patients, to fellow team members and to the communities we serve across an eight-county area.

Over the past two years, we've made significant progress in quality outcomes through continuous commitment, accountability and discipline. The Magnet standards guide our nurses, which you'll see throughout this report.

TRANSFORMATIONAL LEADERSHIP

Transformational leaders are those who stimulate and inspire followers to achieve extraordinary outcomes – and in the process, develop their own leadership capacity.

STRUCTURAL EMPOWERMENT

Nurses throughout our organization are involved in shared governance and decision-making structures and processes that establish standards of practice and suggest opportunities for improvements.

EXEMPLARY PROFESSIONAL PRACTICE

This practice is evidenced by effective and efficient care services, interprofessional collaboration and high-quality patient outcomes. It is grounded in a culture of safety.

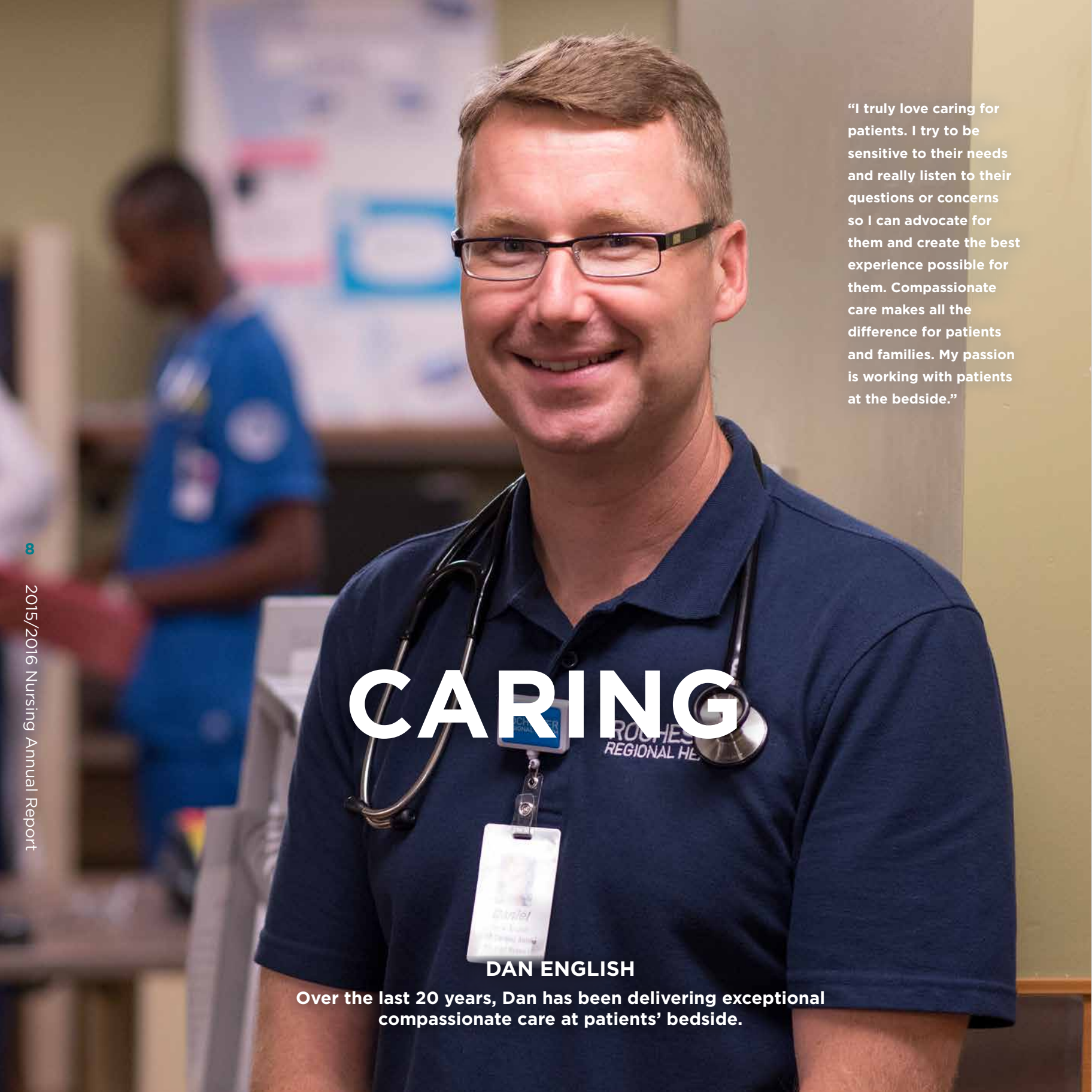
NEW KNOWLEDGE, INNOVATIONS AND IMPROVEMENTS

Our organization integrates evidence-based practice and research into our clinical and operational processes – and our nurses can explore the safest and best practices.

