

UNITED HOSPITAL  
2006 nursing annual report



UNITED  
HOSPITAL

*Allina Hospitals & Clinics*

**UNITED HOSPITAL**  
2006 nursing annual report

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**Sue Penque,**  
**RN, MSN, APRN-BC**  
Vice President,  
Patient Care and Operations

## INTRODUCTION

### **Greetings from Chief Nursing Officer, Sue Penque**

United Hospital is committed to delivering the highest quality health care possible and is equally committed to advancing nursing practice. We respect and recognize our nurses for the tremendous contributions they make to patient care. Our staff provides exceptional patient care in an environment that is supportive, compassionate and healing and promotes professional and personal growth.

### **United Hospital Mission Statement**

We serve our communities by providing exceptional care, as we prevent illness, restore health and provide comfort to all who entrust us with their care.

### **Nursing Mission Statement**

United Hospital is committed to excellence in nursing practice.

### **Nursing Vision Statement**

Through our commitment to excellence, we are nationally known for advancing the art and science of nursing.

### **Nursing Care Model**

Our nursing care model was developed by the strengthening nursing practice subcommittee (SNP) of the Nursing Practice Care Delivery (NPCD) committee as a framework for nursing practice at United Hospital.

Outcome-based primary nursing is built on the philosophy that nursing care is a patient-centered delivery model that is based on the RN accepting accountability for establishing and sustaining a therapeutic and caring relationship with patients and their families.

## NURSING INITIATIVES

**“Nursing is so exciting—what you can be, what you want to be, what you’re willing to put into it and what you’re going to get out of it. I have so many personal rewards from nursing.”**

**Wendy Dording, RN**

### **Advance the Profession of Nursing**

Prior to graduation, nursing students are invited to experience their future nursing career under the supervision of an experienced Registered Nurse. The program is tailored to meet the needs of each student. In 2006, 19 nursing students took advantage of this opportunity.

All new nursing employees complete a competency-based orientation program. New graduate nurses have the opportunity to participate in a specialized orientation geared to their unique needs. In 2006, United Hospital hired 166 new RNs and of those 148 were new graduate nurses. In addition, continuing education and competency opportunities are available for nurses and other direct patient caregivers.

Nurse certification demonstrates dedication to professional development and a commitment to the provision of quality patient care. Successfully completing nursing certification exams demonstrates superior knowledge in the specialty, demonstrates to patients a mark of quality assurance and translates into higher wages for the nurse through certification bonuses. In 2006, certification study groups or classes were offered at United Hospital for neuroscience and cardiovascular.



**“Certification is a step toward making myself as expert as I can be for my profession and making me the best nurse possible for my patients.”**

**Cathy Salchow, RN, OCN**

United Hospital joined with Augsburg College in Minneapolis to offer an onsite bachelor of science in nursing completion program for associate degree or diploma- prepared nurses. The program has a transcultural nursing focus to better prepare nurses for the changing demographics of a culturally diverse workforce and patient population. In 2006, there was an average enrollment of 23 nurses per trimester.

In 2006, United Hospital began to prepare for implementation of a fully-integrated electronic medical record. Based on a key lesson from other Allina hospitals, United chose to pilot and ultimately implement an approach to examine nursing work flow and adapt it to the new electronic environment. As a result, all clinical departments at United (both nursing and ancillary) utilized a well-tested process to complete the workflow assessment and adaptation necessary to implement an electronic medical record.

In 2006, Nursing Practice Care Delivery (NPCD) chartered a new work group for the electronic medical record, the Patient Care Excellian Work group. This group represented every area of nursing at United.

Their role was to:

- review and make recommendations for overall nursing workflow changes
- alert NPCD on nursing practice implications of the electronic medical record
- ensure integration of nursing workflows with other clinical disciplines

## IMPROVE DISSEMINATION OF INFORMATION

“Working with Dr. Rotilie made me realize more than ever how different the worlds of nursing and medicine are. Doctors and nurses work so closely together yet we forget how important it is to collaborate with each other. The Bridges program is a step in the right direction.”

Anna Herrmann, RN

“It was helpful to learn the extent to which nurses are required to oversee the total care plan of the patient, and to make sure it gets completed, including transportation to tests, monitoring results, and addressing those results to the physician. I learned how often a nurse physically assesses a patient and coordinates care with others on the team.”

John Rotilie, MD

### The Bridges Program

The Bridges program works to decrease the communication gap among care providers and improve patient care began in 2006 with 16 RNs and 16 physicians job shadowing each other. The Bridges program was developed by Sue Penque, RN, vice president of Patient Care and Operations, as a tool to an understanding of the different paths nurses and doctors may have to achieve quality patient outcomes.

*Nursing Notes* newsletter:

- First published in 2004, editorial board includes nursing leadership, staff nurses and communications professionals.
- Published quarterly and mailed to all nurses in the organization.

