

WakeMed Cary Hospital celebrated its 25th anniversary this month. Originally known as Western Wake Medical Center, the 80-bed facility opened on December 16, 1991, nearly 10 years after WakeMed (then called Wake Medical Center) first sought permission to build a hospital in Cary. The delay was caused by several years of court battles between WakeMed and Kentucky-based Humana Inc.,

who also wanted to build a hospital in the area. In the end, the N.C. Court of Appeals granted the beds to WakeMed and the facility was built to replace the former Western Wake Hospital in Apex.

Over the past 25 years, Cary Hospital has nearly doubled in size and today has 156 beds, 1,135 employees and an 810-member medical staff. The scope of services has also

expanded to meet the needs of the growing communities of Cary, Apex, Morrisville, Holly Springs and Fuquay-Varina. In Fiscal Year 2016, Cary Hospital had nearly 13,000 discharges, 2,300 births and over 45,000 emergency department visits. Hip, hip hooray for Cary Hospital and here's to many more years of serving our community!





Early in 2017, WakeMed will launch our new employee recognition program – the Pyramid Society Award. Designed to recognize and reward employees who go above and beyond their job role to help us achieve our Aspirational Goals, the Pyramid Society Award will replace the Circle of Excellence (COE). Winners will be nominated by peers and honored for outstanding performance in one of the eight categories that are linked directly to WakeMed's strategic plan Aspirational Goals.

A team representing many departments has been working hard since last spring to align the program with our strategic plan and make it easier to nominate exceptional colleagues. While there are changes to the new program, many of the key award elements of the COE – including the surprise visits, PDO gift and *Microscope* coverage – will remain the same.

### **What's New: Pyramid Society Award**

- Eight award categories: Preferred Partner, Innovation, Extraordinary Team, Fiscal Responsibility, Value Leader, Culture of Safety, Quality and Healthy Community (the aspirational goals of Wake Way and Highest Ethics & Standards are not included as categories because staff are expected to demonstrate these behaviors at all times)
- There is only one nomination form for all eight categories and fewer questions to answer

PYRAMID
Society

- Employees can nominate colleagues for only one of the award categories
- Previous recipients are eligible to win in the same category every three years

Nominations will be accepted starting in early 2017. Look for details about how to nominate a worthy colleague – or two or three! – on the WakeMedWeb, WakeMed Weekly and *Microscope*.





### NOW AT WAKEMED

### Lung Cancer CT Screening

If you are at risk for developing lung cancer, early detection could save your life. In fact, when lung cancer is detected at its earliest stage and treated surgically, survival rates are nearly 10 times better than those diagnosed at later stages. This is one reason WakeMed is proud to now offer low-dose lung cancer CT screening – a non-invasive, painless procedure that can detect smaller nodules or cancer better than a traditional chest x-ray.

WakeMed Imaging Services offers low-dose CT lung cancer screenings to eligible, high-risk patients at Apex, Brier Creek, Cary, Garner, Raleigh and North Raleigh. Low-dose CT lung cancer screening is fully covered under the WakeMed medical plan (both BCBSNC and Aetna) so there is no cost for employees or their dependents to have the screening performed. A physician's order is required for this screening, so talk to your primary care physician about risk factors and the benefits of a low-dose CT lung cancer screening.

### Are You Eligible for a CT Lung Cancer Screening?

Answer the questions below to see if you are eligible for a lung cancer CT screening exam.

- Are you a current smoker or a previous smoker who has quit within the past 15 years? ...... Yes
- Have a smoking history of at least 30 pack-years (1 pack a day for 30 years,
- or 2 packs a day for 15 years). 

  ✓ Yes □ No
- New or changing cough
- Shortness of breath that you've never felt before
- Coughing up blood
- Unexplained weight loss
- Chest pain
- Fever

If your answers match those checked above, you may benefit from a low-dose CT Lung Cancer Screening. To learn more, talk with your primary care physician.

### Cary Hospital Re-certified as Primary Stroke Center

Cary Hospital recently received recertification as a The Joint Commission Primary Stroke Center. The recertification involved a rigorous onsite review in October with surveyors evaluating compliance with stroke-related standards and requirements, including program management, the delivery of clinical care and performance improvement. Certification for Primary Stroke Centers is awarded for a two-year period to Joint Commission-accredited acute care hospitals.



**Jerry Docking** (Pathology Labs) was named Preceptor of the Year by Wake Technical Community College Phlebotomy Program. He was recognized for outstanding service to students as a teacher and mentor, as well as his willingness to promote the phlebotomy program at Wake Tech.

**Andrew Buzan**, MD, (WPP – Hospitalists) was selected as the 2016 Campbell University School of Osteopathic Medicine's Preceptor of the Year for the Raleigh Region. This award was chosen by the 43 CUSOM students based here at WakeMed.

**Toni Mullen**, RN, (Staffing Resources) earned a bachelor's degree in nursing (BSN) from Winston Salem State University.

**Deborah Olexy**, RN, (Home Health) received her certificate for OASIS Specialist – Clinical.

**Melissa Fisher**, RN, (Home Health) earned nursing case management certification.

**Gracie Malkoch** (Patient Case Management) became a certified case manager (CCM).

**Patricia Lippman**, RN, (Surgical Services – WakeMed North); **Misty Alford** BSN, RN, (Invasive Cardiology); and **Amy Smith**, RN, (Surgical Services – Endoscopy) became healthcare accreditation certified professionals (HACP).

**Vicki Whitley**, RN, (Administration – Cary Hospital), **Dee Darkes** (WPP – Administration) earned nurse executive – advanced certification (NEA-BC).