In this report, you'll find vignettes of nursing quality and excellence that bring hope and healing to patients. You'll also see the compassion that is woven into our fabric system-wide.

Our nurses work to ensure every patient and family experiences nursing excellence, whether it's through words of encouragement, a reassuring presence, professional advice or a gentle touch. These caring actions and our strong commitment to innovation have allowed us to establish – and advance – our Rochester Regional culture.

We thank each and every nurse for being a member of our team.



“I truly love caring for patients. I try to be sensitive to their needs and really listen to their questions or concerns so I can advocate for them and create the best experience possible for them. Compassionate care makes all the difference for patients and families. My passion is working with patients at the bedside.”

CARING

DAN ENGLISH

Over the last 20 years, Dan has been delivering exceptional compassionate care at patients' bedside.

CONNECTING TO OUR VISION THROUGH TRANSFORMATIONAL LEADERSHIP

Transformational leadership involves strategic inquiry, planning and preparation. Rochester Regional's nurse leaders enforce these principles with continuing education, support and development of our nurses across the system, preparing us to meet the evolving needs of our patients.

These brief stories demonstrate our commitment to leadership – and the difference it's making in our organization.

ROCHESTER REGIONAL HEALTH CNO COUNCIL

In 2014, we formed the Rochester Regional Health Chief Nursing Officer (CNO) Council to capitalize on nurse leadership resources and expertise across our system. Composed of 10 CNOs and executive leaders, the Council is represented on the Executive Leadership Team and reports directly to Eric Bieber, MD, president and chief executive officer of Rochester Regional Health.

The Council provides insight and counsel on clinical services, risk management, human resources and operations. The Council's objectives include:

- Advancement of professional nursing practice through education partnerships
- Leadership training programs
- An integrated clinical ladder advancement process used system-wide

In the past years, five Council members were chosen for a year-long, executive MBA-styled program at Rochester Institute of Technology to develop their leadership potential and to create a nurse leadership identification and development program.



NURSE LEADERSHIP DEVELOPMENT PROGRAM AT ROCHESTER INSTITUTE OF TECHNOLOGY

We teamed with RIT to develop our first Nurse Leadership Development Program, which enriches senior leadership team nurses with exposure to advanced healthcare operations, strategy, leadership, coaching, critical thinking, project management and executive presentation.

Successful program participants received a certificate from RIT and Rochester Regional Health, as well as credits toward RIT's executive MBA program at their Saunders School of Business. Deb Stamps, Natalie Passino, Betsy Stockmeister, Anne Rosati-Hooper, Bob Wesley, Cathy Smith and Michelle Beatty have continued their education in pursuit of RIT's executive MBA.

R·I·T



“Patients are in a place they don’t want to be in. And we have the opportunity to reach them, to change that moment in their time. We can be that light on that day, and change their experience for the best.”

Ivonne Clement, RN, BSN



ACCELERATED NURSE LEADERSHIP COHORT

Accelerated Nurse Leadership Cohort (ANLC) was created by the CNO Council in 2016 to develop nurses' leadership potential through a year-long series of workshops, seminars, discussion and senior leadership collaboration, including a planning session with Eric Bieber, MD, president and chief executive officer of Rochester Regional Health.

Participants in ANLC:

- Discovered data mining principles and functions to drive quality and patient safety
- Took part in project, budget planning and management seminars
- Went inside healthcare operations
- Attended an accountable care organization discussion
- Researched best practices in population health

The program concluded with a capstone project on a range of topics, including: integration of CareConnect, an electronic health record system, electronic scanning of operating room inventory, nurse recruitment and retention and pharmaceutical waste compliance.





ST. JOHN FISHER COLLEGE JOINS EDUCATIONAL PARTNERSHIP

Due to the rapidly growing need for a more educated nursing workforce that's better equipped to meet the demands of an evolving healthcare system, the landmark Institute of Medicine (IOM) Future of Nursing Initiative set the goal of having 80% of registered nurses obtain their Bachelor of Science in Nursing (BSN) degree by 2020.

One creative strategy for achieving this goal is to form a partnership with a nursing college. These educational collaborations benefit both stakeholders. They help healthcare organizations retain nurses and increase the number of those with bachelor's degrees. At the same time, they help colleges boost student enrollment, increase opportunities and share resources.

In 2016, the CNO Council considered this strategy to help Rochester Regional Health advance toward the IOM goal and enhance our recruitment efforts. We entered into a partnership with The Wegmans School of Nursing at St. John Fisher College where Rochester

Regional Health nurses and employees who are advancing their education in nursing or mental health counseling can now receive discounted tuition. The agreement for our developing professionals includes loan and financial aid options, generous credit transfer and advanced degree options. Degree programs include: Master of Science in Nursing (MSN), Nurse Practitioner Options in Primary Family Care (PCFNP), Adult/Gerontology Acute Care (AGACNP), and Psychiatric Mental Health (PMHNP), as well as Adult/Gerontology Clinical Nurse Specialist (AGCNS), Master of Science in Mental Health Counseling and Doctor of Nursing Practice (DNP).