Nursing Web page on Allina.com:

- First launched in 2005 with enhancements to site in 2006.

**“When I think historically about my role as a leader, I get the most energy when I interact with people. It helps me get to know them and identify the unique gifts they contribute to the team.”**

**Mary Feist, RN**

### **Develop Nursing Leadership**

United Hospital encourages nurses at all levels of the organization to seek opportunities for enhancing their leadership skills. To assist with nursing leadership skill building the following classes were offered in 2006:

- Nursing Leadership Academy (163 attended)
- United Leadership Institute (905 attended)
- Facilitating Effective Meetings workshop (58 attended)
- Charge Nurse workshop (67 attended)
- Professional Preceptor workshop (139 attended)

### **Implement Nursing Quality Plan and Accountability Plan**

Participating in the National Data Base for Nursing Quality Indicators (NDNQI) since 2004, United nursing leaders and staff are gaining sophistication in using the nurse-sensitive indicator data to identify areas in need of improvement. Plan-do-study-act trials are then developed and tested to find ways to improve patient outcomes.

For example:

- Geriatric Psychiatry unit 8900 staff and leaders tested various interventions to reduce harmful falls in this patient population.
- Similarly, nursing staff from 4900/20/40 participated in a national Institute for Healthcare Improvement initiative aimed at identifying strategies to reduce the harm associated with falls.”

Unit		2006 NDNQI Scorecard																													
		NURSING HOURS						PRESSURE				ULCERS				FALLS				RESTRAINT USE		INJURY ASSAULT		RN CERTIFICATION		RN EDUCATION - Highest Degree					
		NHPPD		RN Hours		Hospital-Acquired		Unit-Acquired		Total Fall Rate		Harmful Fall Rate		Limb/Vest only		(Physical/Sexual)		(One/RN Only)		Diploma		ADN		BAN/BSN		Masters's/PhD					
		Total # Productive Hours	% Total NSG Hours by RNs	% Patients	% Patients	# All Falls 1000 pt. days	# Injury Falls 1000 pt. days	% Patients	% Patients	# All Falls 1000 pt. days	# Injury Falls 1000 pt. days	% Patients	% Patients	# Injury Assaults 1000 pt. days	%	%	%	%	%	%	%	%	%	%	%	%					
UH	NDNQI	UH	NDNQI	UH	NDNQI	UH	NDNQI	UH	NDNQI	UH	NDNQI	UH	NDNQI	UH	NDNQI	UH	NDNQI	UH	NDNQI	UH	NDNQI	UH	NDNQI	UH	NDNQI						
2600	11.15	8.75	68.78	63.49	0.00	3.94	0.00	3.12	1.68	3.03	0.37	0.81	0.00	0.97	0.00	0.97	11.90	6.92	6.36	11.03	59.85	53.42	33.80	30.77	0.00	2.02					
3300	11.30	10.31	73.97	72.78	0.00	5.37	0.00	3.96	2.12	3.45	0.60	0.94	0.00	2.80	0.00	2.80	0.00	6.70	0.00	7.77	54.25	47.79	43.68	37.88	2.08	1.46					
3400	10.90	10.31	76.34	72.78	7.41	5.37	0.00	3.96	3.35	3.45	0.45	0.94	0.00	2.80	0.00	2.80	3.45	6.70	5.20	7.77	47.95	47.79	46.85	37.90	0.00	1.46					
39/20/40	21.47	17.10	82.09	89.95	7.68	11.47	5.00	8.54	0.84	1.39	0.00	0.37	25.00	20.62	0.00	1.63	7.70	12.19	4.43	8.43	44.92	41.99	49.60	42.51	1.06	2.60					
4400	10.45	8.36	69.20	63.28	6.35	6.16	9.52	4.26	2.24	4.24	0.54	1.28	0.00	1.63	0.00	1.63	11.13	8.87	2.11	8.46	56.80	53.66	41.09	33.33	0.00	1.98					
4500	10.70	8.32	71.87	63.06	12.04	4.96	25.00	3.37	3.82	3.83	1.71	1.06	0.00	1.09	0.00	1.09	14.01	7.31	4.33	8.85	61.12	50.32	34.55	33.30	0.00	1.57					
4900	11.65	10.31	75.07	72.78	4.17	5.37	12.50	3.96	5.10	3.45	0.21	0.94	0.00	2.80	0.00	2.80	3.96	6.70	7.68	7.77	52.67	47.79	39.66	37.90	0.00	1.46					
4920/40	10.92	8.36	75.57	63.28	0.00	6.16	0.00	4.26	3.01	4.24	0.72	1.28	4.55	1.63	0.00	1.63	9.84	8.87	0.00	8.46	38.22	53.66	61.79	33.33	0.00	1.98					
5900/20	6.99	7.35	58.56	58.92				4.50	4.50	1.26			0.00		1.50	0.14	7.57	13.24	11.36	14.53	59.46	46.17	27.38	30.36	1.79	5.65					
5940	6.98	9.71	59.93	52.53				0.67	0.67	0.67			0.00		1.14	0.32	15.59	11.42	15.59	14.23	42.83	43.45	25.92	27.08	7.77	4.35					
6900/40	11.19	8.75	73.65	63.49	5.56	3.94	0.00	3.12	5.30	3.03	1.02	0.81	0.00	0.97	0.00	0.97	2.57	6.92	12.85	11.03	62.14	53.42	25.01	30.77	0.00	2.02					
7900/20	10.20	8.32	68.35	63.06	2.78	4.96	0.00	3.37	3.30	3.83	0.46	1.06	0.00	1.09	0.00	1.09	4.93	7.31	5.69	8.85	62.42	50.32	31.90	33.30	0.00	1.57					
8900	9.97	8.63	45.69	50.09	3.00			12.53		2.75			1.03	0.36	0.00	0.36	0.00	5.71	0.00	0.00	13.90	79.89	48.19	13.30	28.78	0.00	4.05				
8920	10.85	8.36	67.10	63.28	2.78	6.16	0.00	4.26	2.16	4.24	0.40	1.27	0.00	1.63	0.00	1.63	7.56	8.87	0.00	8.46	51.62	53.66	48.38	33.33	0.00	1.98					
8940	8.65	8.09	65.49	54.50	3.70	6.67	0.00	5.24	7.19	7.55	1.29	1.63	0.00	0.69	0.00	0.69	40.04	15.26	0.00	12.35	68.62	48.03	31.37	32.82	0.00	2.10					

