

Sentara Obici Hospital

2020 NURSING ANNUAL REPORT



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**Stephanie Jackson, DNP,
RN, NE-BC | Vice
President/Nurse
Executive**

A MESSAGE FROM OUR CNE

Dear Nursing Team,

As I put my thoughts together for this report, I found it challenging to capture the magnitude of what we experienced in 2020. It was, by far, an unprecedented year in so many ways. The one constant that we could all count on was each other! There are no words to express the immense gratitude that I have for the Sentara Obici team members, who have maintained the most patient-centric care possible amid a global pandemic, which most of us have never seen and, hopefully, will not again. 2020 certainly taught us many lessons and prepared us to move into 2021 stronger than ever.

While 2020 left a mark on us personally and professionally, we were resilient in providing excellent care for our patients while navigating home schooling our children, acquiring toilet paper, flexing to the ever-changing visitation and PPE guidelines, and the devastating loss of loved ones. Quality, patient safety, service, integrity and people are the values we have built this organization upon. While we felt the impact of COVID-19 on our patient sensitive outcomes, I am confident that our commitments will guide us forward. As we move into 2021, my hope is that we become stronger and more resilient together. We are the key to making this happen through our commitment, teamwork, and personal resolve.

Thank you for choosing Sentara Obici campuses as your employer of choice and making us the healthcare choice of the community we serve! I am so proud of the work that we have accomplished together. Thank you for the grit and determination that you demonstrated in caring for our neighbors, friends, family members, and community through this global pandemic. Thank you for connecting with our patients and their loved ones to provide such compassionate care. Thank you for taking care of each other when we were at our most vulnerable. You are my heroes, and it is an honor to serve as your Nurse Executive. I can see a brighter future right around the corner, and I look forward to working with this amazing team in 2021 to carry out our mission to improve health every day!

Thanks for all you do,

Stephanie Jackson, DNP, RN, NE-BC

Vice President/Chief Nurse Executive



Genemarie McGee,
MS, BSN, RN, NEA-BC

Corporate Vice
President and Chief
Nursing Officer

A MESSAGE FROM OUR CNO

Dear Colleagues,

As I write this letter for our 2020 Nursing Annual Report, I am reminded 2020 was the Year of the Nurse. What a year it was for our profession. I am profoundly grateful for the flexible, adaptable professional nursing staff in our healthcare system. Few of us would have predicted the COVID-19 to do list that suddenly faced us in 2020. We have experienced a rise in patient acuity, patient deaths, and length of stay due to COVID-19. We have converted many non-clinical areas into patient care units. We have expanded to care for ICU patients outside of ICU. We rapidly implemented “just in time training” (JITT) for staff and nurse leaders for redeployment to clinical areas outside their expertise. We postponed elective procedures and surgeries. We experienced shortages of personal protective equipment and changes, sometimes daily, in infection control measures as recommended by the CDC (Centers for Disease Control). We saw a rapid rise in telehealth and home health to meet a wide range of health needs, again including the COVID-19 population. We orchestrated innovative communication between families as we limited visitors to keep everyone safe. We also were the directors of a beautiful orchestra when our patients survived and left our hospitals to be cared for at home by our colleagues in home health, and ambulatory nursing. We managed a 7 day-a-week call center for COVID-19, managed patients telephonically at home, and oh... how those occupational health RN’s screened us all.

Throughout this crisis there has been uncertainty in information, in accuracy of information and projections of what would happen, and how long the pandemic would last. Managing through this ambiguity has been exhausting, for staff, providers, and leaders. I do believe, and know, we at Sentara and in nursing answered this challenge with grace and our best efforts. I am proud that I work for a healthcare company that spent millions to send jets to China to obtain PPE for our staff and providers. I am proud that I work with 8,000 nursing colleagues that rose to the challenge of caring for our patients, COVID-19 and non-COVID-19. I am also grateful to have communities who responded and supported our caregivers. What a year, what a team, what lessons we have learned.

I again say thank you to our clinical teams and support staff. I remind each of us to remember the lives that have been lost and saved. It has taken a toll on us all, please be kind to each other and take care of yourself.