"We value all of our employees and want to enable them to take advantage of career development opportunities," said Eric Bieber, MD, chief executive officer. "This is yet another way to honor our nurses and help remove financial roadblocks that may inhibit their ability to grow and advance their careers."

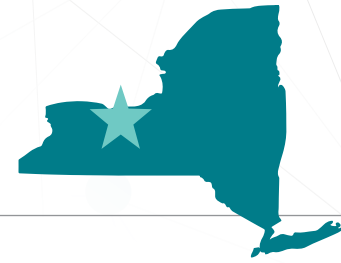


ENGAGEMENT-GUIDED RECRUITMENT

Rochester Regional Health's nurse recruitment initiatives face an increasingly competitive landscape. Over the past three years, the Finger Lakes Region has seen about a 7% (805) increase in open RN jobs, and New York State anticipates about a 9% (1,190) increase through 2024.*

By leveraging the power of our education partnerships we have boosted our hires from these BSN programs since 2015. This strategy also raised our profile in the community, adding prestige to our programs and increasing BSN graduates' interest in our system. We collaborated with our talent acquisition team to create a substantial recruitment season strategy, which included supporting materials and hospital and unit tours.

Our efforts also enhanced nurse leader satisfaction: they report greater understanding of and preparation for nurse recruitment. Our Nursing Recruitment Leader Guide clearly details processes, expectations and touchpoint opportunities for new nurses. We also received positive feedback on our letters of intent, which enables us to extend and secure offers early in the recruitment season.



Over the past three years, the Finger Lakes region has seen a

7% INCREASE
in open RN jobs

St. John Fisher College
BSN GRADUATES
Fall/Winter Programs



“I seriously love my team here at Rochester Regional and my community. I volunteer at a shelter and try to be a leader in all my roles. I recently took on the role of Clinical Nurse Leader at the Walk-in Care Center at St. Mary’s”

LEADING

AISHA MILLS-COURTWRIGHT

A rising star at Rochester Regional Health, Aisha is a leader here and within our community.

CONNECTING WITH EMPLOYEES THROUGH STRUCTURAL EMPOWERMENT

Explore these stories of how we're moving forward by empowering our nursing staff.

ADVANCED PRACTICE PROVIDER COUNCIL OFFERS INSIGHT, ADVOCACY

In 2016, we wanted to give a stronger voice to Advanced Practice Providers (APP) throughout our health system, so we created the APPs Council. Led by Selma Mujezinovic DNP, FNP-BC, the group represents APPs through leadership and stewardship of its resources. It also advocates for the benefit of APPs, positively influencing the delivery of the highest quality care and improving patient health. And it ensures that APPs are delivering care in accordance with Rochester Regional's mission.

Specifically, the new Council does the following for APPs:

- Provides a forum to share their input on policies and other matters.
- Maintains a centralized communication network for them.
- Advises and assists leadership with new-hire orientation and integration.
- Defines and expands the role of the APP within the health system.
- Promotes access to educational opportunities.
- Maintains collaborative relationships with other community APP programs.

The council has the support of physician leadership and is represented on the system's medical board, where it offers APP-related policy, utilization and educational counsel.

The APP Council is open to physician assistants, nurse practitioners, certified nurse midwives, certified registered nurse anesthetists, clinical nurse specialists, optometrists and clinical psychologists.

NEW VISION NURSING SCIENCES



BLENDING ACADEMIC AND CAREER EDUCATION

Since 2012, the New Vision Nursing Sciences program has offered exciting opportunities to Wayne County high school seniors who want to pursue nursing careers. The program blends academic and immersed career education, giving students 305 hours of hands-on and simulation experiences at Newark-Wayne Community Hospital. Clinical hours are offered in respiratory therapy, telemetry, medical-surgical, cardiac rehabilitation, endoscopy, psychiatry, post-anesthesia care, pharmacy, maternal-child health and the emergency department. Students also participate in an additional 130 hours of instructed theory under the guidance of Karen Conway, MS, RN-BC, throughout the program.

2016 NEW VISION NURSING SCIENCES PROGRAM

13

STUDENTS
ENROLLED IN
THE PROGRAM

11

STUDENTS
WERE ACCEPTED
IN BS NURSING
PROGRAMS

2

STUDENTS
WERE ACCEPTED
IN 2+2
PROGRAMS



WHAT WE'RE PROUD OF

Nurse of Distinction

Nancy Pictor, RN, CNS

Genesee Valley Oncology Nursing Society

Healthcare Team Excellence Award

Rochester Ambulatory Surgery Center and
DSRIP Program,

Greater Rochester Quality Council

Care Management Award

Wendy Copeland, BSN, RN,
Rochester General Hospital,

Lighthouse Awards

5 UNITS RECEIVE BEACON AWARDS

The prestigious American Association of Critical-Care Nurses Beacon Award for Excellence recognizes critical care units for high quality standards and exceptional patient and family care. The award measures hospital units' patient outcomes with evidence-based national criteria for excellence.