**Aaron Byrd** (Mobile Critical Care Services) was elected as president-elect of the board of directors of the International Association for Flight and Critical Care Paramedics (IAFCCP). **Daniel Nayman** (also of Mobile) was elected a member of the organization's board of directors.

**Brendan Berry**, MD, (WEPPA) was elected president-elect of the board of directors for the Air Medical Physicians Association (AMPA).

**Erika Nicholson**, RN; **Marie Green**, RN, (both of 3B CVSIC); and **Kelli McGuire**, RN, (CICU) received cardiac/vascular nurse certification.

**Stephanie Schlake**, RN, (3B CVSIC) received medical/surgical certification.

**Kelly Wiseman**, BSN, RN, (AHEC) was named Health Systems Nurse of the Year by the North Carolina Nurses Association (NCNA).

Corttney Scherer, RN; Katie Simpson, RN; Laura Bell, RN; and Carol King, RN, (all of 2W ICU – Cary Hospital); Emily Haupt, RN; Kayla Jones, RN; and Lynnise Rivers, RN, earned critical care nursing certification (CCRN).

**Theresa Jones** (Clinical Resource Management) completed her licensed clinical addiction specialist (LCAS) certification.

**Brenda Smith**, RN, (Surgical Services – Endoscopy) became a certified gastroenterology nurse (CGRN).

**Elizabeth Penny** (WakeMed Rehab) became a certified clinical aromatherapy practitioner.

**Jeannatte Bojang**, NAI, (3A CVIC) earned her master's degree in education.

Ming Yang and Renae Monroe, NT (both of 3A CVIC) completed NAII certification.

**Mary Pennington**, RN, and **Denise Pennell**, RN, (both of Surgical Services) presented at the AORN trauma conference on October 1.

 $5\mathrm{C}$  Medicine congratulates Kaytlin Atwood, BSN, RN, on her new role as Clinical Educator/Supervisor.

Julia Kern, RN, (Emergency Department – WakeMed North) and Denise Messick, RN; Deborah Ballard, RN; Jamie Bunn, RN; Aimee Saunders, RN; Ashley Salter, RN, (all of Emergency Department – Garner Healthplex) all became certified emergency nurses (CEN).

Carol Jacobson (Home Health) became a CPR instructor.

**Sharon Harris**, RN, (Home Health) earned ambulatory care nursing certification.

 $\label{eq:continuity} \textbf{Erin McCarthy}, \text{BSN}, \text{RN}, \text{(Staffing Resources) obtained certification through HACP}.$ 

**Katie Kuhlenschmidt**, RN; **Haywood Wagner**, RN; and **Tara Bruce**, RN, completed the 2016 Periop 101 Internship Program at Cary Hospital Surgical Services.

### Information Services Transformation Underway

With over a million patient encounters each year, it goes without saying that WakeMed not only uses A LOT of technology, we also generate an incredible amount of data. We've made significant investments over the past several years in Epic, technology infrastructure and new hardware, and we rely heavily on our Information Services (IS) team to help us harness the power of this technology.

While the IS team is always evolving, this year the team has proudly undertaken a major departmental transformation to help us maximize our investments in technology, while helping WakeMed achieve its Strategic Plan goals. Led by Vice President & Chief Information Officer Denton Arledge and Chief Medical Information Officer Ben Alexander, MD, and with the guidance of Helen Thompson, an experienced consultant with B.E. Smith, the department has positioned itself to support WakeMed's changing needs related to technology and data.

"With the implementation of Epic, the power of data available to us is of immense value from a patient care and quality perspective, and can also have a significant impact on our strategic, operational and financial planning," explains Arledge. "Our team is committed to helping WakeMed achieve its strategic plan goals while continuing to enhance the service we provide to our customers –employees, physicians and patients."

This transformation has resulted in restructuring the team to better align with WakeMed's current and future IS needs, which includes establishing:

 A Clinical Informatics & Decision Support team which will foster use of Epic and other information technology to drive better patient outcomes, organizational efficiency, and improve access to information for better decision making.

- · A formal Program Management Office to provide leadership for major IS projects, programs and initiatives.
- Multidisciplinary IS governance committees designed to ensure members from key operational areas of the
  organization are closely involved in IS governance, data collection and utilization, IS security, and future IS
  investments.
- Formalized opportunities for career and professional growth to ensure we continue to recruit and retain the best and brightest IS professionals.
- Alignment of all quality reporting and data functions throughout the system for most effective use information that meets the needs of clinical and operational leaders.

"Health care is an information business, where technology and data – whether clinical or operational – drives nearly every decision we make," explains Dr. Alexander. "With that said, health care is also a highly personal business –we're impacting the lives of our patients and their families every day. Our goal with this transformation is to enhance the way WakeMed uses technology to: improve patient care; enhance our ability to make strategic decisions and; strengthen relationships with our partners, including employees, physicians and community organizations."







Diana Rhyne

Bill Lagarde, MD

Aimee Williams

## WakeMed CRI Improving Patient Care Through Research

WakeMed's Clinical Research Institute (CRI) provides oversight and governance for all pharmaceutical, biotech and medical device studies conducted at WakeMed. Under the leadership of **Diana Rhyne**, director, and **Bill Lagarde**, MD, medical director, along with **Aimee Williams**, clinical research manager, the institute is actively expanding their efforts to partner with researchers. The team works in partnership with WakeMed's Institutional Review Board (IRB) and with physicians from many specialty areas to contribute to the future of health care through participation in clinical studies.

