2013 Nursing Annual Report

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PROFESSIONAL LEADERSHIP
Janet Ahlstrom, Professional Development
Chair, Content Expert Panel Clinical Nurse Specialist in Adult Health
American Nurses Credentialing Center

Member, Appointments Committee
American Nurses Credentialing Center

Secretary
Kansas State Nurses Association

Advisory Board
Mid-America Nazarene University Nursing
Johnson County Community College Nursing

Sheri Hawkins, Administration Chairperson
Skylight Clinical Advisory Board

Cindy Ladner, Surgery Center
Missouri-Kansas Delegate
American Society of PeriAnesthesia Nurses

Lori Swope, Infection Control and Prevention Chair, Nomination and Awards Committee
Association for Professionals in Infection Control and Epidemiology

SCHOLARSHIPS/GRANTS
Jenny Stromsted, Medical/Surgical Unit
“Investing in Your Future” 2012 Nursing Scholarship
Shawnee Mission Medical Center

Cynthia Cummins, Surgical Services
“Investing in Your Future” 2013 Nursing Scholarship
Shawnee Mission Medical Center

Kimberly Klomfahs, Wound Care Center
“Investing in Your Future” 2013 Nursing Scholarship
Shawnee Mission Medical Center

Lori Myers, Utilization Management
“Investing in Your Future” 2013 Nursing Scholarship
Shawnee Mission Medical Center

Mary Wirtz, Professional Development
“Investing in Your Future” 2013 Nursing Scholarship
Shawnee Mission Medical Center

NURSE RESIDENCY GRADUATES 2012
Emilie Beckum, Mother/Baby

Dee Daniel, Mother/Baby

Liz Dunn, Neonatal Intensive Care Unit

Christina Ellington, Mother/Baby

Cat McNair, Nursing Resources

Salena Mervosh, Progressive Care Unit

Courtney Neufeld, Progressive Care Unit

Sean Peters, Intensive Care Unit

Ashlee Quilty, Neonatal Intensive Care Unit

Sonni Reasor, Progressive Care Unit

Sara Richards, Oncology

Lindsey Richardson, Labor and Delivery

Tiffany Semaboye, Heart & Neuro Vascular Unit

Gwen Wallace-Burks, Cardiac Care Unit

Trisha Yow, Medical/Surgical Unit

CLINICAL ASSOCIATE SUPERSTARS 2012
Shawna Beashore, CA, Oncology

Maria Cochangco, CA, Behavioral Health

Fran Davis, BHA, Addiction Recovery Unit

Rahel Gebre, CA, Medical/Surgical Unit

Dorothy Herring, BHA, Heart & Neuro Vascular Unit

Lindsey Hunter, BHA, Behavioral Health

Donna Kilgore, BHA, Addiction Recovery Unit

Brenda Lewallen, CA, Medical/Surgical Unit

Vera Mora, CA, Joint & Spine Care Center

Tricia Rutledge, CA, Progressive Care Unit

Talia Wallace, CA, Oncology
Michelle Foss, Professional Practice
Oral
“APACHE Outcomes Development Partner”
Cerner Health Conference

Oral
“Life Cycle of the APACHE Coordinator”
Society of Critical Care Medicine Critical Care Outcomes Forum

Cindy Kuklenksi, Palliative Care/Pain Management
Moderated Poster
“Small Team-Big Impact: Intervening at Life’s End”
Center to Advance Palliative Care National Seminar

Rebecca Wargin, Endoscopy
Licensed Practical Nurse Certificate
Johnson County Community College

Mary Wirtz, Professional Development
Certified Facilitator for Development Dimensions International
Shawnee Mission Medical Center

PRESENTATIONS
Janet Ahlstrom, Professional Development
Oral
“Social Media”
Midwest Association of Administrative Nursing Supervisors

Beth Armstrong, PeriAnesthesia
Oral/Poster
“Performance Evaluation Tool for Nurse Leaders”
American Society of PeriAnesthesia Nurses Conference

Diana Faltermeier, Professional Practice
Oral
“Sepsis in the Emergency Department”
Adventist Health System Emergency Services Conference

Oral
“Managing the Emergency Department Sepsis Project”
Adventist Health System Emergency Department Sepsis Collaborative

Melissa Grace, Professional Practice
Moderated Poster
“Enhancing Stroke Nurse Education through Simulation”
International Stroke Conference

Jennifer Johnson, Emergency Services/FACT Program
Oral
“Maximizing your SANE/SART Conference”
Hays Medical Center

Panel
“Sexual Assault in our Community”
Metropolitan Organization to Counter Sexual Assault Kansas City Forensic Investigations Conference

Oral
“SANE-P Prep”
Kansas City Forensic Investigations Conference

Online Module
“Cross Examination by the Defense”
Pediatric Sexual Assault Nurse Examiner Training

Kansas Coalition Against Sexual and Domestic Violence

Lori Swope, Infection Control and Prevention
Moderated Poster
“Central Line Associated Blood Stream Infections: Project on Summary”
Kansas Health Collaborative Quality Summit

Charlene Wallace, Breast Center
Poster
“Focus on Breast Cancer”
National Consortium of Breast Centers Annual Conference

PUBLICATIONS
Meg Holloway, Breast Center
Contributing Author and Review
LaFleur Brooks, M. & LaFleur Brooks, D. Basic Medical Language, 4e, Mosby 2012

Linda Kissinger, Endoscopy
Transrectal Ultrasound
SGNA Newsletter, January 2013

If I had to choose three words that summarize our accomplishments over the past year at Shawnee Mission Medical Center (SMMC), those words would undoubtedly be quality, innovation, and growth.