Gratefully, Genemarie McGee

LOOKING BACK AT 2020

While 2020 was not what any of us expected, SOH campuses continued to move forward and made patient care improvements, employee investments, operational, financial and capital investments and engaged our community

Patient Care Improvements:



Implemented **SAFE AT SENTARA COVID Safety Measures**

Expanded hours to ensure convenient and **increased imaging access**



Improved Patient Experience

Implemented patient-centered care tools and techniques



Created a new model to provide the same expert care for both **mom and baby** in the same place

Expanded the use of **Rapid Tele-health Implementation** to meet health care needs during the pandemic

Upgraded Bedside Monitors

Intermediate care monitors continuously monitor pulse rate, oxygen saturation for earlier detection of respiratory complications

Used business strategies, such as **CPI Quality Improvement**, to promote continuous performance improvement

Operational, Financial and Capital Investments:



Successfully Completed Virtual Regulatory and Stroke Certification



Modernized Labor & Delivery Rooms



Upgraded 3D Mammography at Sentara St. Luke's

Completed Phase 1 of 3 of the Sentara Obici Hospital Emergency Department Expansion and Renovation

Added 7,000 square feet of treatment space and a new waiting room



Employee Investments:

Created Diversity, Equity and Inclusion Council

"At Sentara, our differences are our strengths. We intentionally foster a culture of inclusion and belonging in recognition of our employees and the diverse communities we serve."

Hired **180** external employees



Committed to **increasing minimum wage** to \$15 per hour for all employees

Added vital sign monitoring to equipment that integrates with the patients Electronic Medical Record

Enhanced Medical Record & Billing Prelude:

Improves bed utilization and gives users the tools to manage hospital stays from pre-admission through discharge

Resolute: Makes billing workflows efficient, reduces accounts receivable days and helps avoid payer denials

Engage our Community:

Partnered with VDH for COVID Testing



Connected with our community virtually on **Facebook Live** to share important news and milestones, including an Emergency Department Topping Out, Safe At Sentara, and Why We Mask



Partnered with Community Groups to Provide COVID Education in Suffolk and Isle of Wight

Raised over \$40,000 for the United Way to support our local community

Administered 1,300 Drive-Thru-Flu Shots

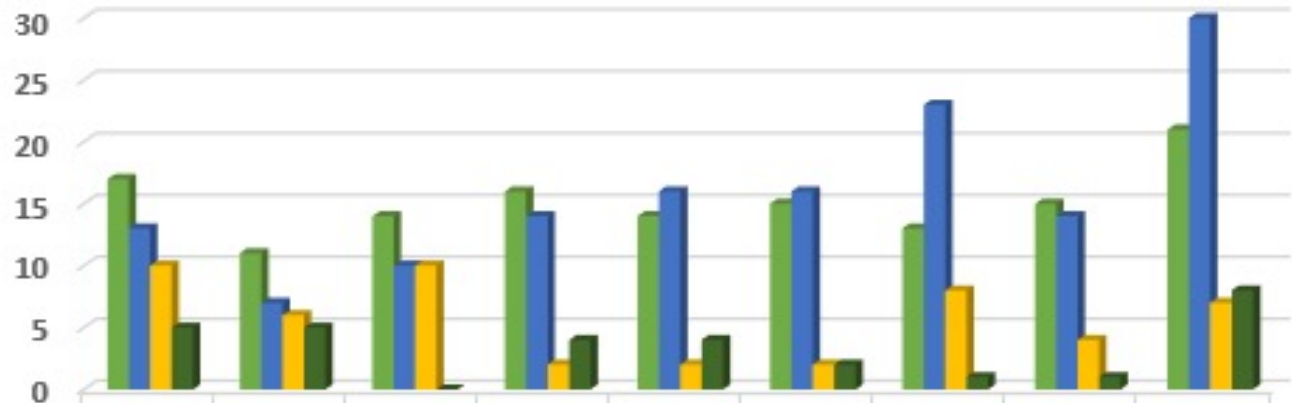
Joined White Coats for Black Lives, the national movement to foster dialogue on racism, as a public health concern

Developed electronic community newsletter reaching over 27,000 Western Tidewater residents each month

QUALITY AND PATIENT SENSITIVE MEASURES

Bedside nurses influence patient outcomes through their day to day care of the patient. Sentara Obici tracks outcomes of the patient sensitive indicators (PSI). PSI are those metrics that the nurse directly impact. There are many PSI that are tracked at SOH, such as: falls with injury, Hospital Acquired Pressure Injuries stage 2 or greater, (HAPI) Central Line Associated Bloodstream Infections (CLABSI) and Catheter Associated Urinary Tract Infections (CAUTI)-see graph below. These metrics are compared on a hospital wide level as well as nationally through the National Database for nursing Quality Indicators (NDNQI®.)