**BEACON
AWARD**
FOR
EXCELLENCE

Rochester Regional Health is proud to have garnered five awards in 2016.

ROCHESTER GENERAL HOSPITAL

2016 GOLD-LEVEL Beacon Award,
Surgical Intensive Care Unit

2016 SILVER-LEVEL Beacon Award,
Medical Intensive Care Unit

2016 SILVER-LEVEL Beacon Award,
Cardiothoracic Intensive Care Unit

UNITY HOSPITAL

2016 SILVER-LEVEL Beacon Award,
Intensive Care Unit

NEWARK-WAYNE COMMUNITY HOSPITAL

2016 SILVER-LEVEL Beacon Award,
Intensive Care Unit



“As a driven patient advocate and a lifelong learner, I was working with stroke patients to assess them for post-stroke depression. Since early detection gives patients the best possible chance for a positive outcome, I created a new screening tool that’s now available on CareConnect.”

NAVIGATING

McIntosh DNP, MPC, SCRNP
Endovascular Service



CELIA MCINTOSH, DOCTORATE IN NURSING PRACTICE

As part of her Doctorate in Nursing Practice evidence-based project, Celia created a screening tool that is now available for staff across the health system.

CONNECTING WITH PATIENTS USING EXEMPLARY PROFESSIONAL PRACTICE

The nursing team at Rochester Regional is dedicated to providing the best quality patient care – and we do that through exemplary professional practices. These stories describe some of the outstanding collaborative efforts made by our nurses to enhance patient care and safety.

HELPING NEW MOTHERS WITH THE BONDING PROCESS

When it comes to maternity care, our nurses know how important the bonding process is. Those first moments (and hours) between moms and new babies are crucial, and when we facilitate skin-to-skin contact, it can: regulate the infant's temperature, heart rate and blood pressure; help prevent common newborn difficulties such as hypoglycemia; reduce pain; and provide the framework for optimal brain development. Skin-to-skin contact has also been effective in reducing breastfeeding problems. However, skin-to-skin contact can be delayed by fatigue following delivery, cesarean or complications.

In August 2015, a nurse-led interdisciplinary task force (anesthesia, obstetrics, pediatrics and nursing education) implemented a process to initiate skin-to-skin contact within five minutes of delivery. We started with scheduled, low-risk cesarean deliveries, and the results were fantastic:



71%

INCREASED CONTACT OF ELIGIBLE CESAREAN DELIVERIES BY DECEMBER 2016

11%

INCREASED CESAREAN-SECTION BREASTFEEDING RATES WITH SKIN-TO-SKIN CONTACT BY FEBRUARY 2016

PATIENTS REPORT **GREATER** OVERALL CARE SATISFACTION

BUILDING THE ROCHESTER REGIONAL HEALTH

CLINICAL LADDER

Our Clinical Ladder program provides a clear, achievable career path for nurses, which supports professional growth, encourages opportunity and boosts retention of registered nurses. The goals are outcome-based achievement in leadership, quality and organizational contribution.

The Ladder is based on Patricia Benner's "Novice-to-Expert" progression: novice, advanced beginner, competent, proficient and expert.

TODAY

Hundreds of nurses system-wide are on the Rochester Regional Health Clinical Ladder.

DECEMBER 2015

The new Clinical Ladder is rolled out to the front-line nurses at forums with the CNOs and nurse directors.

SEPTEMBER 2015

The Clinical Ladder is formally approved by the CNO Council, along with new job descriptions and compensation plans. The next step was conversations with affected nurses and the shared governance committees at each hospital.

DECEMBER 2014

An integrated team came together to develop a new system-wide clinical ladder. We searched literature and looked at best practices. After months of meetings, the committee presented the revised clinical ladder to the CNO Council. Guidelines were developed based on the feedback.



REDUCING INFECTION RATES

Between 2015 and 2016, Rochester Regional Health significantly reduced our infection rates as a result of systemic, targeted communication and timing:

22.5%

REDUCTION IN SYSTEM-WIDE CENTRAL LINE-ASSOCIATED BLOODSTREAM INFECTION RATES

1.42%

REDUCTION IN CATHETER-ASSOCIATED URINARY TRACT INFECTION RATES

22.3%

DROP IN COLON SURGERY SURGICAL SITE INFECTION STANDARDIZED INFECTION RATIO

HOSTING EVIDENCE-BASED PRACTICE IMMERSION PROGRAMS

Rochester Regional's Department of Nursing Research and Evidence-Based Practice (EBP) and the EBP Advisory Council partnered with The Ohio State University's Center for Transdisciplinary EBP in 2016 to offer a series of immersion programs.