"The WakeMed CRI offers an ideal site for clinical research organizations seeking participants for pharmaceutical, biotech and medical device studies. These kinds of clinical research opportunities are an excellent way to contribute to our mission through innovation, technology and collaboration while improving patient care," commented Rhyne.

For more information on clinical research studies available at CRI, visit www.wakemed.org/clinical-research-institute or contact Rhyne at DiRhyne@wakemed.org or Dr. Lagarde at BLagarde@wakemed.org.

**NEWS FROM WAKEMED PHYSICIAN PRACTICES** 

### **Welcome New Physicians**



**Kavitta Allem**, MD WPP – Rheumatology



**Judy Brangman**, MD WPP – Knightdale Family Practice



**Kurt Ehlert**, MD Wake Orthopaedics



**Habib Masood**, MD WPP Hospitalists, Cary Hospital

### **Welcome New Advanced Practice Providers**

**Jessica Anstoetter**, NP WPP – Midlevel Program

Emily Carlson, NP WPP – Pulmonology/ Critical Care Medicine

**Sara Johnston**, PA WakeMed Urgent Care

**Paula Jones**, NP WPP – Hospitalists

**Laura Lanier**, NP Wake Orthopaedics **Presley Pearson**, PA WPP – Gastroenterology

Allison Porter, PA WPP – Heart & Vascular Physicians

**Edmond White**, NP WPP – Midlevel Program

**Jewell Whitmer**, CNM WPP – OB/GYN – Morrisville



## Get to Know Our New Aetna Medical Plans

**Changes to Coverage** 

Several changes have been

coverage and costs, please

made to coverage and

services for 2017. For

complete details about

see your 2017 Benefits

Aetna representative.

Handbook or contact our

WakeMed is transitioning to Aetna for our medical plan for 2017. Here are some things you should know to be prepared for the transition:

- Keep an eye on your mailbox: Aetna ID cards will be mailed to employee home addresses (as listed in Lawson) in mid-December. OptumRx began mailing prescription drug cards to home addresses in November. Please watch for your ID cards, and remember that the medical plan (Aetna) ID card will be separate from the prescription drug (OptumRx).
- Know who to call: Aetna has provided WakeMed with a dedicated customer support phone line. If you have questions about your coverage or need assistance determining which network a provider is in, call 1-855-824-4306.
- **Get online:** Aetna's online portal offers access to your ID cards, claim information, where you are in meeting your deductible, etc. More information about the online portal will be available prior to January 1.

### **Maternity Benefit Changes**

There is no longer a copay for maternity care. Eligible participants are only responsible for the deductible and coinsurance. Maternity services for dependent children will be covered as follows:

- Primary care copay for visit to confirm pregnancy.
- Prenatal & postnatal care covered 100 percent, delivery covered at the designated maternity benefit level.
- When the dependent child gives birth, the baby (employee's grandchild) is not eligible for coverage under our medical plan. The only exception is if the employee legally adopts the baby.

### Changes at a Glance

**Emergency Room Visits:** There are no longer increased copays when visiting the Emergency Room. Each visit will be the same copay no matter how many times you visit the Emergency Room throughout the plan year.

**MRI/CT/MRA:** These diagnostic tests will no longer require precertification.

**Hearing aids:** Our plan now covers two hearing aid devices every three years.

**Durable Medical Equipment:** There is only one deductible and coinsurance for all tiers (excluding Out-of-Network).

**Pharmacy Benefits:** All 90-day prescriptions – even those covered at 100 percent – must be filled by one of the following:

- WakeMed Pharmacy or
- OptumRx Mail Order

To transfer a prescription to the WakeMed Pharmacy, complete the transfer form on the Pharmacy page of the WakeMedWeb. To enroll in the OptumRx mail order program, go to the OptumRx website at www.optumrx.com/myCatamaranRx and follow directions to sign up for mail order.

### A Note about Arkansas and Vermont

- Aetna is not accepted in these two states, so keep that in mind when traveling.
- If there is an emergency while you are visiting Arkansas or Vermont, it would be covered as an out-of-network emergency visit.

### **Get the Most out of Your Medical Plan**

Did you know that many preventive and diagnostic services are covered under our medical plan at 100 percent – that means you pay no out-of-pocket costs (when seeing an in-network provider). We encourage employees to be proactive and access these services as a way of keeping you and your family healthy.

- Annual physical with a primary care provider
- Prenatal care
- Registered dietitian
- 2D and 3D mammogram
- Colonoscopy (preventive and diagnostic)
- Chemotherapy and radiation (performed in an office setting only)

To learn more, consult the 2017 Benefits Handbook or contact the Benefits team at ext. 08141.

### TIME IS RUNNING OUT

### to Spend Flexible Spending Account Funds

The end of the year is just around the corner, which means time is running out to use your Flexible Spending Account (FSA) funds for 2016. Unused money in your Health Care FSA between \$5 and \$500 will roll over to 2017, but any unused funds less than \$5 or over \$500 will be forfeited. If you have an FSA, please take a few minutes to check your account balance online at www.connectyourcare.com. If you have over \$500 remaining, here are some things to keep in mind:



- Provide any requested substantiation documentation so it will be resolved promptly.
- File any outstanding reimbursement requests you may have.
- You will have until March 31, 2017, to file any claims incurred in 2016.
- Funds up to \$500 remaining in your Health Care FSA will roll over into your 2017 Health Care FSA account by mid-April.
- Dependent Care FSAs are only for child or adult day care related expenses.