The NDNQI scorecard below showcases a roll-up of our performance for 2006 (values indicate averages across all four quarters).





“I recall how difficult the transition was when I joined United Hospital in 1985 as the only Filipino registered nurse. That experience gave me a greater tolerance when things don’t go smoothly, resourcefulness to adapt to any situation and leadership skills to take on challenges such as medical missions to the Philippines and being the secretary for the Philippine Nurses Association of America. I enjoy mentoring individuals from other countries who are interested in nursing.”

Del Conrad, RN

## NURSING DEMOGRAPHICS 2006

<b>Number of Registered Nurses employed at United Hospital</b>	<b>1,400</b>
<b>Advanced practice Registered Nurses</b>	
The Birth Center	2
Nasseff Heart Center	2
Behavioral Health Services	3
Neuroscience	1
The Pain Center	1
Palliative Care	1
Emergency Department	2
<b>Certifications from specialty nursing organizations</b>	<b>127</b>
<b>Registered Nurse vacancy rates (12-month average)</b>	<b>5.7 %</b>
<b>Registered Nurses by degree</b>	
Associate degree/diploma	62 %
Bachelor’s degree	38 %
Master’s degree	8 %
Doctorate degree	<1 %
<b>Self-identified ethnicity of United Hospital nursing staff</b>	
White/Caucasian	93.3 %
Black/African American/African	4.3 %
Asian/Pacific Islander	1.6 %
American Indian/Alaskan Native	<1 %
Latino	<1 %

## PATIENT DEMOGRAPHICS

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### Ethnicity of surrounding population and patients served:

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United Hospital Inpatients	(excludes newborns/neonatal)	% of patients
White/Caucasian	19,310	70.5%
Not indicated/other	5,070	18.5%
Black/African American/African	1,529	5.6%
Asian/Pacific Islander	738	2.7%
Latino	660	2.4%
American Indian/Alaskan Native	93	<1%

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## CARE CENTER ACCOMPLISHMENTS

### Cancer Care

Dedicated cancer specialists, multidisciplinary care teams, including subspecialty services, and a highly trained nursing staff are key to the success of United's Cancer Care program. Today's oncology patients need specialized staff that can help them understand their diagnosis, treatment, and options. To this end, many of our cancer care nurses have received certification in oncology from the Oncology Nursing Certification Corporation (ONCC).

The Breast Center offers comprehensive breast health and cancer detection, treatment and support with state of the art technology to women of the Twin Cities east metro area and western Wisconsin. These services are delivered by a compassionate team of nurses, radiologists, technologists, and surgeons in our center of excellence.

United Hospital sponsors a variety of support groups for cancer patients and family members that provide a caring and supportive environment in which they can share and discuss their feelings with other people in similar situations.

**“Every single person we interacted with and who participated in my mother’s care at United was knowledgeable, friendly, helpful and did everything they could to ensure her full recovery and comfort.”**

**Patient Family Member**

## **Emergency Department**

Emergency trained nurses and board-certified emergency physicians provide care to patients 24 hours a day. In addition, a fully equipped helicopter landing pad allows patients to be transported by air to United for care.