As associates of SMMC, we have seen tremendous growth not only in our building structures with the new Birth Center and the Shawnee Mission Outpatient Pavilion at Prairie Star Parkway, but also in our improved rounding processes and advancements in technologies, such as PPID and Skylight.

But at the center of our accomplishments, and no doubt the most important contributor to our success, is our associates, along with SMMC’s tireless efforts to find the right people to grow our nursing workforce, which together allow all things to become possible.

While health care needs are growing at a national level due to an aging population, many organizations are not adding to their inpatient workforce. We are blessed at SMMC to be growing our nursing staff.

Building the right nursing team is a foundational piece of delivering quality and innovation in patient care. Ultimately, it is our team that makes the difference in outcomes for our patients. We simply can’t get to quality, and let alone innovation, without having the best possible workforce in place.

The most telling evidence that SMMC associates are providing high quality of care is our significant strides in HCAHPS scores. At the beginning of 2012, SMMC patient satisfaction scores sat in the top quartile, but quickly soared to the top 10 percent by the end of the year.

Our continual increases in HCAHPS scores are a direct result of our high quality nursing staff, coupled with its ability to proactively enhance the rounding process and successfully implement technological improvements.

Over the past year, we made a concerted effort to reach out and change our leader and hourly rounding practices, which has helped nurses tend to patients’ needs in a more effective way. Not only did these improvements enhance communication, but they also allowed for a better understanding of clinical issues.

Our recent advances in technology have created a safer environment for patients and a greater efficiency for caregivers, allowing them more time to spend with patients and less time on documentation.

And finally, SMMC’s commitment to facility growth, which can be witnessed by our new Birth Center and inpatient unit at the Shawnee Mission Outpatient Pavilion, has provided nursing associates with the state-of-the-art resources required to offer the finest innovation and quality in patient care.

Together, we have created an exceptional health care environment at SMMC. I feel a great sense of pride knowing that our team is capable of providing the best possible care for our patients now and into the future.

Sincerely,

Sheri Hawkins, RN, MS, MBA
Vice President and Chief Nursing Officer

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Delivering Quality and Innovation in Patient Care
Like the demand for nurses nationwide, Shawnee Mission Medical Center’s (SMMC) nursing staff also continues to grow. In fact, a surge in hospital census over the past six months has prompted SMMC to add at least 150 nurses in almost all areas including Acute Care, Critical Care and Women’s Services.

Laureen Wilde, Nursing Recruiter, is constantly challenged to identify and recruit quality nurses to join SMMC’s workforce. “Overall, I think most hospitals are looking for experienced nurses and it’s a huge struggle to find people with experience,” said Wilde. SMMC is using both internal and external recruitment efforts to meet this challenge. Current associates can help SMMC build a qualified nursing staff by recommending an outside candidate for a participating open position and receive up to a $5,000 referral bonus if that person is hired.

In addition to advertising with career-oriented websites, television stations and nursing-focused publications, SMMC recently decided to conduct two recruitment fairs due to the need to hire nurses quickly. Both fairs attracted a strong attendance of more than 150 applicants.

But identifying the right marketing tactics is only half the battle. Equally important is the ability to communicate to qualified candidates the reasons why they should choose to work at SMMC instead of other hospitals in the Kansas City area. One benefit to joining SMMC is its carefully designed orientation process, which immediately prepares new associates, especially new graduates, comes directly from their managers who are trained to deal with problems quickly and effectively.

“If someone comes to me with a concern, I put processes in place to support them,” said Merianne Lero, Manager in the Medical/Surgical Unit. “For example, communicating one-on-one with physicians is scary for many new graduates. So I coach them on how to communicate effectively and with respect and put support people in place to help them along the way.”

New graduates starting careers at SMMC experience a high level of support through the New Graduate Residency Program. Recently created, the six-month program offers specialized training on SBAR, effective communication, chart reviews and other skills specific to their units to help build confidence.

Perhaps the best way to develop nurses’ confidence in patient care is through simulation training, a practice that is now commonplace for all SMMC associates. Educators use simulations to teach nurses how to deal with problems that rarely occur, so they are prepared for any situation.

“In 20 minutes, I can test a nurse’s ability to recognize that something is wrong, use our equipment properly, and conduct drug capabilities in real life,” said Van Leeuwen. “Educators from hospitals who are not using simulation are envious and often tell me they wish simulations could be part of their staff training.”