"Evidence-Based Leadership: Key Strategies for Building a Sustainable Culture" was the initial program, led by Bernadette Melnyk, PhD, RN, CPNP/PMHNP, FNAP, FAAN, dean of the College of Nursing at Ohio State University and Lynn Gallagher-Ford, PhD, RN, DPFNAP, NE-BC, director, Center for Transdisciplinary EBP.

The second offering was a five-day EBP immersion for 30 nurses from our five hospitals. They developed facility-based EBP projects, and when they were done, participants became organizational EBP mentors, developing culture-changing, sustainable action plans. The EBP Advisory Council continues to foster and sustain an EBP culture and

approach here at Rochester Regional that will enhance our patient outcomes, experience and safety, and improve the nursing work environment.

RECOGNIZING BLUE DISTINCTION CENTERS FOR MATERNITY CARE

Unity Hospital and Newark-Wayne Community Hospital were two of the first hospitals to receive the Blue Distinction Center for Maternity Care designation from Excellus BlueCross BlueShield. Rochester General Hospital also received one of the first Blue Distinction Center+ for Maternity Care designation. These are new designations under the Blue Distinction Specialty Care program.

These hospitals agree to meet the requirements of evidence-based care practices that promote successful breastfeeding under "Baby Friendly" guidelines, which provide optimal care levels for infant feeding and mother/baby bonding. The criteria also evaluates overall patient satisfaction and their willingness to recommend.

ACHIEVING WHO-UNICEF BABY-FRIENDLY FACILITY DESIGNATION

Newark-Wayne Community Hospital earned its Baby-Friendly International Designation for breastfeeding excellence from the World Health Organization-UNICEF in January 2015.

Our goal was to help improve our breastfeeding rate among new mothers, so we created a task force supported by our CNO. We wanted to obtain the Baby-Friendly International Designation, which recognizes organizations that offer an optimal level of care for infant feeding and mother/baby bonding.

Achieving this designation was a comprehensive, detailed and thorough journey toward excellence. Our task force used the Baby-Friendly 4-D work plan to evaluate and prepare for the culture change. We examined, challenged and modified longstanding policies and procedures when necessary. We also trained and educated all levels of staff: everyone from physicians to executive staff and nurses attended in-services on the benefits of breastfeeding and the availability of a pumping room for visitors and employees.



WHAT WE'RE PROUD OF



NEWARK-WAYNE COMMUNITY HOSPITAL

2015 *Betty Verdine*, 2 West; *Barbara Breitsch*, 2 West; *Kelly Hayes*; ASU; *Elizabeth Mattice*, RN, 2 West; *Cindy Witter*, MSN, RN, DAISY Leader Award; *Infection Prevention Liaison Committee*, DAISY Team Award

2016 *Terri Williams*, RN, OB; *Melissa Mille-Blake*, RN, ED; *Holly Kolstad*, UNIT; *Kathy Blazey*, BSN, RN, Cardiac Rehab; *Elizabeth Hall*, RN, 2 West, DAISY Leader Award; *Joint Center of Excellence Team*, DAISY Team Award; *Nursing Team*

ROCHESTER GENERAL HOSPITAL

2015 *Alex Chasman*, RN, MICU; *Dee Dee Yonker*, BSN, RN, 4800; *Marisol Luis*, BSN, RN L&D; *Cara Serazio*, RN, CathLab; *Joanna Sorenson*, BSN, RN, SICU; *Kathy Reddy*, RN MICU; *Ann Kraska*, MS, RN, SCN; *Cynthia Delve*, RN, Call Center

2016 *Jane Reinard*, BSN, RN, OR; *Ken Krull*, RN, ED; *Laurie Cobiski*, BSN, RN, SICU

CONTINUED FROM PREVIOUS PAGE

We implemented the program's Ten Steps to Successful Breastfeeding and the International Code of Marketing of Breast-milk Substitutes. Finally, we created an audit processes to ensure quality in all aspects of maternity care operations.

Since the program's inception, we have increased newborn breastfeeding rates from 48 – 87% at Newark-Wayne Community Hospital. And ultimately, our program is providing all mothers with the information, confidence and skills necessary to successfully begin (and continue) breastfeeding their babies or feeding formula safely.