In February, 2006, the Emergency Department of United Hospital opened Fast Track. Primarily staffed with Family Nurse Practitioners as providers, Fast Track delivers care to about 900 patients a month. In addition to providing care to patients with less serious ailments, it improves patient flow through the main Emergency Department.

The Emergency Department partnered with the Heart United program to improve care delivery to acute myocardial infarction patients. Nurse teams in both areas met to set goals in multiple care priorities to drastically reduce the door-to-balloon time for opening a blocked coronary artery. As a result of this work, United Hospital is far below the national benchmark in ST segment elevation myocardial infarction (STEMI) care.

## **Nasseff Neuroscience Center**

Neuroscience United achieved Neuroscience Center of Excellence designation by NeuroSource Inc., and Health Tech in 2006. The survey analyzed more than 150 neuroscience centers across the United States, reviewing clinical programs, staff/facilities/technology and business. Only 63 centers nationwide met the criteria for this designation. In addition, Neuroscience United achieved Joint Commission Primary Stroke Center Certification through the efforts of the multidisciplinary Stroke Center team.

Design of the two new neurosurgery suites with intraoperative MRI and diagnostic room was completed in 2006. The suites provides state-of-the-art tools to physicians and nursing staff for neurosurgical patients. Nursing staff members were involved from the beginning in the design and work-flow review for these suites.

The United Pain Center achieved recertification by the American Academy of Pain Management with designation as a Comprehensive Pain Center.



## Women's Health

The Birth Center hosted a Women's Health Certification Review Course with a national speaker and 25 nursing staff members achieved a specialty certification.

Safety initiatives were a focus for 2006 and included:

- attendance at the Situational Awareness in Fetal Heart Rate Monitoring class was required for all nurses and physicians as part of the Allina Pregnancy Care Council's Perinatal Safety Initiative
- sponge and needle counts for all vaginal deliveries
- implementation of national SIDS, guidelines which included participation in the Sleep Sack research study, demonstrating how RNs role model safe newborn sleep practices to new mothers

## Psychiatry

The Minnesota Hospital Association presented United Hospital with a 2006 Innovation of the Year in Patient Care award in recognition of the falls reduction program implemented on the Geriatric Psychiatry unit 8900.

Bernadine "Bunny" Engeldorf, RN, contributed significantly to the development and implementation of United Hospital's Crisis Resource Team. James Tczap, RN, attended and evaluated Handle with Care, an intervention and restraint training program, being adopted as Allina Hospitals & Clinics' Code Green training program for caring for clients with the potential for aggressive, suicidal and out-of-control behavior.



## Heart United

Multidisciplinary rounds began on unit 3500, the post open-heart unit. The entire care team rounds on patients together to establish daily goals for the patient and monitor progress in the post-operative setting. Rounds are conducted at the bedside, which allows for the patient and/or family to be included in planning and to ask questions.

A core group of RNs who focus on patients with heart failure, throughout the hospital, was expanded to allow for availability seven days a week. These specialty RNs see all heart failure patients and collaborate with the bedside RN to ensure that all patients receive:

- heart failure education prior to discharge
- care consistent with national standards

## Medicine United

United Hospital is committed to providing superior care to its Medicine patients. United has specialized programs to care for diabetes patients, patients with kidney diseases and an enterostomal therapy program for the care of patients with ostomies, wounds or skin problems. All new graduate nurses have the opportunity to spend approximately six weeks on Medicine with an experienced RN preceptor as part of his or her new graduate orientation.

## Surgery United

United has an up-to-date, contemporary surgical center and staff with expertise in major cardiovascular, neurological, orthopedic and general surgery. The hospital has 17 operating rooms, two of which are located in the Heart Center for cardiac procedures. Surgeries are also performed at the Day Surgery Center, where eight additional operating rooms are shared with Children's Hospitals and Clinics.

## Rehabilitation United

United Hospital offers a comprehensive range of rehabilitation programs through the Sister Kenny® Rehabilitation Institute. Sister Kenny® Rehabilitation Institute has provided services to people who experience limitations in their lives as a result of injury, pain or disease. Patients who come to the Sister Kenny® Rehabilitation Institute at United receive therapy, counseling, education, 24-hour nursing care and a daily visit by a physician who specializes in physical medicine and rehabilitation. Through our program, people regain strength, mobility and self-reliance. We work to improve each individual's physical and emotional health and optimize his or her functional abilities.

## EDUCATION HIGHLIGHTS

**“My role as a charge nurse and leader on my unit has been refreshed and rejuvenated! This workshop was the most worthwhile investment United could make - thank you.”**

### Charge Nurse Workshop Participant

United Hospital education staff members work closely with leaders to meet the education needs of nurses.