In addition to copays, coinsurance and deductibles, you can use your FSA for a number of out-of-pocket costs for yourself or any immediate family members (even if they are not covered by our medical plan).

You can also use your FSA to pay for select over-the-counter medical supplies and equipment, such as crutches, bandages, blood sugar test kits and more, when you have a valid order from your physician. A detailed list is available on the Human Resources page of the WakeMedWeb. If you have any questions, call ConnectYourCare at 1-877-559-1143.



### **Shevonne Carter**

(Respiratory Care Services) sang the National Anthem after the WakeMed Color Guard presented the colors at the Raleigh Campus service.

Right: Colonel **Osi Udekwu**, MD, medical director (Trauma Services) gave the keynote address.



WakeMed hosted Veterans Day recognition ceremonies on Friday, November 11, to honor all WakeMed employees, physicians and volunteers who are veterans or currently serving in the U.S. Armed Forces. The Raleigh Campus ceremony included special remarks from **Donald Gintzig**, president & CEO, and a keynote address from **Osi Udekwu**, MD, medical director (Trauma Services), who currently serves as the CCAT coordinator at the 113 DC Air National Guard, Joint Base Andrews. The WakeMed Color Guard presented the colors and **Shevonne Carter** (Respiratory Care Services) sang the National

Anthem. **Lil Galphin** (Spiritual Care Services) offered an invocation and **Seth Blanchard** (Clinical Engineering) read the President's Proclamation. **Tom Gough**, senior vice president and administrator – Cary Hospital, and **Sheri DeShazo**, RN, senior vice president and administrator – WakeMed North spoke at the services at their respective facilities, which also included invocations by Spiritual Care's **Tom Trochum** (Cary) and **Patricia Cook** (North), a song and the reading of the President's Proclamation.

# WakeMed Partners with The Blood Connection

On an average day, WakeMed uses over 50 units of blood products (including red blood cells, platelets, plasma and cryoprecipitate) – which adds up to more than 18,000 units per year! To improve efficiency and save money on this valuable resource, this October, we changed our primary blood product vendor from The Red Cross to The Blood Connection. Headquartered near Greenville, S.C., The Blood Connection is the largest independently managed, non-profit community blood center in the region. The company had been WakeMed's secondary blood product provider for several years and making them our primary provider will save approximately \$400,000

Because The Blood Connection headquarters are several hours away, they are supplying us with 50 percent more blood products than we need to ensure we are well prepared to respond to any emergent situation that may arise. The Blood Connection is also helping us reduce the need to discard blood products – particularly

platelets, which have a shelf life of just five days. Formerly, expired platelets had to be thrown away, which cost us over \$100,000 per year. Now The Blood Collection will pick up platelets that are a couple days old and replace them with fresh ones at no additional charge. The returned platelets are then redistributed to other hospitals for use – helping other patients who need them and maximizing the donation of this valuable resource.

"Our Supply Chain team, as well as Socius Health Solutions, were very instrumental in making this partnership come together," said **Christine Sillings**, MD, (Raleigh Pathology Laboratory Associates). "A lot of effort went into the transition, from preparing to store the additional blood products to developing a return process for the unused products. Things have gone smoothly thus far and we look forward to building on this partnership with The Blood Connection."



### Save the Date: Upcoming Blood Drives

WakeMed and The Blood Connection are partnering to host blood drives at all three of WakeMed's hospitals this January. Additional details and sign-up information will be shared in the coming weeks – check the WakeMed Weekly to learn more!

- Thursday, January 12 Raleigh Campus
- Friday, January 13 Cary Hospital & WakeMed North



### **MANAGEMENT UPDATES**

### Matthew Nathan, MD, Named Senior Vice President, WakeMed Physician **Practices**



After joining WakeMed this fall as interim administrator of the Raleigh Campus, Matthew Nathan, MD, is transitioning to senior vice president, WakeMed Physician Practices, this month. In this role, he will work in a dyad partnership role with Carolyn Knaup,

senior vice president, Ambulatory Services & Physician Operations, to drive the strategic performance, operations and growth of WakeMed Physician Practices. Dr. Nathan brings more than 30 years of clinical and operational leadership experience in health care, most recently serving as the Surgeon General and Chief of the Navy's Bureau of Medicine and Surgery in Washington, D.C. He earned his medical degree from the Medical College of Georgia. He also holds a master's of science from the Industrial College of the Armed Forces and a bachelor's degree from the Georgia Institute of Technology. He is boardcertified and holds Fellow status in the American College of Physicians and the American College of Healthcare Executives.

### Kimberly R. Yelton Named Director of **Revenue Integrity**



Kim Yelton, Coding & CDI manager, has been named WakeMed's director of revenue integrity. Yelton originally joined WakeMed in 2003 with Patient Financial Services and later transitioned to Health Information Management. She departed

the organization in 2013, returning in 2015. In her new role, Yelton will be responsible for maximizing gross revenue capture across WakeMed system. She will serve as the chief liaison between revenue cycle and clinical departments and ensure the availability and interpretation of reporting and analytics necessary for the clinical and revenue cycle departments to drive financial improvement.

### **COMINGS & GOINGS**

WPP - Neonatology welcomes Meagan Casey, NP, and Ellen Ford, NP.

Emergency Department - WakeMed North welcomes Morgan Soper, NAII; Elaine Mosley, RN; Kerrie Gottschall, RN; Andrew Hnat, RN; and Julia Kern, RN.

CICU welcomes Kimberly Broadwell, RN; Laura Remsen, RN; and Ann N'Goran, RN.

Surgical Services – Raleigh Campus welcomes Donna Gunter, RN, and Tiffany Mitchell.