EARNING CENTERING PREGNANCY CERTIFICATION

“Centering Pregnancy” is an evidence-based model of prenatal care that’s been proven to reduce preterm deliveries and improve birth outcomes for mothers and babies. Only 27 women’s care sites in New York State have been certified – Rochester Regional is home to four of them. The Centering Healthcare Institute in Boston has recognized:

- The Women’s Health Center at Clinton Avenue
- The Women’s Health Center at Alexander Park
- The Women’s Health Center at Portland Avenue
- The Women’s Health Center at Newark

This innovative care model groups 8 – 12 women at similar gestational stages. They meet with their healthcare provider to learn care skills, participate in facilitated discussions and develop support networks with fellow members. Each group has 10 sessions throughout the pregnancy and early post-partum. Physicians work with patients to complete physical health assessments, providing a dynamic atmosphere for learning and sharing.

The results are impressive:

- Patient satisfaction rates improved
- Each site has shown a decrease in preterm births compared to traditional births
- Rochester Regional has saved more than \$1 million by reducing the number of preterm babies, whose care typically costs more than \$76,000 (according to the March of Dimes)





INTRODUCING PEDIATRIC CORE TEAMS

In 2016, we established two Pediatric Core Teams at Rochester General Hospital, made up of front-line nursing staff who have special interest in caring for children. Led by Julie Gottfried, DNP, RN, CNS, CCRN, CPNP-PC, the Post-Anesthesia Care Unit (PACU) Team has five RNs and the B7000 team has seven (B7000 is the inpatient acute care unit that sees both pediatric and adult patients).

Both teams meet monthly to discuss pertinent nursing issues related to children. Their accomplishments include:

- B7000 Core Team members created two in-services on peripheral IV placement in children and applying oxygen to pediatric patients, and shared this with the unit's staff RNs.
- PACU Core Team created education for PACU nurses on caring for children in the post-op setting. This was rolled out to all new nursing staff caring as well as the current staff.



The teams also established mission statements:

B7000: "The Pediatric Core Team is dedicated to providing evidence-based, quality healthcare to the pediatric population. We are committed to fostering an environment that supports learning, mentoring and professional growth and development."

PACU: "The PACU Pediatric Core Team serves as a resource for pediatric-related questions, education, orientation and ongoing support for nurses that care for the pediatric population in the PACU. Their mission is to provide hands-on, 'in the moment' mentoring for PACU nurses."





AWARD-WINNING TRAINING

ISABELLA GRAHAM HART School of Practical Nursing



The Isabella Graham Hart School of Practical Nursing (IGH) tied for 18th place in the Rochester Business Journal's 2016 List of Top 100 Workforce Training Programs. The ranking features leading training programs within companies or institutions in the local business community.

This accredited program had a tremendous success rate in 2016:

- NCLEX-PN pass rates: **84.62%**
- Program completion rates: **IGH AVERAGE: 95%**
- Job placement rates 4-6 months after program completion: **100%**
- Students would recommend the program: **100%**
(surveyed 6 months after completing the program)

IGH is accredited by the Accreditation Commission for Education in Nursing. This organization supports the interests of nursing education, nursing practice and the public through accreditation.

RANKED

18

RBJ ROCHESTER
BUSINESS JOURNAL
TOP 100
WORKFORCE
TRAINING
PROGRAMS

WHAT WE'RE PROUD OF



MARCH OF DIMES AWARDS 2015

Sue Chalupa Breese, BSN, RN, Emergency, and *Kari DiSanto*, BSN, RN, Women's Health, Newark-Wayne Community Hospital; *Lucia Holmes*, RN, Pediatrics, Rochester General Hospital; *Patricia Webber*, BSN, RN; Long Term Care, Park Ridge Living Center; *Jennifer Smith*, RN, Behavioral Health, Unity Hospital

2016

Kelsey Hawkins-Rusch, Rising Star, Rochester General Hospital; Mary Ann Delucenay, RN, Medical/Surgical, Rochester General Hospital; *Joyce Birr*, BSN, RN, MPA, Community Outreach, Rochester General Hospital; *Maureen Krenzer*, Advanced Practice, Rochester General Hospital

OBSTETRICAL IMPROVEMENT PROJECTS QUALITY AWARD 2016

UNITED MEMORIAL
MEDICAL CENTER

CLINICAL EXCELLENCE AWARD

Emily Callari, RN,
United Memorial Medical Center

LUANN BROWN PERINATAL NURSING AWARDS

THE ERIN KAY FLATLEY PEDIATRIC SEPSIS NURSING AWARD

Julie Albright Gottfried, DNP, RN, CNS,
Rochester General Hospital

SEPSIS ALLIANCE

ACHIEVING WHO-UNICEF BABY-FRIENDLY FACILITY DESIGNATION

UNITED MEMORIAL
MEDICAL CENTER

WOUND CARE HEALOGICS CENTER OF DISTINCTION 2016

NEW YORK STATE PERINATAL QUALITY COLLABORATIVE

UNITED MEMORIAL
MEDICAL CENTER

2016 NATIONAL RECERTIFICATION

UNITY HOSPITAL

AMERICAN SOCIETY FOR GASTROINTESTINAL ENDOSCOPY (ASGE)

LEGISLATIVE AWARD

Ruth Blackmore, MSN, RN, CNOR,
Isabella Graham Hart School of
Practical Nursing

GENESEE VALLEY NURSES ASSOCIATION



“Oncology patients are going through the toughest battle many of them have ever faced. It’s a scary, confusing, painful process and we are here to do our very best to provide our patients with emotional as well as medical support. Making sure patients and their loved ones fully understand what is happening is incredibly important.”