RN LPN competency day

Unit specific competency

Nursing Care Model education

United Hospital quarterly self-study packets

Pain management education

Moderate to deep sedation/analgesia education

Neonatal resuscitation program

Central nursing orientation

Charge nurse education

Intravenous therapy and respiratory therapy education for new nurses

Medicine IV insulin protocol

Diabetes education in specialty populations

Safe management of aggressive patient/families in non-behavioral care settings

Introduction to fetal monitoring

Stroke education

Laboratory specimen handling for RNs

Using nursing research in practice: luxury or necessity?

Safety for you

Bridges program

Nursing student intern preceptor orientation

New graduate orientation level II

Methamphetamine use: maternal, fetal and neonatal effects

First Touch™ program workshops

PCA pump competency

Perinatal HIV

Taking it to the next level - situation, background, analysis, recommendation

Telemetry sepsis midline education

Module on evidence-based practice

Searching for the evidence



## NURSING RESEARCH

**“Evidence-based practice is the only means of advancing our profession and legitimizing our practice by showing the impact we have on patient outcomes.”**

**Ernie Bennett, RN**

### **Evidence-Based Practice Guidelines**

The Nursing Research Council developed a set of guidelines, The Use of Trendelenburg Position during Acute Hypotensive Episodes. These guidelines summarize the current research evidence that shows Trendelenburg position has little effect on improving either blood pressure or cardiac output in hypotensive patients. To read the guidelines on the intranet site, go to [akn/united/nursing practices, resources & information/nursing evidence-based guidelines](#).

### **Bariatric Evidence-Based Practice Project**

The Nursing Research Council conducted a second pilot program in the Surgical Care Center (Pre Op and unit 2600) that evaluated the consistent use of selected blood pressure (BP) cuffs for bariatric patients. Outcomes that were evaluated included variability of BP values for each patient, staff compliance with following the evidence-based protocol and nurse/physician satisfaction with the new proposed process to improve reliability of BP assessment. The main barrier to implementing more accurate BP assessment across the hospital was the lack of standardized cuffs and connectors. The Nursing Research Council took this issue to the Strengthening Operating Systems team for assistance in standardizing BP equipment throughout the hospital as the next phase of the project.



## Burning Questions Investigated

The Nursing Research Council developed a process for categorizing, prioritizing and answering burning questions staff has asked about their daily practice. Nursing practices or interventions that have housewide relevancy are addressed by the Nursing Research Council and RN Unit Councils received coaching and education on the process to review unit-based questions.

	<b>Status</b>
Perioperative oxygen	Ongoing
DVT prophylaxis	Ongoing
Bariatric BP assessment using appropriate sized cuff	Ongoing
Holistic nursing interventions	Ongoing
Vital sign frequency (routine and after procedures)	Ongoing
BP in mastectomy and AV shunt/fistula patients	Completed
Trendelenburg position	Completed
Practice issues related to PICC/IV lines	Completed

## Nursing Research Studies

### National Survey of Cardiologists: Perceptions of and Standard of Practice for Continuous ST-Segment Monitoring

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Investigators:	Kristin Sandau, RN, Sue Sendelbach, RN, Joel Frederickson, RN, and Karen Doran, RN.
Funding:	American Association of Critical Care Nurses (local/national), Sigma Theta Tau (local) and Allina Hospitals & Clinics (\$23,230).
Phase:	Data collection completed, data analysis and writing in process, slated to present findings at National Teaching Institute 2008, Chicago.

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### Frequent Utilizers of Emergency Department Services

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Investigators:	Pat Milbrett, RN, Christine Larson, RN, Jan Christison, RN, and Margo Halm, RN, PhD.
Funding:	Minnesota Nurses Association Foundation (\$2,000).
Phase:	Data analysis complete, presentations planned.

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### The Use of Essential Oils to Alleviate Preoperative Anxiety in Surgical Patients

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Investigators:	Sue Reichow, RN, Becky Braden, RN, and Margo Halm, RN, PhD.
Funding:	Minnesota Nurses Association Foundation (\$10,000).
Phase:	Data collection 65 percent complete.

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### Impact of a Formal Preceptor Workshop on Hospital Nurse Preceptors & Orientees

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Investigators:	Kristin Sandau, RN, LeAnne Hamer, RN, Grace Cheng, RN, Philippe Gaillard, RN, and Julie Mann, RN.
Funding:	Minnesota Nurses Association Foundation (\$2,000).
Phase:	Data collection and analysis complete, presentations planned.