Patient Sensitive Indicators (Actual)



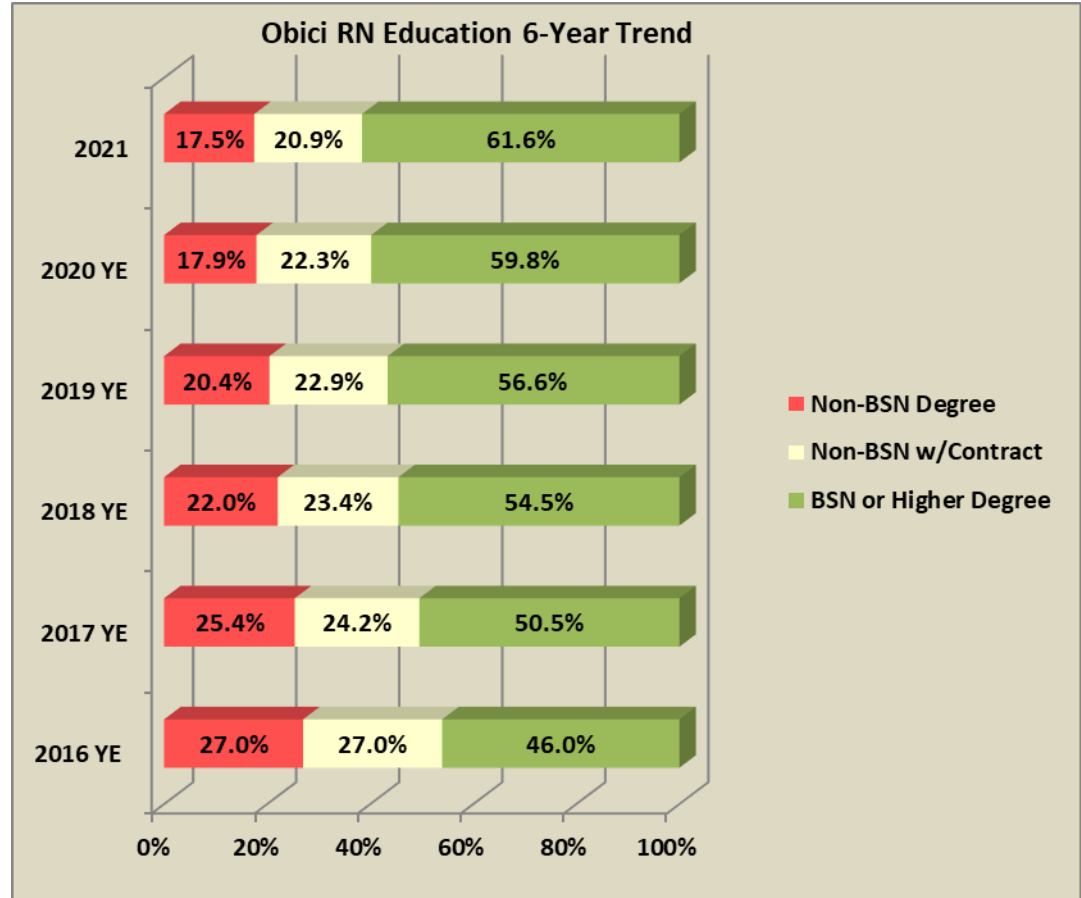
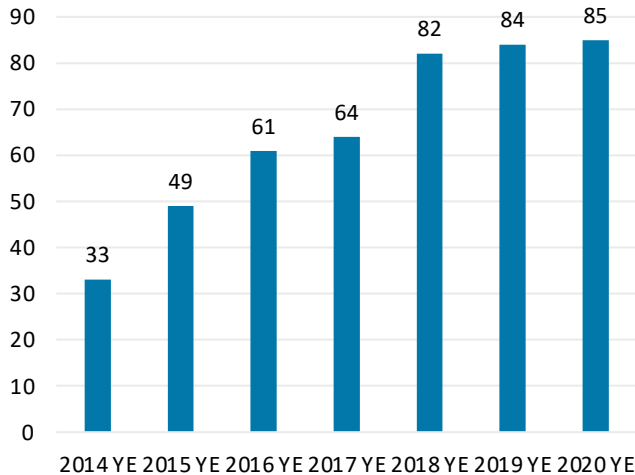
	2012	2013	2014	2015	2016	2017	2018	2019	2020
Falls with Injury	17	11	14	16	14	15	13	15	21
HAPI stage 2 or greater	13	7	10	14	16	16	23	14	30
CAUTI	10	6	10	2	2	2	8	4	7
CLABSI	5	5	0	4	4	2	1	1	8

■ Falls with Injury ■ HAPI stage 2 or greater ■ CAUTI ■ CLABSI

PROFESSIONAL DEVELOPMENT

According to the American Nurses Credentialing Center, Board Certification of nurses plays an important role in the assurance of high standards of care for patients and their loved ones. Nursing, like healthcare in general, has become increasingly complex. Nursing certifications provide an opportunity for nurses to demonstrate their knowledge as well as a strong personal commitment to life long learning. Certified nurses at the bedside confirms our commitment to improve health everyday. **15.7%** of our nurses are certified.