This high level of support that SMMC provides to new associates plays a valuable role during the recruitment process, but it’s also imperative to find qualified nurses who possess the values and education necessary for a high-performing workforce, and who ultimately fit the SMMC culture.

“Attitude and how someone’s true love and desire for nursing comes out in an interview is really important,” said Wilde. “We look for people who are committed to nursing and committed to giving the very best patient care possible.”

One of the most important values SMMC managers seek out in the Peer Partner Program, where they are assigned a seasoned associate with whom they feel comfortable discussing issues and challenges. Oftentimes, the greatest support for new associates, especially new graduates, comes directly from their managers who are trained to deal with problems quickly and effectively.

DEGREES/CERTIFICATES
Janet Ahlstrom, Professional Development
Certified Facilitator For Development Dimensions International
Shawnee Mission Medical Center

Robert Anson, Short Stay Unit
Master of Science in Nursing
University of Kansas

April Crouch, Labor and Delivery
Bachelor of Science in Nursing
Kaplan University

Kevin Briggs, Physician Liaison
Certified Facilitator for Development Dimensions International
Shawnee Mission Medical Center

Michelle Cook, Progressive Care Unit
Associate Degree in Nursing
Johnson County Community College

Brandi Fernandez, Labor and Delivery
Sexual Assault Nurse Examiner
Office of Victims of Crime

DEGREES/CERTIFICATES
Brandi Fernandez, Women’s and Children’s Services
International Board Certified Lactation Consultants
International Board of Lactation Consultant Examiners

Candy Woellk, Shawnee Mission Surgery Center
Certified Nurse Operating Room Association of periOperative Registered Nurses

Jeanne Wollken, Shawnee Mission Surgery Center
Certified Nurse Operating Room Association of periOperative Registered Nurses

Sarah Woodward, Post-Anesthesia Care Unit
Critical Care Registered Nurse
American Association of Critical Care Nurses

Sarah Young, Oncology
Oncology Certified Nurse
Oncology Nursing Certification Corporation

DEGREES/CERTIFICATES
Carol Wheeler, Women’s and Children’s Services
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International Board of Lactation Consultant Examiners

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Sarah Woodward, Post-Anesthesia Care Unit
Critical Care Registered Nurse
American Association of Critical Care Nurses

Sarah Young, Oncology
Oncology Certified Nurse
Oncology Nursing Certification Corporation
Tracy Porter, Shawnee Mission Surgery Center  
Certified Nurse Operating Room Association of periOperative Registered Nurses

Monica Powers, Surgical Services  
Certified Nurse Operation Room Competency and Credentialing Institute

Jean Province, Nursing Resources  
Certified Medical-Surgical Registered Nurse Academy of Medical Surgical Nurses

Zilfa Ramaley, Surgical Services  
Registered Nurse, Certified – Inpatient Obstetrics National Certification Corporation

Certified Nurse Operation Room Competency and Credentialing Institute

Leslie Ramsdell, Progressive Care Unit  
Certified Medical-Surgical Registered Nurse Academy of Medical Surgical Nurses

Molly Rasmussen, Intensive Care Unit  
Critical Care Registered Nurse American Association for Critical Care Nurses

Carol Regan, Shawnee Mission Surgery Center  
Certified Nurse Operating Room Association of periOperative Registered Nurses

Judi Reinhart, Pre-Surgery Clinic  
Certified Ambulatory PeriAnesthesia Nurse American Society of PeriAnesthesia Nurses

Tracy Roach, Joint & Spine Care Center  
Orthopaedic Nurse Certified National Association of Orthopaedic Nursing

Margaret Saunders, Progressive Care Unit  
Certified Medical-Surgical Registered Nurse Academy of Medical Surgical Nurses

Susan Schedler, Professional Practice  
Adult Health Clinical Nurse Specialist American Nurses Credentialing Center

Dorina Schonherr, Progressive Care Unit  
Certified Medical-Surgical Registered Nurse Academy of Medical Surgical Nurses

Lynn Sipes, Shawnee Mission Cardiology Associates  
Adult Gerontological Registered Nurse Practitioner American Association of Nurse Practitioners

Janice Marcy Smith, TEAMworks  
Certified Emergency Nurse Emergency Nurses Association

Critical Care Registered Nurse American Association of Critical Care Nurses

Adult Health Clinical Nurse Specialist American Nurses Credentialing Center

Cathy Sower, Patient Placement  
Certified PeriAnesthesia Nurse American Society of PeriAnesthesia Nurses

Susan Stark, Professional Practice  
Adult Health Clinical Nurse Specialist American Nurses Credentialing Center

Malinda Stern, Neonatal Intensive Care Unit  
Registered Nurse, Certified National Certification Corporation

Registered Nurse, Certified-Low Risk Neonatal Academy of Women’s Health Obstetrical and Neonatal Nurses

Tricia Stevenson, Quality Management  
Certified Professional in Healthcare Quality Healthcare Quality Certification Board

Ashley Stimac, Mother/Baby  
Certified Breastfeeding Educator Breastfeeding Educator Program-Deb Bocar

Deborah Stout, Prairie Star Surgery Center  
Certified Ambulatory PeriAnesthesia Nurse American Society of PeriAnesthesia Nurses