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## COMMUNITY INVOLVEMENT

Nurses and caregivers from other disciplines value community collaboration and work toward the common goal of meeting the needs of patients and the communities we serve. United Hospital nurses share their nursing expertise locally, nationally and internationally:

### Local

- Blood pressure screening events sponsored through the Minnesota Nurses Association
- Early childhood screening clinics
- School involvement
- Church/synagogue youth groups
- Women's shelter volunteers
- Captain of local fire department
- County coroner
- Parish nurse ministry
- Job fairs for high school students
- Auxiliary board member for community hospital
- Master gardener for Habitat for Humanity
- Ride to Promote Mental Health volunteers
- Board of directors members for Partners for Violence Prevention
- American Heart Association Heart Walk
- Minnesota Boys Choir nurse volunteer
- Race for the Cure volunteers
- Juvenile Diabetes Walk volunteers
- American Red Cross blood drive volunteers
- Multiple Sclerosis walk volunteers
- Member of the American Heart Association Greater Midwest Affiliate Public Advocacy Committee
- Philippine Nurses Association, Minnesota chapter

**“As part of the Augsburg BSN completion program, I traveled to Namibia. I will never forget seeing these extremely poor people and how they looked up to us for security and comfort. Now, when I care for a patient from another culture, I like to spend time researching their customs to help provide quality care and to improve communication.”**

**Therese DeMay, RN**

### **National /International**

- Hurricane Katrina relief
- National Alzheimer’s Association
- Pine Ridge Indian Reservation outreach
- Ecuador mission trip
- Ukraine mission trip
- Sri Lanka post-tsunami relief
- Myanmar Russian mission troop
- Guatemala mission trip
- Namibia trip for transcultural nursing
- Central America surgical mission
- St. Petersburg, Russia, mission trip
- Peruvian mission trip
- School supply drive for children in Iraq

## CULTURAL RESPONSIVENESS

**“I get an immense amount of satisfaction working with patients, working with families, and helping determine what their goals are and then helping to bring them to those goals.”**

**Julie Sabo, RN, MN, CCRN, APRN-BC**

Several resources exist at United Hospital to meet the needs of patients and families of diverse backgrounds and cultures:

- More than 9,000 instances of patients or families utilized Interpreter Services for more than 70 different languages (see following list).
- Patient education brochures translated into the four most requested languages: Spanish, Hmong, Russian and Somalian.
- Central nursing orientation includes cultural care expectations, resources and Interpreter Services information.
- Ongoing nursing staff education provided on culturally relevant topics, such as how to request an interpreter, the Hmong culture, care of the deaf patient and generations in the workplace.

## Interpreter Services Requests 2006

Spanish	3568
Hmong (Green)	2816
Russian	1315
ASL	596
Somali	351
Vietnamese	207
Amharic	148
Arabic	104
Burmese	84
Cambodian	68
Korean	42
French	33
Oromo	29
Karen	26
Laotian	23
Tigrinya	23
Cantonese	22
Mandarin	19
Tibetan	19
Romanian	15
Hebrew	13
Egyptian	12
Japanese	10
Yiddish	10
Tamil	8
Ukranian	7

Ethiopian	6
Karan	6
Chinese	5
Greek	5
Hindi	5
Polish	5
Tigrinyan	5
Croatian	3
Farsi	3
Nuer	3
Tagrinyan	3
Thai	3
Ashanti	2
Bosnian	2
Chinese (Cantonese)	2
German	2
Latvian	2
Portuguese	2
Spanish SL	2
Telugu	2
Ama	1
Burmise	1
Cebuano	1
Creole-Africa	1
Croatian/Serbian	1
Eritrean	1

Finnish	1
Grebo	1
Gujarati	1
Hindustani	1
Hmong (White)	1
Igbo	1
Indonesian	1
Italian	1
Jessica	1
Lebanese	1
Liberian	1
Liberian-Basa	1
Mandinka	1
Persian	1
Pilipino	1
Serbo-Croatian	1
Swahili	1
Tagrinya	1
Tagrinya (Ethopian)	1
Tamin/Indian	1
Taiwanese	1
Toisanese	1
Twi	1
Yourba	1
<b>Annual Total</b>	<b>9,666</b>



**Barbara Bentley, RN, Orthopedics**



**Jane Kostecka, RN, Medicine**



**Tina Raehsler, RN, The Birth Center**



**Pam Keis, LPN, Neurology/Epilepsy**



**Mary Johnson, LPN, Behavioral Health Services**

## CELEBRATIONS

### Nursing Excellence Award Recipients

- Barbara Bentley, RN, Orthopedics
- Jane Kostecka, RN, Medicine
- Tina Raehsler, RN, The Birth Center
- Pam Keis, LPN, Neurology/Epilepsy
- Mary Johnson, LPN, Behavioral Health Services

### Degrees Conferred

- Naomi English, RN, Master of Public Health, University of Minnesota
- Kelly Gannon, RN, Master of Science in Nursing, Indiana University/Purdue University
- Susan Loushin, RN, Master of Arts in Nursing, Augsburg College
- Therese Demay, RN, Bachelor of Science in Nursing, Augsburg College
- Rita Klym, RN, Bachelor of Science in Nursing, Augsburg College
- Kim Terrell, RN, Bachelor of Science in Nursing, Augsburg College
- Lynn Schuman, RN, Bachelor of Science in Nursing, Augsburg College