6C welcomes Brittany Johnson, NAI, and Tara Lassiter, NAI.

The Clinical Administrators welcome **Melanie** Pellow, RN; Erin McCarthy, RN; and Ginny Ingersoll, RN.

Heart Center Administration welcomes **Shavonne** Williams, RN, and Mary England.

1C and 1D Clinical Evaluation Areas welcome Randi Jones, BSN, RN; Malay McDuffie; Shellynn McNeil; Earl Shepard; Erica Griffin; Priscilla Clark; Peris Sills, RN; Jermaine Cotton; Josephine Omego, RN; and Megan Ford.

Pathology welcomes Julia Dugger.

Surgical Services – Endoscopy welcomes **Grayson** Moore, RN, and Tiffany Mitchell.

Patient Case Management welcomes Gracie Malkoch, RN.

Staffing Resources welcomes Sharon McDonald BSN, RN.

### **ADDITIONS & ATTACHMENTS**

**Alicia Thompson** (Emergency Department – Brier Creek Healthplex) and husband Brent Pearley welcomed son Brenton Miles Pearley on July 25.

Erica Miller, RN, (Emergency Department -WakeMed North) married Alex King on October 14.

### **SMAT 800** STEPS UP FOR **HURRICANE**

RELIEF



When Hurricane Matthew stormed through North Carolina in October, leaving widespread power outages, wind damage and flooding behind, the CapRAC State Medical Assistance Team (SMAT-800) which is based out of WakeMed, was dispatched to staff the medical support shelter housed in the O'Berry Neuro Medical Treatment Center in Goldsboro. The doctors, nurses, paramedics, emergency medical technicians (EMTs), respiratory therapists and other support staff on the team worked nonstop to ensure that shelter residents remained as comfortable as possible.

"We received the mission with a short window to mobilize our team and many WakeMed employees offered to help. It was not only the employees who volunteered to work in the medical shelter, but also those in clinical departments who adjusted their schedules and support services, like MPD, who quickly filled our just-in-time requests for supplies," commented Dale Hill, manager (ESI & Special Operations). "The success of our regional SMAT depends on the support of volunteers and a strong lead hospital and, once again, the WakeMed team showed that we are committed to caring for our community."

In total, 23 WakeMed employees - which included 18 volunteers plus five employees who work in the Emergency Services Institute or for CapRAC - worked at the shelter over a period of 13 days. SMAT-800 provided care for patients discharged from Wayne Community Hospital but required nursing care as well as community members whose home health services had been suspended during the storm and evacuees who needed medical assistance. "It was so rewarding to help a group of people who were in need and really appreciated what we did for them," commented Tonya Disorbo, RN, clinical educator/supervisor (Neuro ICU), who spent four days volunteering. "As a first-time volunteer, I really appreciated the structure that was in place. There is a very effective chain of command, so you can jump right in and do your job effectively."

CapRAC's SMAT-800 team is made up of volunteers with medical or non-medical backgrounds who wish to assist during public health emergencies or disasters that impact the health care infrastructure of a community. If you are interested in becoming part of this team, visit www.ServNC.org to create your volunteer profile and sign up for training. To learn more, contact Janis Brown at ext. 06265, or email Janisbrown@wakemed.org.

# WakeWay Exce ence

### WW2E Update: Physician Compact Finalized

After nine months of thoughtful discussion, collaboration and revision, the WakeMed/ Physician Compact was recently approved by our medical staffs. The compact is an informal agreement between WakeMed and all members of the medical staffs that outlines what specific things physicians can – and should – expect from WakeMed, and vice versa. A similar compact was approved last year for the WakeMed Board of Directors and a leadership compact is also in development.

More than 400 physicians were involved in developing this compact, ensuring that many points of view and voices were included. Based on mutual respect and a common goal of providing the best patient care possible, the compact reflects the Wake Way Behaviors and

- includes expectations for physicians such as:
- Treat staff with respect and become the role model for professionalism at WakeMed. Continuously seek to improve communication among providers, staff, administrators, and patients.
- Provide the highest value care.

 Be transparent around strategic decisions, including competition/partnerships/clinical care. In return, WakeMed will:

- Provide infrastructure and resources to support team-based medical care.
- Ensure equitable treatment and advocacy for all physicians.

These expectations are just a few of the many items outlined in the full compact, which is available on the WakeMedWeb. While the compact is part of our WW2E work, the success of this initiative also reflects our ongoing efforts to work more closely with our physician partners to ensure positive working relationships and – most importantly – exceptional patient care.

"The development of a formal written physician compact is an outstanding opportunity for WakeMed physicians, staff and administrators. For physicians – whether independent, contracted or employed - it clearly outlines what we can expect from WakeMed as we strive to provide state-of-the-art patient care," explains President of the Raleigh Campus Medical Staff **Duncan Phillips**, MD, (WPP – Pediatric Surgery). "For staff and administrators, the compact outlines expected behaviors from physicians in both clinical and non-clinical aspects of care. It is the framework for a 'win/win' relationship – allowing us to know exactly what to expect from one other, while ensuring all physicians are treated equally and in an open, honest, transparent fashion. I look forward to seeing WakeMed continue to collaborate with providers on clinical, operational, and strategic initiatives to provide outstanding care to our patients and our community."



WakeMed's Good Catch Program encourages staff to positively impact patient safety by speaking up, reporting good catches and sharing their experiences. If you have made a good catch, share it by clicking the "Report a Good Catch" link on the WakeMedWeb (it will take you to the online reporting site).