Shalan Stroud, Professional Practice  
Critical Care Clinical Nurse Specialist American Association of Critical Care Nurses

Adult Health Clinical Nurse Specialist American Nurses Credentialing Center

Critical Care Registered Nurse American Association of Critical Care Nurses

Lori Swope, Infection Control and Prevention  
Certification in Infection Control Certification Board of Infection Control Epidemiology

Elvie Tahije, Heart & Vascular Center  
Certified Registered Nurse First Assist Association of periOperative Registered Nurses

Cherrie Taylor, Mother/Baby  
International Board Certified Lactation Consultants International Board of Lactation Consultant Examiners

Armida Torres, Professional Development  
Certified Medical-Surgical Registered Nurse Academy of Medical Surgical Nurses

Critical Care Registered Nurse Certification in Critical Care Nursing

Cheryl Van Dam, Shawnee Mission Surgery Center  
Certified Post Anesthesia Nurse American Society of PeriAnesthesia Nurses

Nancy Vaughan, Wound Care Center  
Certified Wound Care Nurse Wound, Ostomy and Continence Nursing Certification Board

Lupe Vega, Pre-Surgery Clinic  
Certified Ambulatory PeriAnesthesia Nurse American Society of PeriAnesthesia Nurses

Certified Post Anesthesia Nurse American Society of PeriAnesthesia Nurses

Joyce Von Lunen, Nursing Resources  
Vascular Access Board Certification Vascular Access Certification Company/Association of Vascular Access

Pamela Wagner, Behavioral Health  
Certified Psychiatric Nurse American Psychiatric Nurses Association

Charlene Wallace, Center for Women’s Health  
Oncology Certified Nurse Oncology Nursing Certification Corporation

Cheryl Welker, Medical/Surgical Unit  
Certified Medical-Surgical Registered Nurse Academy of Medical Surgical Nurses

Science of Development

in potential nursing candidates is compassion, a necessity to providing successful patient care. “We can teach the foundational skills to someone who has a nursing degree, but we can’t teach that person to have a compassionate heart,” said Lero. “We want patients to feel like they are being cared for in the best way physically, but also emotionally and spiritually. It’s really important that nurses have that extra something, a compassion for nursing and love of their patients, and that has to translate in an interview. If I don’t feel that from someone, I probably won’t hire that person because it’s just too important to the patients.”

Along with having experience and compassion, candidates are considered more favorable if they hold a BSN. Consistent with magnet hospitals, SMMC’s goal is for at least 80 percent of its nurses to possess a BSN degree.

And although SMMC does not seek out candidates with strong spiritual beliefs, Van Leeuwen feels it is one reason why people get excited about career opportunities at the hospital. “I think that our mission of being a Christian organization does draw a certain type of person,” said Van Leeuwen. “I don’t feel that people come to work here just to do a task, but instead they look at the whole person. We include many different spiritual aspects as part of our care at SMMC. Associates tell me they come here for that reason. They hear about our mission and want to be part of it.”

Laureen Wilde, Nursing Recruiter; Merianne Lero, Manager, Medical/Surgical Unit

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Effective Rounding Builds Trust and Team Environment

SMMC Focuses on Best Practices to Enhance the Rounding Process

In Fall 2012, Shawnee Mission Medical Center (SMMC) associates attended a two-day rounding workshop aimed at improving the patient experience through enhancement made to the rounding process. The workshop covered major rounding concepts such as addressing the five Ps, service recovery, recognition and reward, and using keywords at key times. Nursing associates from SMMC, including managers, charge nurses, clinical nurse specialists and educators, participated in the workshop.

“Everyone had to role play, acting as the patient, the observer and the one critiquing the situation, then we received debriefing and an evaluation card,” said Jenny Chambers, Administrative Director, Inpatient Services. “That was an eye-opener even for the leaders who believed they were the best at leadership rounding.”

SMMC takes great pride in using rounding to successfully create a quality, safe patient experience. Not only does consistent rounding serve as the most proactive way to anticipate patients’ needs, but it also reduces the number of call lights and directly impacts care outcomes.

“Patients who perceive that staff is rounding every hour score higher by far on all HCAHPS questions than those who do not see staff rounding or meet a nurse leader during their stay,” said Marge Jecker, Oncology Manager. “These outcomes have been consistently demonstrated at Shawnee Mission Medical Center and throughout our health system.”

Leader rounding is equally important as hourly rounding and can greatly improve communication between physicians, nurses and patients.

“Communication issues are probably the most common complaint I receive,” said Katie Nordwood, Patient Advocate. “When leaders round on patients, it gives patients and their families another opportunity to ask questions and be heard. I’ve had patients and families actually comment on how leader rounding has made them feel important.”

Along with the recent rounding workshop, SMMC is using other new training tools and processes to reinforce the importance of rounding with current and new associates. Training videos and revised scripts help nurses and leaders learn how to incorporate rounding into various types of practices as well as shift handoffs, medication distribution and discharges. In addition, patients are informed that the leadership team will visit them on a daily basis and leaders share regular reports of rounding outcomes with Chief Nursing Officer Sherri Hawkins.

