What a challenging and exciting year we had in 2010 filled with many accomplishments! Two very important events occurred that changed who we are and how we practice patient care. On April 1st, we became one system with three sister hospitals to form the powerfully connected Saint Alphonsus Health System. Then, on October 15th, we officially went live with Genesis.

It has been a little over six months since our official transition to Genesis, and I want to take this opportunity to thank the nurses for their tremendous commitment in making this transition an amazing success! Not only am I keenly aware of your preparation and willingness to work with this new tool, but Trinity Health also recognized us as the new best practice that will be adopted at other future Go-Lives. Thank you for all your efforts to adopt this new system of care.

Much of what we have accomplished at Saint Alphonsus Regional Medical Center has occurred because of our innovative approaches, often driven by our nurses. Advanced technology such as Genesis, our journey to Magnet status, the Glycemic Control program, and the Outpatient Diabetes program will continue to improve the quality and efficiency of the care we deliver. Nurses are an essential part of delivering such high-quality care and are integral to our continued success.

Because of you, working together now to serve a broader geographic community, Saint Alphonsus cared for 42,000 Emergency Department patients, provided surgical care to over 14,000 patients and touched over 224,000 patients and families through important clinical services. We are proud of the Saint Alphonsus Health System. Now and in the future, we remain committed to providing our nurses with the resources and educational opportunities needed to foster professional growth, development and continuous improvement.

Innovation and continual learning that support delivery of best practices and compassionate patient care are the methods by which Saint Alphonsus will continue to succeed in the face of a continually changing and challenging healthcare environment. Moving forward, we must continue to focus on enhancing quality and value as well as increasing efficiency and effectiveness in ways that can be managed, measured, and tracked accurately. Quality and innovative nursing practice is fundamental in this effort, and we rely on our nursing professionals to form the foundation for our future success.

Nearly 120 years after the Sisters of the Holy Cross founded this hospital, we continue in our quest to honor their legacy based on a compassionate mission to heal body, mind, and spirit. On behalf of the Board of Trustees and Saint Alphonsus Leadership Team, I thank you all for the efforts you make every day to help us realize this goal. And I commend you all for the successes you have brought our organization this year.

Sally E. Jeffcoat
President and Chief Executive Officer
Saint Alphonsus
Message from the VP of Nursing and CNO

To my Nursing Colleagues,

This annual report is a celebration of success—a celebration of your success as nurses at Saint Alphonsus. The following pages contain stories and pictures of your work with patients, colleagues, and community members.

Saint Alphonsus recently received the HealthGrades Distinguished Hospital for Clinical Excellence™ Award, placing Saint Alphonsus among the Top 5% of hospitals nationwide for clinical performance. We received this award because of the superior patient outcomes across 28 diagnoses and procedures measured by HealthGrades. Nurses played an important role in receiving this award because nurses were caring for patients during their entire hospital stay—whether that stay was measured in hours or days.

When you think about success, what are your measures of success? Why do you show up for work each time you are scheduled? Why are you a professional nurse? When I ask myself these questions, sometimes the answers are very clear and other times not. One constant always remains the same. I am a professional nurse because I believe that people needing nursing care deserve the very best care, always. This belief lead me to becoming a nursing leader so I could touch more patients than I could as a direct care nurse.

In 1873, Florence Nightingale gave this advice to nursing students:

*Nursing is most truly said to be a high calling, an honourable calling. But what does the honour lie in? In working hard during your training to learn and to do all things perfectly. The honour does not lie in putting on Nursing like your uniform. Honour lies in loving perfection, consistency, and in working hard for it: in being ready to work patiently: ready to say not “How clever I am!” but “I am not yet worthy; and I will live to deserve to be called a Trained Nurse.”

Florence Nightingale was right—nursing is a high calling and cannot be done by just anyone. I believe nursing honor, however, is more than “loving perfection, consistency, and in working hard for it.” Nursing honor is also in being willing to care about your patient, yourself, and your co-workers and to do this in a professional way.