KNOWING

CHELSIE IKELER

From her own experience, she recognizes the importance of clear and compassionate communication throughout the entire patient journey.

CONNECTING WITH THE FUTURE: NEW KNOWLEDGE, INNOVATIONS AND IMPROVEMENTS

As our patients' needs rapidly evolve – and healthcare technology tries to keep pace – our nursing team stays ahead of the curve. The following vignettes are examples of the ways we're meeting today's challenges and preparing for tomorrow's.

PREPARING FOR SAFE SLEEP THROUGHOUT ROCHESTER REGIONAL

Sleep-related incidents are the number one preventable cause of death in infants under the age of one. Each year, more than 3,500 babies die in their sleep suddenly and unexpectedly from accidental suffocation, strangulation and sudden infant death syndrome (SIDS). According to Cribs for Kids, a national infant sleep initiative, the infant is found in an unsafe sleep environment in 90% of these deaths.

National, state and local groups are working hard to educate parents about safe sleep and to warn them about the dangers of suffocation or entrapment. Cribs for Kids has a certification program for organizations that implement exceptional hospital-based infant safe sleep programs with staff training and education, a safe sleep policy, parental education and modeling, a wearable blanket program and community outreach.

Rochester General Hospital and Newark-Wayne Community Hospital are two of five hospitals in New York State to be named Gold Certified National Safe Sleep Champions. This is the highest designation offered by Cribs for Kids. In addition, United Memorial Medical Center has been recognized as a Silver Certified National Safe Sleep Hospital for its commitment to promoting safe sleep environments and practices.



*Rochester General Hospital and
Newark-Wayne Community
Hospital named Gold Certified
National Safe Sleep Champions*



*United Memorial Medical
Center has been recognized
as a Silver Certified National
Safe Sleep Hospital*

BRIDGING THE GAP

WITH AN INTENSIVE NURSING CARE UNIT

What happens when a patient needs more intensive nursing attention than a traditional unit, but not as much physician care as an intensive care unit (ICU) admission requires? Unity Hospital has bridged this gap with a 12-bed Intensive Nursing Care Unit (INCU).

The standard inpatient patient-to-nurse ratio is 5 to 1, while the ICU ratio is 2 to 1 – and Unity’s INCU has a ratio of 3 to 1. The INCU patient-to-technician ratio is also lower (at 6 to 1), for more support for patients who need more frequent monitoring, assessments and interventions.

This level of care allows us to meet the patient’s actual medical needs. It can significantly improve health outcomes and save lives. This innovation can also save money for patients, hospitals and insurance companies – decreasing time in the ICU and decreasing returns to the ICU.

The results of this new unit have been excellent. Feedback from INCU Patient Satisfaction Surveys collected during leader rounding shows:

Overall rating of the nursing staff:
90% COMPLETELY SATISFIED

Nursing staff treating you compassionately and respectfully:
95% COMPLETELY SATISFIED

Understood your plan of care for the day:
98% COMPLETELY SATISFIED

Wait time in response to your call light request:
86% COMPLETELY SATISFIED

Understood my medications and treatments:
91% COMPLETELY SATISFIED

Consideration given to my family and visitors:
98% COMPLETELY SATISFIED





REDUCING HEMOLYZED PHLEBOTOMY SPECIMENS

In 2016, the Rochester General Hospital day of surgery Admission team noticed that the incidence of hemolyzed specimens had increased, resulting in decreased patient satisfaction, increased workload for the team and potential delays to the OR. The team initiated a Performance Improvement Project that:

- Collected data and analyzed hemolysis reports between January and June 2016.
- Quantified the incidence of hemolyzed samples by comparing unit-reported and hospital data.
- Identified trends and factors contributing to hemolysis (via a log that tracked lab tests rejected, reason for rejection and comments by phlebotomist).
- Recognized and defined the impact of hemolysis on patient care.
- Researched interventions to decrease hemolysis and incorporate those into daily practice.
- Rolled out mandatory self-learning packet and implemented best practice recommendations.
- Instituted tracking log of hemolyzed specimens' percentage to compare to previous data.