SOH Professional Certifications



At SOH, we are continuing to encourage our nurses to obtain their Bachelors of Nursing (BSN) or higher degrees, knowing that this continued education increases patient safety and allows for greater advancement opportunities for the nurses. In 2020, 59.8% of our nursing workforce had obtained a BSN or higher degree.

PROFESSIONAL DEVELOPMENT

Certified Nurses



Certified Nurse Administrator

Stephanie Jackson
Jessica Carpenter

Certified Nurse Manager and Leader

Amy Taylor
Sharon Bunn

Certified Professional Healthcare Quality

Amanda Goodwin
Latarsha Waddy

Certified Radiology Nurse

Robin McClelland

Certified Nurse Operating Room

Ruth Fowler	Eric Hayes
Lynda Moser	Caitlin Baker
Lisa Zabner	Lisa Bradshaw

Cardiovascular RN Level 1

James MacCord

Accredited Case Manager

Susan Griffin
Serena Hendricks



Gerontological Clinical Nurse Specialist

Brittney Curle

Advanced Oncology Certified Nurse

Wanda Moss

Ambulatory Care Nursing

Melissa Myrick
Virginia Fly
Brenda Godwin

Cardiac/Vascular Nurse

Kimberly Katula	Lisa Pendell
Sandra Buck	Lauren Bailey

Certified Case Manager

Nicole Parker	Katherine Dudley
Kim Tidwell	

CCRN Neonatal, Ped, Adult

April Kyer	Alice Callis
Lindsay Heatherly	Cathy Allsbrook
Megan Winslow	Heather Eley
Marissa Davis	

Certified Diabetic Educator

Christine Dignan
Carole Ebaugh

Certified Ambulatory Paraneesthesia Nurse

Maricris King



Certified Emergency Nurse

Victoria Pratkan
Loretta Martin
Terri Bryla
Rebecca Poulson
Lauren Lawless
Bryan Heath Fly
Lauren Plaine



Certified Case Manager

Tairn McCalley
Lisa Arrington
Barbara Kelly-Gibbs

Certified Medical Surgical RN

Monique Presley-Kelso
Michelle Salvatto
Lona Reese
Faron Jusino
Kaylyn Brown
Lee Knill
Dana Rodriguez

Lactation Consultant

Stephanie Clements
Penny Baugham
Deborah Perez

Certified Gastroenterology Nurse

Susan Williams

Nurse Executive Board Certified

David Vendt
Wendy Biando
Miranda Powell



Oncology Nursing Certification

Dana Rodriguez
Rebeca Lee
Christy Lynch
Melissa Bell

Orthopedic Nursing Certified

Heidi Pittman
Lisa Bradshaw
Tracey Stallard
Debra Hearn
Rakhsheed Siddiqui-Lane
Kelly Best
Tracy Eley

Progressive Care Nurse

Tricia Christoffer
Lauren Heckenlaible
Charlene Brickhouse
Sheryl Arrington
Stephanie Lockhart-Hayes
Lisa Saxon