Health care is changing more rapidly than in the past and is challenging our profession. Today, more than at any other time, each of you must be able to articulate who you are and what you do as a nurse regardless of your title or role. You need to be able to articulate your value—not just your monetary value, but your professional value. You must be able to articulate why you deserve to be called a nurse.

I have had the profound privilege to serve as your Chief Nursing Officer for the past two and a half years. I am so very proud of you and the work that you do every day taking care of the people who entrust their lives to you. This annual report is a living tribute to each one of you. The people in the report represent all of us and the successes we have had over this difficult year. Take a moment to read it and see the honor in being a nurse.

Karen Hodge, RN, MSN

Vice President of Nursing and Chief Nursing Officer
“A Professional Practice Model is the overarching conceptual framework for nurses, nursing care, and interdisciplinary patient care. It is a schematic description of a system, theory, or phenomenon that depicts how nurses practice, collaborate, communication, and develop professionally to provide the highest quality care for those served by the organization (e.g. patients, families, community). The Professional Practice Model illustrates the alignment and integration of nursing practice with the mission, vision, philosophy, and values that nursing has adapted. Magnet hospitals take the lead in research efforts to create and test models of professional practice for nurses.”

—Magnet Recognition Program® 2008

Developing the Profession Practice Model

A major forward step in nursing professional practice this year was the development and design of the Professional Practice Model True North. In the past, nurses fallen away from consistently using a model to guide practice. In the spring of 2010 it was discovered that most nurses were actually unaware that a Professional Practice Model existed at Saint Alphonsus. When they were shown the existing model (adopted in 2007), most nurses expressed that they were confused by its complexity and underlying assumption of a specific theorist’s work. It just didn’t resonate with Saint Alphonsus nurses.

In August 2010 a team was formed to address this issue. An email was sent out to all Saint Alphonsus nurses asking for volunteers with an interest in theory, model development and professional practice to participate in a great opportunity. Nurses from various departments responded: Emergency, Rehabilitation, Quality and Safety, Family Maternity Center, Genesis, Neurosciences, Clinical Education and Research, Patient Care Services and more! In addition to being from diverse departments, the roles of the team volunteers were also diverse: directors, direct care, coordinators, managers, educators, charges; even a Six Sigma Black Belt!

At the first meeting, the team was oriented to the purpose and components of a Professional Practice Model. They examined successful models from hospitals throughout the country and decided that rather than adopting an existing model, they wanted to make Saint Alphonsus’ model from the ground up. This was an ambitious choice, but the pay-off would be spectacular because it would be relevant, culturally aligned and very “Saint Al’s”! There was a lot of brainstorming as the team considered how a depiction of their nursing practice as a whole might “look” if put on paper. Major themes and structures already in place as well as goals for the future were identified by the team. This process started in September and ended about 5 months later with a beautiful completed Professional Practice Model — True North!

Many Saint Alphonsus nurses helped form the True North Model. Their input, feedback, constructive criticism, design advice and suggestions were invaluable. A special “thank you” goes out to the following nurses who were active members of the development and design team: Adrienne Presnell, Anne Sumner, Connie Potts, Cynthia Malmoeski, Donna Monroe, Heather Healy, Jessica Torrens, Jill Watson, Kathy Jaeger, Lenora Jones, Linda Martin, Lowell Wise, Marilyn Floyd, Susan Tavernier, Tammie Sherner, and Wendy Dable
Relationship Centered Care (RCC)

RCC is our Caring Model and Care Delivery System. This system was created by and for Saint Alphonsus nurses. RCC addresses the “how” and “why” in nursing patient care delivery. The figures portrayed in the model represent the people we interact with. We believe that three relationships impact patient care: the relationship you have with yourself, the relationship you have with your colleagues, and the relationship you have with the patient and their family/loved ones. All of these relationships need to be in good shape in order for us to truly provide a healing presence for our patients. Caring is the heart of nursing; NURSES create the healing environment.

RCC education was given to inpatient nursing units in 2008 and 2009. Currently, it is an element of new hire orientation with ongoing integration efforts organization-wide. RCC is not something we DO, it IS finding meaning in our work. RCC is our way of being. You provide RCC everyday!