“Associates are constantly made aware of rounding standards and processes so everyone understands that rounding is an expectation with an accountability component,” said Shannon Bresnidge, Manager, Short Stay Unit. SMMC’s efforts are making a difference. These tools and ongoing reminders are helping staff boost communication and promote teamwork.

Rounding, our promise that each patient and their families are acknowledged and given the opportunity to voice concerns and be heard. I’ve had patients and families actually comment on how leader rounding has made them feel important.”

Keeping Rounding Techniques Top-of-Mind

These key workshop takeaways serve as good reminders how rounding can improve patient care and promote a positive environment for associates.

- Patient rounding, including leader rounding, should take place on a timely, consistent basis every day including weekends.
- Use key words at key times to promote proactive versus reactive care.
- Use real time service recovery to quickly and effectively address patient issues.
- Leaders should promote recognition and give timely and specific feedback to associates.

Margie Jecker, RN
Oncology Manager

Sherry Lee, Pre-Surgery Clinic
Certified Medical Surgical Registered Nurse
Academy of Medical Surgical Nurses

Stephanie Lininger, Heart & Vascular Center
Family Nurse Practitioner
American Nurses Credentialing Center

Dawn Linneman, Breast Center
Oncology Certified Nurse
Oncology Nursing Certification Corporation

Certified Breast Patient Navigator in Breast Imaging and Cancer Care National Consortium of Breast Centers, Inc.

Amanda Logsdon, Surgical Services
Certified Emergency Nurse
Emergency Nurses Association

Florence Long, Wound Care Center at Prairie Star
Certified Wound Care Nurse
Wound, Ostomy and Continence Nursing Certification Board

Carol Maisch, Prairie Star Surgery Center
Certified Ambulatory PeriAnesthesia Nurse
American Society of PeriAnesthesia Nurses

Kelli Malone, Women’s and Children’s Services
International Board Certified Lactation Consultant
Lactation Consultant Services

Kim Mason, Neonatal Intensive Care Unit
International Board Certified Lactation Consultant
Lactation Consultant Services

Roxanne Mathis, Behavioral Health
Certified Psychiatric Nurse
American Psychiatric Nurses Association

Leighann McDonald, Wound Care Center
Certified Wound Ostomy Nurse
Wound, Ostomy and Continence Nursing Certification Board

Laurie McElwain, Women’s and Children’s Services
Certified Childbirth Educator
Lactation Consultant Services

Erik McGraw, Intensive Care Unit
Critical Care Registered Nurse
American Association of Critical Care Nurses

Pennie Mesmer, Heart & Vascular Center
Family Nurse Practitioner
American Nurses Credentialing Center

Lisanne Milford, Labor and Delivery
RNC Inpatient Obstetrician
National Certification Corporation

Pam Moore, Quality Management
Certified Professional in Healthcare Quality Healthcare Quality Certification Board

Janet Muldrew, Surgical Services
Certified Nurse Operation Room Competency and Credentialing Institute

Joy Mustapich, Oncology
Oncology Certified Nurse
Oncology Nursing Certification Corporation

Lori Myers, Utilization Management
Accredited Case Manager
National Board of Case Management

Heather Neir, Emergency Services
Certified Emergency Nurse
Emergency Nurses Association

Camela Noonan-Green, Emergency Services
Certified Medical Transport Executive
Accredited Case Manager
Air Medical Services

Armida Olson, Diabetes Center
Certified Diabetes Educator
American Nurses Credentialing Center

Terri Ottaway-Ortego, Patient Placement
Registered Nurse, Certified - Inpatient Obstetrics
National Certification Corporation

Jane Perkins, Ambulatory Care Center
Certified Ambulatory PeriAnesthesia Nurse
American Society of PeriAnesthesia Nurses

Christi Peterson, Progressive Care Unit
Certified Medical-Surgical Registered Nurse
Academy of Medical Surgical Nurses

Connie Phipps, Oncology
Oncology Certified Nurse
Oncology Nursing Certification Corporation

Peggy Polivka, Neonatal Intensive Care Unit
Registered Nurse, Certified
National Certification Corporation

Delivering Quality and Innovation in Patient Care
When it comes to clinical informatics, Shawnee Mission Medical Center (SMMC) continually strives to stay ahead of the curve. One of SMMC’s goals is to become a paperless organization by 2015, which will not only increase patient safety but will also allow nurses and physicians to increase coordination of patient care. Thanks to their commitment to integrate new technologies and enhance current systems during the past year, hospital associates are on track to make this goal a reality.

“Having everything electronic is golden because you can spend hours tracking down a chart, but with electronic documentation, everything is right there,” said Laura Anderson, Clinical Informatics Manager.

Introduced last year, Interdisciplinary Plan of Care (IPOC) is a tool where associates track patient progress and goals. It works as both a communication and tracking tool and is used by all members of the care team. For the patient, IPOC provides more effective communication between disciplines, which ultimately leads to better care, and strives to reduce the length of a patient’s hospital stay.