**“We owe it to our patients to be up-to-date on current knowlege.”**

**United Hospital Registered Nurse**

### **Specialty Certifications**

- Ann Caliguire, RN, unit 7900/7920, Neuroscience RN
- Deb Donndelinger, RN, unit 7900/7920 Neuroscience RN
- Sue Dzubay, RN, United Pain Center, Certified Pain RN
- Kathy Enderlein, RN, United Pain Center, Certified Pain RN
- Kelly Gannon, RN, CNS, Neuroscience RN
- Sandy Gooch, RN, Same Day Interventional Unit, Certified Cardiovascular RN
- Audrey Robert, RN, unit 4500, Oncology Certified RN
- Kathy Russell, RN, United Pain Center, Certified Pain RN
- Derie Sjogren, RN, Float Pool, Critical Care RN
- Kim Terrell, RN, unit 3500, Certified Cardiovascular RN
- Keith Werlinger, RN, Clinical Monitoring Team, Critical Care RN
- Wendy Wimmer, RN, United Pain Center, Certified Pain RN
- Cory Wray, RN, ICU, Critical Care RN
- Lynn Zak, RN, CMT, Critical Care RN

### **Awards**

- Minnesota Nurses Association Creative Nursing Award: Glenda Cartney, RN, ICU, and Julie Sabo, RN, MN, CCRN, APRN-BC
- Innovation of the Year in Patient Care award in 2006 from the Minnesota Hospital Association Geriatric Unit 8900, reducing harmful patient falls



## **Publications**

Halm, M, Sabo, J, and Rudiger, M. (2006). Patient and family advisory councils: Keeping a pulse on our customers. *Critical Care Nurse*. 26(5), 58-67.

Berndtson, Ann. Review of Core Curriculum for Orthopedic Nursing (5th Edition) published by the National Association of Orthopedic Nursing.

Halm M, Lindquist R, Treat-Jacobson, and Savik K. (2006). Correlates of caregiver burden after coronary artery bypass surgery. *Nursing Research*. 55(6): 426-436.

Sendelbach S, Doran K, Halm M, and Hogan-Miller E. (2006). Effects of music therapy on physiological and psychological outcomes for patients undergoing cardiac surgery. *Journal of Cardiovascular Nursing*. 21(3): 194-200.

Halm M. (2006). Achieving Evidence-Based Practice: A Handbook for Practitioners [Book review]. *Clinical Nurse Specialist*. 20(6): 309.

Disch J, Chlan L, Mueller C, Akinkuotu T, Sabo J, Feldt K, and Bjorkland D. (2006), The Densford Clinical Scholars Program: Improving patient care through research partnerships. *Journal of Nursing Administration*, 36(12).

## **Presentations**

Jen Conroy, RN, Andrea Fieck, RN, and Kelly Gannon, RN. Clinical Rounding (poster). Allina Hospitals & Clinics professional practice conference.

Bunny Engeldorf, RN, and Glenda Cartney, RN. United's Care Model (poster). Minnesota Nurses Association convention.

Mary Goering, RN. Implementing Shoulder Dystocia Drills at the Bedside. Minnesota perinatal organization conference.

## **Presentations** continued

Mary Goering, RN. Advanced Fetal Monitoring. Minnesota Association of Women's Health, Obstetric and Neonatal Nurses conference.

Margo Halm, RN, PhD. Boogie Boarding 101: Getting your Feet Wet with Nursing Research. Allina Hospitals & Clinics professional practice conference.

Margo Halm, RN, PhD. Trendelenburg: To Tip or Not to Tip – Current Nursing Research. Allina Hospitals & Clinics Acute Care/Critical Care seminar

Margo Halm, RN, PhD. The CNS as Evidence-Based Practice Champion: Advancing Professionalism in Nursing (poster). Conference of the Minnesota Affiliate of the National Association of Clinical Nurse Specialists.

Margo Halm, RN, PhD. Caregiver Burden and its Relationship to Health-Related Quality of Life of Spouses of CAB Patients. International Research Congress focusing on Evidence-Based Practice, Sigma Theta Tau (Montreal)

Annette Klein, RN. Welcoming Baby: Birth Planning and Prenatal Decision Making for Parents continuing a Pregnancy with a Terminal Diagnosis. National Perinatal Bereavement Conference, Chicago, Illinois.

Annette Klein, RN. Caring for the Sorrow of Pregnancy and Infant Loss – Birth Planning for Families in a High Risk Pregnancy. Minnesota.