Josh Mitchell (Therapy Services Supplemental Pool) and Sharlin Powe (Environmental Services) both demonstrated outstanding awareness of their surroundings that – when combined – led to a Good Catch for a WakeMed patient. Josh was heading home from work when saw a man walking down New Bern Ave. who looked like a patient being treated on 2C. Josh contacted the hospital and shared what he had seen. When the missing patient status was confirmed, overhead pages notified Raleigh Campus staff of the patient's description. Sharlin heard the description and later, on her way home from work, saw a man matching the description of the missing patient getting in a vehicle. Sharlin contacted Campus Police and followed the car for more than 20 miles to keep track of the patient. When the car stopped in a parking lot, Sharlin waited with the patient until Campus Police arrived to transport him safely to WakeMed.

## Meet the NEW Metrics & This &

The WakeMed Board of Directors recently approved revised metrics that we will use to track progress toward our 10 Aspirational Goals for Fiscal Year 2017. Some of these metrics are the same as those that were set when our strategic plan was introduced in 2015, but many are new. The metrics were chosen because they are specific and measurable and can be reported on regularly – many of them are reported monthly, though some are quarterly or annually.

It is important for all staff to be familiar with these metrics as they will provide a framework for specific, department-level tactics and policies. An overview of the metrics – and how we are currently performing – is below, but we encourage you to speak to your manager about these metrics and learn what initiatives are ongoing in your area to support them.

Value Leader		Aspirational Goal	Metric	2017 Goals*	Current Results	Improves Going	Goal Reached
Medicare readmission rate for total joint replacement (hip and knee)		Value Leader	Total operating expense per adjusted discharge	\$11,145	\$11,451		_
Top 10 - Quality   Leapfrog Group Scores   Raleigh at an A   Cary at a B   Cary at a A   Cary at a			Medicare readmission rate for acute myocardial infarction (AMI)	11%	3.28%		<b>/</b>
Reported serious preventable harm events (cumulative for the fiscal year)  CAUTI cases (cumulative for the fiscal year)  CAUTI cases (cumulative for the fiscal year)  CIABSI cases (cumulative for the fiscal year)  CAUTI cases (camulative for the fiscal part of PC cases on the page ment surveys  CAUTI cases (camulative for the fiscal page for the fiscal page for the fiscal page for the fiscal page for the fisc			Medicare readmission rate for total joint replacement (hip and knee)	2%	1.9%	_	<b>/</b>
CAUTI cases (cumulative for the fiscal year) 39 77		Top 10 – Quality	Leapfrog Group Scores	-	_		_
CLABSI cases (cumulative for the fiscal year) 26 52			Reported serious preventable harm events (cumulative for the fiscal year)	0	31		_
Culture of Safety   Level of Safety rated "Excellent" on PRC survey"   61%   39.3%			CAUTI cases (cumulative for the fiscal year)	39	77	_	
Reported patient falls Lost work days due to workplace injury  Partarordinary Team Employer of Choice percentile ranking on employee engagement surveys Staff turnover rate  Employer of Choice percentile ranking on employee engagement surveys Staff turnover rate  Insolation  Annual savings tied to Community Case Management program  Annual savings tied to Community Case Management program  Annual savings tied to Community Case Management program  Staff turnover rate  Annual savings tied to Community Case Management program  Annual savings tied to Community Case Management program  Staff turnover rate  Percent of deliveries via C-section  23.9%  21.97%  V  Annual savings tied to Community Case Management program  Staff to Community  Millingness to Recommend rated "Excellent" on PRC surveys  63%  50.1%  —  Quality of Doctor rated "Excellent" on PRC surveys  65%  47.9%  400  408  A  —  Innovation  Employees involved in WWZE twork  Anoual ventures that support our mission  Staff provided formal training in the WWZE teners and behaviors  70  68  —  Preferred Partner  Monthly cash donations to non-profits that support our mission  Staff provided formal training in the WWZE teners and behaviors  95  95  95  A  MDB/APPs who state on engagement survey that administration listens to them WakeMed staff on community Board of Directors  WakeMed staff on community Board of Directors  95  95  95  A  Financial Health  Operating cash flow margin  Cash to total debt ratio  Operating revenue per adjusted discharges  Staft, 264% non-MD  Financial Health  Operating revenue per adjusted discharges  Staft, 264% non-MD  Financial Ethical employer rating on employee engagement surveys  79% non-MD  79.64% non-MD			CLABSI cases (cumulative for the fiscal year)	26	52		_
Extraordinary Team Employer of Choice percentile ranking on employee engagement surveys  Employer of Choice percentile ranking on employee engagement surveys  Staff turnover rate  Healthy Community Annual savings tied to Community Case Management program Percent of deliveries via C-section Percent of Deliveries via Perce		Culture of Safety	Level of Safety rated "Excellent" on PRC survey*	61%	39.3%		_
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Staff turnover rate  Realthy Community  Annual savings fied to Community Case Management program  Annual savings fied to Community Case Management program  Percent of deliveries via C-section  Rake Way  Willingness to Recommend rated "Excellent" on PRC survey*  Quality of Doctor rated "Excellent" on PRC survey*  Departments earning PRC 5-Star Awards  Innovation  Employees involved in WW2E work  Investment in external ventures that support our mission  Staff provided formal training in the WW2E tenets and behaviors  To 68  Preferred Partner  Monthly cash donations to non-profits that support our mission  Staff provided formal training in the WW2E tenets and behaviors  MDs/APPs who state on engagement survey that administration listens to them  WakeMed staff on community Board of Directors  Monthly donations to WakeMed Foundation  Primary care provider market share  28% 26.43%  Primary care provider market share  Cash to total debt ratio  Operating revenue per adjusted discharges  Staft, post-Mon-MD  Ethical employer rating on employee engagement surveys  79% non-MD  79.64% non-MD			Lost work days due to workplace injury	90	2		<b>/</b>
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Financial Health Operating cash flow margin Cash to total debt ratio 110% 111.05% Operating revenue per adjusted discharges 11,753 \$12,516  Highest Ethics & Standards Ethical employer rating on employee engagement surveys 79% non-MD 79.64% non-MD			Monthly donations to WakeMed Foundation	\$145,000	\$414,913		<b>/</b>
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Highest Ethics & Standards Ethical employer rating on employee engagement surveys 79% non-MD 79.64% non-MD			Cash to total debt ratio	110%	111.05%		<b>/</b>
			Operating revenue per adjusted discharges	\$11,753	\$12,516		<b>/</b>
		Highest Ethics & Standards	Ethical employer rating on employee engagement surveys				