“One of the biggest beneﬁts of IPOC is that it prompts clinicians to think about complete patient care based on documentation by all disciplines,” said Pat Muller, Clinical Optimization Coordinator.

CareCompass, a new technology that SMMC recently added in February 2013, is another tool that electronically consolidates patient information in one place. Currently used exclusively by nurses, CareCompass provides a comprehensive summary of care including orders, test results and patient status, along with the ability for nurses to pass information to caregivers in a timely manner.

“One of the things we struggle with in health care is communication among providers,” said Anderson. “With CareCompass, both nurses view the information simultaneously, making bedside shift handoffs run more smoothly.”

To successfully use health care technologies, it’s imperative that associates pay close attention to alerts generated by the computer system to guide care. For example, SMMC uses Positive Patient Identiﬁcation (PPID), which is a barcode scanning technology that relies on alerts to prevent medication administration errors. If a nurse is about to administer the wrong medication to a patient, an alert will appear on the screen allowing staff to avoid a potential error.

“Thirty-ﬁve to 40 percent of all medication errors occur at the time of administration, so the beneﬁts of PPID in terms of error reduction are enormous,” said Muller. “In fact, when all steps are followed properly, PPID can reduce medication errors by 65 to 85 percent.”

Not only do patients feel at ease knowing they are receiving the proper medication, but nurses also like the safety net. “I love medication scanning. Like with anything new, you must become accustomed to how it works, but I do believe it tremendously reduces medication errors.”

Another technology that SMMC associates ﬁnd useful is SkyLight, the interactive TV system where patients can order meals, request services and view educational videos. SkyLight plays an active role in patient education, enabling nurses to push health information to patients based on their individual needs.

“SkyLight is a tool for our staff that’s most successful when accompanied by interaction with the nurse to ensure patient understanding of the material,” said Muller.

SMMC has been using SkyLight for some time, but its capabilities have been upgraded during the past year. A new, exciting functionality now offered by SkyLight, and just adopted by SMMC for the Birth Center, is iCareChat, which gives maternity patients video connectivity to show their newborns to family and friends.

In addition, SMMC is utilizing SkyLight for an initiative aiming at boosting HCAHPS scores by improving the level of quietness that patients experience while hospitalized. Patients who feel that there is too much noise for them to rest can use SkyLight to report noise, request earplugs or select relaxation videos.

Looking ahead, SMMC is actively pursuing other technology solutions to meet future needs. Many efforts on the horizon aim to consolidate patient, staff and facility information in one central location.

Within the next 90 days, SMMC will adopt Cerner patient accounting for its billing systems and also has plans to implement Cerner patient tracking. Next month, 167 of the hospital’s vital sign machines will begin feeding patient information directly into documentation after scanning a patient’s wristband, reducing the risk for transposing or punching in the wrong numbers. Additionally, information from IV pumps will soon flow directly into the system and a new module will give anesthesiologists the same capability to achieve complete, automated documentation.

“Compared to my experience with other area hospitals, Shawnee Mission Medical Center’s documentation systems are very easy to use,” said Lynn Houston, Staff Nurse. “I’ve only been working at Shawnee Mission Medical Center for a few weeks and it has been a very easy transition.”

Delivering Quality and Innovation in Patient Care 7
Planning for the Next Level

New Birth Center Positions SMMC for Staff Growth and Higher Patient Volumes

Long recognized as the area leader in maternity care, Shawnee Mission Medical Center (SMMC) began planning for its new Birth Center years ago. Many factors prompted the decision to build a birthing center on the SMMC campus. Not only was the previous facility due for updating, but it had reached capacity at 4,000 births per year, making it impossible to accommodate all expectant mothers within the community preferring to entrust the birth of their newborns to SMMC.

“Most importantly, the new Birth Center proves Shawnee Mission Medical Center’s commitment to the community and women’s health,” said Denise Martinek, Executive Director of Women’s and Children’s Services. “The new facility also allows us to offer a state-of-the-art, spa-like birthing environment along with the benefits of the latest technology in maternity and neonatal care.”

The Shawnee Mission Birth Center features 26 labor and delivery rooms, 43 mother/baby rooms, a Level III NICU with 24 private rooms, along with large waiting areas that provide a spacious, comfortable environment for families.

“The new Birth Center was built with the entire family in mind and designed to support each patient’s personalized birth plan,” said April Crouch, Manager of Perinatal Services. “Spacious waiting rooms, cordless fetal monitoring, labor tubs and hotel-style bathrooms are only a few of the features of the new Birth Center.”

For families with newborns needing a high level of care, the NICU offers privacy, enhanced patient monitoring, and the latest technology appropriate for an intensive care setting. It also features a retreat room with a television, nutrition area and showers where parents can take a break, along with a transition room to support families during their stay. The quiet, soothing environment not only benefits infants and families, but also enhances the ability of associates to offer exceptional patient care.

“Our private rooms have made caring for our patients so much more personal,” said Ellen Ainger, NICU Staff Nurse. “There is privacy for the parents to bond with their infants. Also, it’s very helpful to have everything we need to care for patients located within their rooms.”