Liana Land, RN, Steph Becker, RN, and Kelly Gannon, RN. A Medicine Telemetry Unit Becoming a Stroke Unit (poster). Allina Hospitals & Clinics professional practice conference.

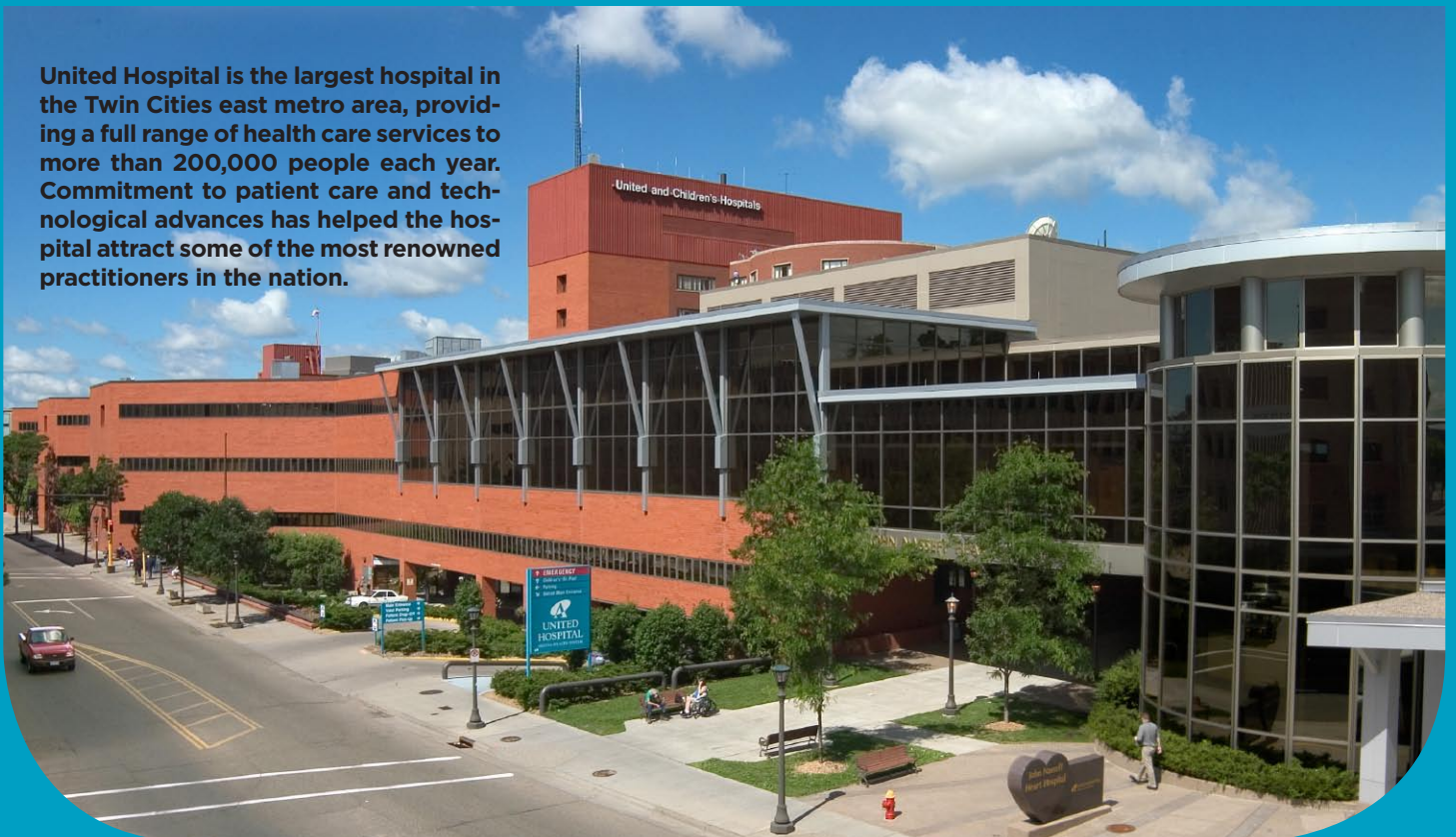
Susan Loushin, RN, MA. United's Care Model (poster). Allina Hospitals & Clinics professional practice conference, Minnesota.

Julie Sabo, RN, MN, CCRN, APRN-BC, and Glenda Cartney, RN. Safe Management of Aggressive Patients or Families in the Non-Behavioral Health Care Setting. National Association of Clinical Nurse Specialists, Salt Lake City, Utah.

“Unless we are making progress in our nursing every year, every month, every week, take my word for it we are going back.”

Florence Nightingale, 1914

United Hospital is the largest hospital in the Twin Cities east metro area, providing a full range of health care services to more than 200,000 people each year. Commitment to patient care and technological advances has helped the hospital attract some of the most renowned practitioners in the nation.





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