Medical Surgical Certified RN

Samantha Paquette
Brenda Godwin

Low Risk Neonatal Nursing

Denise Tarves

Certified Wound Care Nurse

Vanessa Johns

Certified Wound Ostomy Nurse

Stephanie Edwards



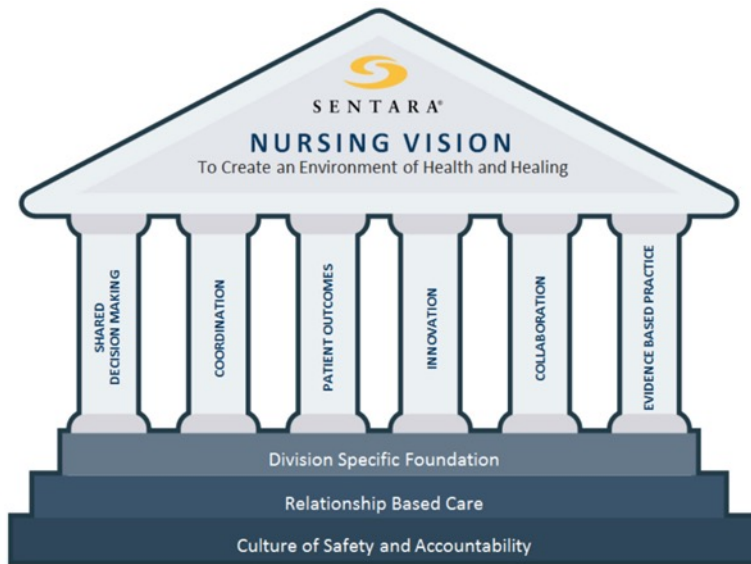
PROFESSIONAL PRACTICE

Sentara Nursing Goals:

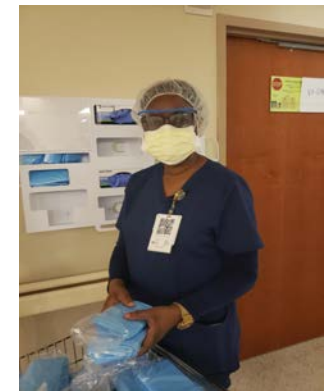
Mission: to improve health every day through nursing excellence

Vision: to create an environment of health and healing

Values: People, Quality, Patient Safety, Service and Integrity



As we prepared for the onslaught of Covid-19, the educators worked to ensure that all staff were prepared to expand or modify their usual role through pandemic training which trained the majority of the front line staff as well as ancillary staff with a goal to potentially support patient care resources during this unprecedented time.



HEALTHY WORK ENVIRONMENT

During 2020, when graduations were canceled because of Covid-19, Sentara Obici ensured that staff who were graduating felt SOH's appreciation and recognition of their achievements. In June of 2020, we had our own graduation ceremony where graduates were encouraged to wear their graduation robes and walk. Staff had worked hard for these degrees and deserved to walk.



HEALTHY WORK ENVIRONMENT



The DAISY Foundation was established in 1999 by the family of Patrick Barnes. He died at the age of 33 from complications of Idiopathic Thrombocytopenic Purpura (ITP). Like many families nurses see every day who go through this kind of horrific loss, the Barnes family wanted to find a way to turn their grief into something positive and do something that would honor the very special man Patrick was. So they came up with DAISY – an acronym for Diseases Attacking the Immune System. The family was so impressed by the clinical care Pat’s nurses provided, and they were overwhelmed by the level compassion and kindness that his nurses brought to Pat’s bedside day in and day out. The DAISY award is bestowed on nurses who go above and beyond for their patients and families. Nurses may be nominated by patients, families, and colleagues, and they are chosen by a committee of nurses at Sentara Obici Hospital to receive The DAISY Award.



SCHOLARLY DISSEMINATION

In September, 2020, Brittney Curle, SOH's clinical nurse specialist, and Ralitsa Maduro from Sentara Healthcare Quality Research Institute published an article in the peer reviewed journal *American Nurse*. The article was based on their IRB research study about the benefits of having a discharge unit to improve length of stay and improve Emergency Department treat and admit times.

Llewellyn Smith, one of our clinical level IV registered nurses who works in SOH's PACU area, wrote a chapter for a published nursing textbook in 2020. Her chapter, History of Cannabis and Prohibition is in the *Cannabis: a Handbook for Nurses* publication. Llewellyn was also elected President Elect of the American Cannabis Nurses Association.

MAGNET® NURSES IN ACTION

Discharge unit efficiency

A dedicated discharge unit decreases length of stay and improves ED treat and admit times.

By Brittney W. Curle, MSN, RN, AGNS-BC, and Ralitsa Maduro, PhD

Holding patients with admission orders in the emergency department (ED) is a global problem that results in overcrowding, which is linked to poor patient outcomes and poor efficiency metrics. Specifically, holding patients in the ED is associated with decreased patient satisfaction and increased left-without-being-seen rates, hospital length of stay (LOS), and mortality.

Inpatient bed availability determines how quickly a patient in the ED can be transitioned to the admitting inpatient unit. For a variety of reasons (for example, lack of transportation), hours may pass from the time a physician enters discharge orders to when a patient actually leaves the room, decreasing patient throughput and delaying patient admission from the ED. Timely inpatient bed availability is essential to efficient patient throughput in acute-care hospitals.