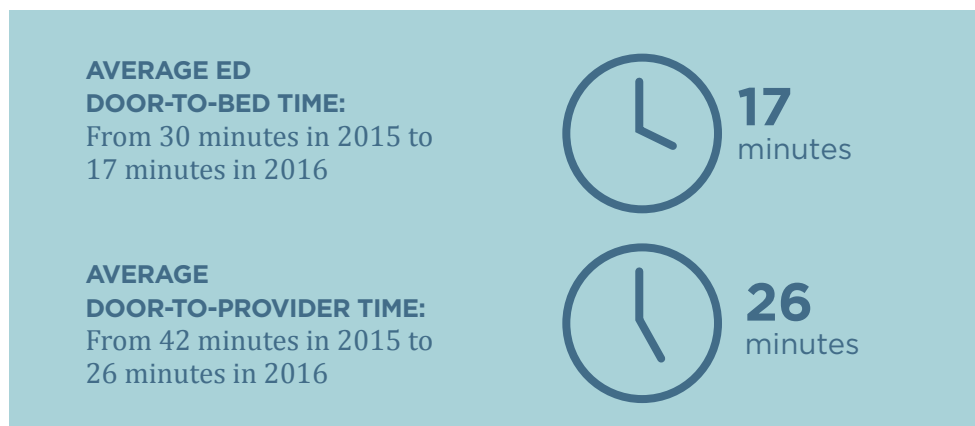
They set a goal to decrease the number of hemolyzed specimens to within the 2% benchmark, per the American Society of Clinical Pathology, resulting in decreased redraws without compromising patient satisfaction. They collaborated and wrote an action plan, including the review of literature related to causes of and interventions to decrease hemolysis.

NEW PROCESS INCREASES EMERGENCY DEPARTMENT EFFICIENCIES

In Q1 2016, the emergency department (ED) at United Memorial Medical Center introduced a standardized process to improve throughput metrics, with a concentration on Door-to-Provider, Door-to-Bed, and patients who left against medical advice without being seen or treated.

By standardizing its practice and targets with Rochester Regional, the ED decreased both Door-to-Bed time and Door-to-Provider by approximately 40%. These improvements allow for earlier intervention, support quality and accountability and enhance the patient experience.

According to ED benchmarking, to optimize both patient care and workflow, Door-to-Provider should be under 30 minutes. Here are the improvements we achieved:



Both nurses and providers have been instrumental in the success of these initiatives. With increased collaboration and goal identification, ED leadership and front-line staff have been able to implement changes and provide feedback for continued improvement.



INTRODUCING THE PUPILLOMETER IN THE SICU

When a Rochester Regional Health staff member attended a national critical care conference, she discovered a new technology that she felt would be helpful for our neurological patients.

While assessments for pupillary responses are primarily subjective, this technology electronically measured pupil size and constriction speed. Pupillometry captures and analyzes a series of digital images taken by an infrared camera and creates a patient's pupil light reflex, all available within three seconds. With this cutting-edge technology, changes in pupillary responses could be recognized much more quickly than through traditional methods.

To ensure successful integration of new technology, this staff member engaged her team. She enlisted the help of the newest neuro-interventionalist to “teach the teacher” and educated fellow staff members on the device's use and indications.

The team collaborated to develop a protocol for use in the SICU and other patient care areas. We anticipate future advancements in the ability to scan ID bands and populate information to the electronic medical record.

FACILITATING HOSPITAL TRANSITIONS TO LONG TERM CARE

As patients' clinical care needs become more complex, it can be more difficult to transition from a hospital to a long term care facility. Rochester Regional nursing staff has stepped up, collaborating in many ways, from frequent communication to visiting patients in the hospital. Our nursing teams have embraced the challenge.

For example, one Rochester General Hospital patient had a length of stay of nearly five years. He was on a ventilator and had a dislocated jaw, so it was difficult to place him in a long term care facility. The team created a plan to transfer him to the DeMay Living Center. Providers from Rochester General, DeMay and Newark-Wayne Community Hospital all worked together to make sure medical staff were properly trained, and DeMay nursing staff spent time at Rochester General learning the patient's care needs. On the day of transfer, a hospital nurse and patient care technician went to the nursing home to make the patient comfortable and to train the rest of the nursing team over the course of two shifts.

NAVIGATING PATHWAYS TO EXCELLENCE IN LONG TERM CARE

All six Rochester Regional Health long term care facilities have started the journey to attaining American Nurses Credentialing Center Pathway to Excellence in Long Term Care designation. This designation recognizes organizations whose focus and support of nursing fosters an environment that leads to professional development, engagement and improved resident and patient care.

Pathway to Excellence is about creating a foundation for front-line nursing staff to be engaged in decisions about nursing practice and participating in decision-making that affects their practice. The standards set forth in the program build on one another, leading to a positive practice environment. For the first time, nursing councils are being formed in each facility and will be the conduit for increased communication and involvement for all staff. Park Ridge Living Center submitted its application in December 2016.



ROCHESTER
REGIONAL HEALTH