 $*Percentile\ ranking\ is\ determined\ by\ comparing\ WakeMed\ patient\ responses\ to\ other\ PRC\ client\ patient\ responses.$ 

 $+\ Goals\ as\ of\ October\ 1,\ 2016,\ and\ subject\ to\ change\ based\ on\ current\ trends.$ 









WakeMed Heart & Vascular Physicians staff held a food drive to benefit those impacted by Hurricane Matthew.





Team WakeMed had a strong presence at the Triangle Heart Walk in October. Thanks to everyone who participated!



# OCUS ON NUTSING

Excellence in the art and science of nursing care and caring





# ONE YEAR!

### 365 Days of Magnet Excellence

On Tuesday, October 16, WakeMed celebrated the one year anniversary of our first Magnet designation. As we gathered to remember the joy and pride this event commemorated, we were reminded that the journey to Magnet-worthy excellence is ongoing and the bar for that achievement is set ever higher. Magnet excellence is largely determined by comparing our outcome metrics (patient, nurse, practice environment, community) to those from other health care organizations internationally. This lofty achievement is based on very real results: no wonder there are only 444 Magnet organizations in the world!









### **Magnet Conference**

In October, WakeMed nurses were able to attend the 2016 ANCC National Magnet Conference in Orlando, Florida. While the conference was abruptly shortened due to Hurricane Matthew, not even the storm could dampen our enthusiasm. This year's conference theme was "Magnet: Empowering Nurses to Transform Health Care" and it was a great opportunity to interact with nurses from other Magnet-designated health systems as well as listen to internationally-acclaimed motivational speakers. A great big thank you to The Volunteers at WakeMed Cary Hospital and the WakeMed Foundation for providing travel funds for our clinical nurses to attend the conference. Stay tuned to hear more from the nurses who attended when they present at Nursing Grand Rounds throughout 2017.

**Cindy Boily** MSN, RN, NEA-BC Senior Vice President & Chief Nursing Officer



### SPEAKING OF NURSING: A NOTE FROM OUR CNO

What an exciting year it has been for WakeMed nurses. During this, our first year as a Magnet-designated health system, we continued our collaborative and innovative efforts aimed at providing the highest quality of care for our patients, families and the community we serve. Some examples of this work include the launch of our Take 5 program, the innovative and nationallyrecognized standard of care for our pediatric behavioral health patients, reductions in hospital falls and infections, and our always stellar pressure ulcer results.

Also new this year was the system-wide adoption of a new clinical competency model and our Nursing Professional Development Program (NPDP), both of which were designed by, and will be monitored by, nurses from all levels of practice.

These and many other achievements are highlighted in this year's Division of Nursing Annual Report, which is now available online and in hard copy. Please take a moment to review the Annual Report and get inspired as you see all that we've accomplished by working together across practice settings and disciplines. We continue to set a new standard of excellence in nursing care and caring...and for that I remain so grateful and proud to be your colleague and a WakeMed nurse!

### Now Available!

Read a copy of the 2016 WakeMed Nursing Annual Report to learn about the Division of Nursing's successes from 2016! You can access the report on the WakeMedWeb from the Nursing Administration page.

All of WakeMed Clinical Administrators have achieved national certifications. Congratulations to the



### Celebrating Nursing Excellence

Congratulations to Pauline Stillman, RN, manager (5A MIC) who was awarded the prestigious WakeMed Nursing Leadership Award in November. The award is given periodically to nurse leaders who demonstrate outstanding leadership achievement. Stillman received the award for her integral part in leading several successful patient outcome initiatives including Take 5, Structured Interdisciplinary Rounds (SIBR), Central Line Maintenance Bundle and more.



### Learning and Growing!

Once again, we exceeded our goals for the number of WakeMed nurses earning higher education degrees and specialty certification. Way to go!

Higher Education (bachelor's degree in nursing or higher)

- End of Fiscal Year 2016: 65 percent
- Fiscal Year 2017 Goal: 67.62 percent

### **National Certification**

- End of Fiscal Year 2016: 34 percent
- Fiscal Year 2017 Goal: 37.45 percent

WakeMed is proud to support nurses interested in pursuing additional nursing degrees or in attaining national certification. Tuition and certification reimbursement, Success Pays and the Helton Awardee Program are just a few options available to you. Visit the WakeMedWeb to learn more.