Evidence-based intervention

Hospital throughput quality-improvement projects typically target patients being discharged to home because they make up the highest percentage of discharged patients and provide the greatest opportunity to improve patient flow. One such evidence-based intervention is the discharge unit.

Since the 1990s, discharge units have been used as an intervention to expedite inpatient bed availability, which has been shown to reduce ED holding times. Studies indicate that discharge units can improve customer satisfaction, decrease ED boarding times, increase patient throughput efficiency, and reduce hospital LOS and discharge errors.

In 2018, the treat and admit times (defined as the time a patient registers in the ED to the time they're admitted to the inpatient unit) at Sentara Obici Hospital were consistently more than 400 minutes compared to a goal of 240 minutes. In an effort to reduce this time, a discharge unit proposal was presented and approved by hospital administration. To evaluate the efficacy of the unit after implementation, we conducted a quality-improvement project to assess if treat and admit times and inpatient LOS were reduced.

Discharge unit how-to

Sentara Obici Hospital is a Magnet®-recognized, 175-bed hospital in rural Virginia. To develop and implement the



discharge unit, we had to be creative when stretching already limited resources. We faced two main challenges: selecting the location for the unit and staffing it.

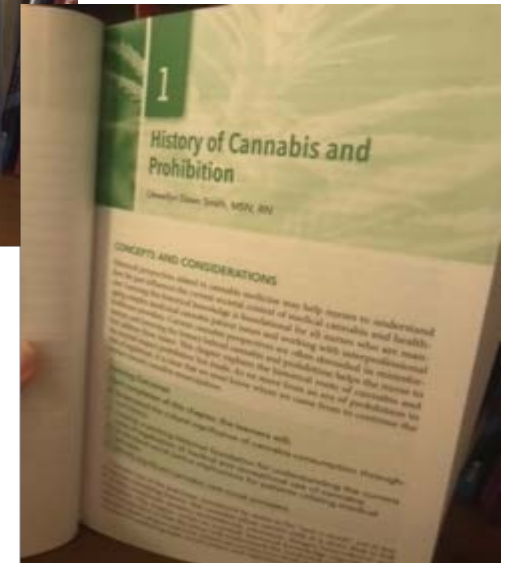
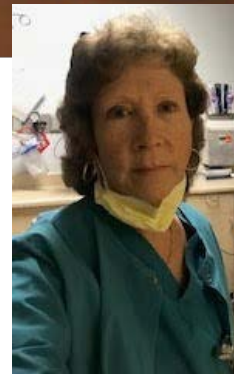
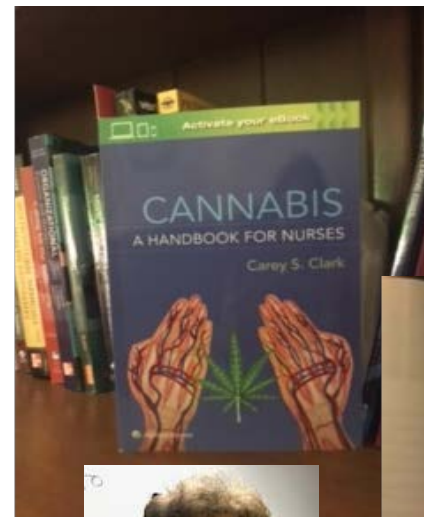
Location

With hospital administration support and facilities management personnel assistance, we secured an unoccupied human resources office at the front of the hospital as our original discharge unit location; a new outpatient pharmacy required that we relocate to our current location (two vacant inpatient rooms). Facilities management personnel helped us turn the rooms—one for patients who can sit upright and one for those who need a hospital bed to be discharged by stretcher—into a functioning discharge unit for staff and patients.

Staffing

Discharge unit staffing is based on our specific hospital needs. The daily census for our discharge unit was 10 to 15 patients. Our goal was to staff it with one RN and one nursing assistant (NA) per shift. To meet that goal,

NURSING EXCELLENCE



COMMUNITY OUTREACH

2020 was an unprecedented year for healthcare workers. Usually our staff is out in the community- educating, providing support and services but in 2020, during the height of the Corona virus pandemic, our Suffolk community reached out to us to show their love and appreciation for all we do everyday. They brought us food, made signs and generally supported our frontline staff as we navigated unprecedented and very stressful waters for which we were eternally grateful.

SOH held community flu vaccinations



The Suffolk community rallied around SOH