The NICU’s enhanced layout is also helping to improve parent education. Because babies and families are now able to stay together in one room, parents are able to support each patient’s personalized birth plan.

Raimonda King, Manager of Women’s and Children’s Services

Pat Anderson, Surgical Services
Certified Nurse Operation Room Competency and Credentialing Institute

Sandie Anderson, Diabetes Center
Advanced Diabetes Management
American Nurses Credentialing Center

Certified Diabetes Educator
National Certification Board for Diabetes Educators

Adult Health Clinical Nurse Specialist
American Nurses Credentialing Center

Beth Armbruster, Nursing Resources
Critical Care Registered Nurse
American Association of Critical Care Nurses

Tina Bailey, Surgical Services
Certified Surgical Assistant
National Surgical Assistant Association

Certified Nurse Operation Room Competency and Credentialing Institute

Julie Baker, Prairie Star Surgery Center
Certification in PeriAnesthesia Nursing
American Society of PeriAnesthesia Nurses

Julie Banning, Women’s and Children’s Services
International Board Certified Lactation Consultants
National Association of Professional Nurse Consultants

Kathy Barbay, Joint & Spine Care Center
Certified PeriAnesthesia Nurse
American Association of PeriAnesthesia Nurses

Janet Beger, Labor and Delivery
Inpatient Obstetric Nursing
National Certification Corporation

Kathleen Bryant, Oncology
Certified Oncology Nurse Specialist
American Nurses Credentialing Center

Shelli Ely, Women’s and Children’s Services
Certified Breastfeeding Educator
National Certification Corporation

Delivering Quality and Innovation in Patient Care
of Maternity Care

NURSING SHOWCASE
Individual Nursing Accomplishments, May 2012-April 2013

The following nurses are acknowledged for their achievements during the past year. Nurses are listed in alphabetical order.

AWARDS
Marti Hinkle, Ambulatory Care Center
Meg Holloway, Breast Center
Cindy Ladner, Surgery Center
Lori Meyers, Utilization Management
Richard Pepin, TEAMworks
Pam Richey, Nursing Resources
Jamie Todd, Nursing Resources

HEROES IN HEALTHCARE
Meg Holloway, Breast Center
Heroes in Healthcare, Ingram's Magazine

NEW CERTIFICATIONS
Kathy Barbay, Professional Practice
Kathleen Bryant, Oncology
Richard Pepin, TEAMworks
Pam Richey, Nursing Resources
Jamie Todd, Nursing Resources

NURSING SHOWCASE
Individual Nursing Accomplishments, May 2012-April 2013

Kimberly Fosso, TEAMworks/FACT Program
Adult/Ageonado Board Certified Sexual Assault Nurse Examiner
International Association of Forensic Nursing

Tanya Steinlage, Emergency Services/FACT Program
Adult/Ageonado Board Certified Sexual Assault Nurse Examiner
International Association of Forensic Nursing

AWARDS
Marti Hinkle, Ambulatory Care Center
Outstanding Associate, SMMC

Meg Holloway, Breast Center
Outstanding Associate, SMMC

Cindy Ladner, Surgery Center
Leader of the Year, SMMC

Lori Meyers, Utilization Management
Outstanding Associate, SMMC

Richard Pepin, TEAMworks
Outstanding Associate, SMMC

Pam Richey, Nursing Resources
Angel Award, SMMC

Jamie Todd, Nursing Resources
Associate of the Year, SMMC

HEROES IN HEALTHCARE
Meg Holloway, Breast Center
Heroes in Healthcare, Ingram’s Magazine

NEW CERTIFICATIONS
Kathy Barbay, Professional Practice
Adult Health Clinical Nurse Specialist
American Nurses Credentialing Center

Kimberly Ambrose, Wound Care Center
at Prairie Star
Certified Wound Care Nurse
Wound, Ostomy and Continence Nursing Certification Board

Cindy Ambrose, Wound Care Center
at Prairie Star
Certified Wound Care Nurse
Wound, Ostomy and Continence Nursing Certification Board

Mary Wirtz, Professional Development
Progressive Care Certified Nurse
American Association of Critical Care Nurses

CERTIFICATIONS
Komi Aghodzie, Intensive Care Unit
Critical Care Registered Nurse
American Association of Critical Care Nurses

Eric Kiarie, Intensive Care Unit
Critical Care Registered Nurse
American Association of Critical Care Nurses

Stephanie Kimbrel, Emergency Services/FACT Program
Family Nurse Practitioner
American Academy of Nurse Practitioners

Cindy Ladner, Surgery Center
Certified Administrator Surgery Center
Ambulatory Surgery Association

Temi Otaow andro Ortego, Patient Placement Nurse Executive - Board Certified
American Nurses Credentialing Center

Susan Schedler, Professional Practice
Certified Anticoagulation Care Provider
The National Certification Board for Anticoagulation Providers

Laura Anderson, Clinical Informatics
Certified Medical-Surgical Registered Nurse
Academy of Medical Surgical Nurses

SMMC physicians and associates celebrate the opening of the new Birth Center.

spending additional time at the hospital, interacting more frequently with staff and taking a more active role in the care of their newborns.