### 100 80 70 50 40 30 20 10 Professional Interprofessional RN-to-RN Autonomy Adequacy of Development Access and Development Teamwork and Collaboration Responsiveness

Magnet EP3E0 — Must outperform on four of the categories

### % Above Benchmarl **8** % Below Benchmark

### **Excellent Engagement**

More than 88 percent of WakeMed clinical nurses (2,688) completed the 2016 WakeMed Nursing Engagement Survey this past spring. The results revealed that WakeMed nurses are more "engaged" and "content" than the Advisory Board's national benchmark, which surveys over 850,000 nurses. WakeMed nurses outperformed the national benchmark in six categories that Magnet deems reflective of a healthy work environment where nurses can perform at their best.

### Revised Shared Decision-Making Structure

WakeMed's Shared Decision-Making structure was recently revised to better meet the evolving work and interests of WakeMed nurses. The original model was implemented more than four years ago and 2016 provided us the opportunity to look at how well the model reflected the work of nursing and make revisions as needed. Some of the changes include:

- Transition the Informatics Committee to a Council with an expanded focus on interdisciplinary practice
- Added an inter-professional restraint committee under the Nursing Quality Council
- The Education Council was renamed the Professional Development Council to more accurately reflect their work and outcomes
- The Practice Council expanded the CAUTI reporting structure and added a Pain Committee.

YOU are important to us! Reach out to any of your council chairs for more information.



## Microscor

Microscope is a monthly newsletter written by and for the employees of WakeMed. Our goal is to provide employees and friends of WakeMed with the most up-to-date news on all of the hospital system's activities. The Public Relations department thanks all of the employees who contributed to this publication.

We welcome comments and suggestions on this publication and its content. Call (919) 350-8120, e-mail microscope@wakemed.org, or write Microscope, WakeMed Public Relations Department, 3000 New Bern Avenue, Raleigh, NC 27610.

> Kate Wilkes, Editor WakeMed Employees, Photos

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### **Holiday Socials & Year-End Thank You Celebrations**

Please join us for a holiday meal as we celebrate our many accomplishments from 2016, meet new members of our leadership team and share in holiday cheer throughout WakeMed!

Visit the WakeMedWeb to see the schedule!

Don't forget to share your holiday photos! If you have photos of your department or units celebrating the holidays, send them to microscope@wakemed.org to be considered for the January issue.

### **Stay Informed this** Winter with Wmalerts

WMAlerts is an employee alert program that uses text messages and Twitter to keep you informed during inclement weather. You do not need a Twitter account to sign up. To join and receive text updates from WMAlerts (message and data rates may apply):

- Text "Follow WMAlerts" to 40404.
- You will receive a text message (from 40404) when WMAlerts posts an update.
- To unsubscribe, text "Stop" to 40404 at any time.

If you are on Twitter, you can also follow WMAlerts to get updates that way.

WMAlerts is managed by Public Relations and is different from eNotify. All information shared on WMAlerts will also be sent via email, but this is a great way to stay informed when you're on the go or away from a computer.

CALENDAR OF EVENTS ( )

WakeMed 🔀 WakeMed Health & Hospitals

> 3000 New Bern Avenue Raleigh, NC 27610

> > ADDRESS SERVICE REQUESTED

To help you plan ahead, this calendar lists upcoming system-wide events, training classes and community events. For details and fee information, visit the WakeMedWeb. Send calendar submissions to Public Relations or email microscope@wakemed.org.

\$5 Jewelry Sale

Monday, December 19 Raleigh Campus, Andrews Center 7 am to 4:30 pm

### **Aromatherapy: Ancient Wisdom for Modern Times**

February 17-19, 2017

Cary Conference Center

Cost: \$425 for early registration; \$450 within three weeks of class. Please visit www.ishahealing.com to register or email DCox@wakemed.org for details.

### ORGANIZATIONAL DEVELOPMENT

EAP: Releasing Negativity: Altering Thinking for Stress Reduction – Tuesday, Dec. 20, 9 to 11:30 am, Andrews Center (LLink Code=PDEAP-RN)

Communicating Effectively – Thursday, Jan. 5, 8:30 am to 12:30 pm, Medical Office Building, (LLink Code=PDCOM)

**EAP:** Giving and Receiving Feedback – Friday, Jan. 20, 9 am to noon, Medical Office Building (LLink Code=PDEAP-FB)

Impacting Others through Your Behavior -Wednesday, Jan. 25, 8:30 am to 12:30 pm, Medical Office Building (LLink Code=PDDISC)

### Wake AHEC

Perinatal Mental Health: Postpartum Support International Training – Jan. 26-27, Andrews Center

**Commercial Driver Medical Examiner Training** Course – Jan. 28, Cary Hospital

### **NURSING EDUCATION**

Nursing Professional Book Series

• The Florence Prescription: Wednesday, January 4, 4 to 5 pm, conference call

- Lions and Tigers and Nurses: Monday, January 9, 2 to 3 pm, Cary Hospital, Conference Center
- The Other End of the Stethoscope: Wednesday, January 18, 9 to 10 pm, conference call
- Eat That Cookie: Monday, January 23, 11 am to noon, conference call
- A Charge Nurses' Guide: Tuesday, January 24, 7:30 to 8:30 am, NED-B

The Medicine of Compassion – Monday, January 9, 8:30 to 11:30 am, NED C

AWHONN Module 1 "Preconception and Interconception Health" – Friday, January 13, 1 to 4 pm, NED-C

Looking at the Literature: Alcohol Withdrawal **Syndrome** – Saturday, January 14, 10:30 – 11:15 am, Cary Hospital, 3 West Conference Room

Non profit Organization U.S. Postage PAID Raleigh, NC Permit NO. 1307