Parents comment daily on how wonderful the Birth Center is,” said Regina Fraya, NICU Manager. “One father said it best when he stated that ‘Shawnee Mission Medical Center now has a building as great as their neonatal program.’”

There’s no doubt that the new Birth Center is a remarkable facility, but the top differentiating factor that sets SMMC apart from other birthing centers is its outstanding staff.

“Although patients comment about how beautiful the new Birth Center is, their positive comments are overwhelmingly directed toward the exceptional nursing care they received during their stay,” said Raimonda King, Manager of Mother and Baby.

“I was so impressed with the dedication of our staff,” said Vance. “We had eight hours of training set for the first day and more than 100 associates showed up with their bags to spend the night, knowing they would be snowed in. It was just amazing.”

In appreciation for their dedication, all associates who completed the training were eligible to win manicures, pedicures, massages and other prizes generously donated by local businesses.

Looking to the future, SMMC is currently focused on increasing Birth Center staff by hiring labor and delivery nurses to accommodate the expected growth in volume. SMMC is not only looking for nurses with experience, but those who are equally excited about supporting the hospital’s mission and providing a positive patient experience in the new Birth Center.

“Each day, I am in awe that we are able to provide such a wonderful experience for the patients we serve,” said Fraya.

“The experience offered is one of high-touch and high-tech and matches the great level of care offered from the staff and physicians who care for our smallest patients.”

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Creating a Strong Foundation at Prairie Star

Shawnee Mission Medical Center’s (SMMC) vision for a one-stop integrated bariatric program, providing patients with physician offices, labs, testing, surgery and overnight nursing care all in the same location, became a reality on December 12, 2012, with the opening of its first inpatient unit at the Shawnee Mission Outpatient Pavilion at Prairie Star Parkway.

“The current standard within bariatrics is that many facilities are freestanding and nimble, making it easier for patients to access everything in one place,” said Dallas Purkeypile, Manager of Emergency and Inpatient Services, Prairie Star. “The inpatient unit at Prairie Star allows us to stay current with other facilities in the area.”

Although the Bariatric Center of Excellence and Joint Commission Accredited unit was originally planned with bariatric patients top of mind, SMMC quickly realized that the facility was also a perfect fit for spine surgery patients due to the similar care procedures for both groups.

The new unit features eight private rooms, four PACU bays and two state-of-the-art operating rooms. Providing total patient care, the unit is staffed 24/7 with nurses, an on-site pharmacist during the week and a respiratory therapist on surgery days.

“The associates at Prairie Star work together wearing many hats and helping in multiple areas depending on needs due to patient volumes,” said Cindy Ladner, Administrative Director, Surgery Centers. “We are very blessed to have an outstanding team.”

Although some nursing associates are new to SMMC, others transferred from the 75th Street campus, which has proven beneficial since these associates are not only experienced in the bariatric and spine specialties, but also understand how SMMC operates as a whole.

“We want to be an image of Shawnee Mission Medical Center, just in a smaller, controlled environment that beniches patients,” said Purkeypile.

During the process, the biggest challenge for associates was moving a Center of Excellence to a freestanding location and ensuring that the proper resources and processes were in place to meet Center of Excellence criteria and ensure patient safety.

“The strength that helped us work through challenges was the ability to utilize all current hospital resources to set up a new location,” said Ladner.

Functioning as an extension of the 75th Street campus, Prairie Star has enabled SMMC to grow its bariatric patient base, increasing volumes by 129 percent from first quarter last year. In addition, the unit’s most recent HCAHPS scores were in the 90th percentile and exhibited a high level of nurse communication.

Patients have been very satisfied with their experience and often describe their stay as spa-like, which may be attributed to the healing environment created by private rooms featuring windows that offer peaceful, calming views of the prairie.

“The spacious rooms have benefited our patients and families allowing family members to stay, which is very helpful to our out-of-town patients,” said Alicia Hanson, RN, Prairie Star Surgery Center.

Likewise, the staff is enjoying being part of the new adventure and is taking a lot of pride in the unit and life-changing services provided to patients.

“It’s most rewarding to see patients 100 to 200 pounds down at their support groups,” said Ladner. “That’s when the light went on with me as to the wonderful service we are providing to these patients. Our nurses are very passionate about the care they provide to our patients, and I think passion is so important.”

This initial group of associates has the unique opportunity to establish a strong foundation at Prairie Star and set the future direction of the program.

“Because it’s small, the environment brings together leaders, nursing associates and care teams working as a group to seamlessly provide excellent care,” said Purkeypile. “We have tried to be very strategic with our hiring, knowing that these associates are fully capable of providing patients with the safest, highest quality care possible at a remote location and that they will be the key people for the unit now and in the future.”

Dallas Purkeypile, Manager of Emergency and Inpatient Services Prairie Star

Cindy Ladner, Administrative Director, Surgery Centers

The new unit features eight private, state-of-the-art inpatient rooms.