An Introduction to the True North Model

The compass-like design represents the guiding nature of the Professional Practice Model. True North depicts how Saint Alphonsus nurses take care of patients, develop professionally (West), use new knowledge and innovation (East) and function autonomously to make the best decisions at the point of care (South). The compass is also aligned with the Mission, Guiding Behaviors, and Core Values that are so important to Saint Alphonsus.

Note the “Nurse-Patient Relationship” is the North point on the compass. On a real compass, North is the main point of reference. The relationship with the patient should always be the main point of reference for nurses. North helps align ourselves with the other points on the compass, and with the other directions we want to go.

Shared Governance

Saint Alphonsus nursing staff and leadership use a shared governance system to facilitate all nurse participation in decisions about nursing practice and the overall care environment. A “Pillars Model” illustrates the structure and components that make up our hospital-wide system. The principles of inclusion, communication, respect and transparency are very important. This is a vital vehicle — linking nurses from all areas of SARMC in an ongoing effort to provide the highest quality patient care in the best work environment possible. The council structure, which was formed in 2005, consists of the overseeing and guiding body — the Nursing Practice Coordinating Council (NPCC), and eight smaller groups referred to as Nurse Practice Councils (NPCs). The Evidence Based Practice Council is not represented as a pillar, but is rather a foundation for the remaining councils.
Trainers

The Genesis Trainers were nurses from a variety of units and backgrounds. This team was made up of high-achieving associates who applied for the positions knowing they would face many challenges while supporting and promoting the biggest change in the day-to-day workflow of nursing and patient care. The trainers soon became subject matter experts and began teaching the rest of their colleagues. The training team proved to be a valuable asset to the hospital by creating a positive synergy that influenced nurses throughout the house during training and GoLive.

Super-Users

The Genesis Journey for Saint Alphonsus began with a search for Super-Users. The Super-User team consisted of bedside nurses from every department and every shift. Early Super-Users and nurse managers participated in Integrated Process Reviews. Then the focus was shifted to classroom facilitators and staff mentors. Super-Users put in countless hours to assist with training and ensure that the staff on their units were up to speed. Super-Users were key in communicating to hospital staff how their workflow would be impacted once the new documentation system went live. Just prior to GoLive, we had about 20 nurses assisting in the SWAT process. This process included back loading information into PowerChart prior to cutover. During the 6 weeks of GoLive, we had over 150 nurses working as Super-Users around the clock. They braved the new EHR with skill and bravery.
End-Users
End-Users were on the ground and in the front line keeping our patients the center of our focus. The nursing team referred to as End-Users include every nurse who documents on patient care. The End-User attended 36+ hours of training to better their working knowledge of PowerChart and how it was going to impact their workflow. In most cases, they attended training in addition to their normal work schedule. The long hours of class time and practice paid off as the transition took place. They remained calm, were able to articulate to the patients what was happening, and speak to the benefits that this change would bring. Nursing was able to continue to provide excellent patient care while preparing for this major change.

Nurses participated in cutover by filling out the Kardex for the active orders that needed to be back loaded for SWAT and cutover.

The first two weeks of GoLive the bedside staff, along with charge nurses, were the eyes and ears of the hospital. They took on the vital role of reporting the issues that came with the implemented changes. Diligence is a word that describes their attitude in wanting to get it right, and understand how the new system was impacting the day-to-day operations.

Al’s Pal’s
Al’s Pals is a group of nurses who became the link between the nursing unit and the Genesis Team. They carried out the GoLive tasks of preparing unit specific GoLive cheat sheets, communicating changes and issues from the Genesis team to the unit and vice versa. This group of nurses was instrumental in providing Genesis with feed back on how to improve a variety of processes and training materials. This team continues to be active today.
Encouraging and Rewarding Excellence

Through the implementation of the clinical ladder at SARMC, nurses have a formal mechanism to advance in their practice and be recognized for their accomplishments.

Designed specifically for nurses who work with patients in the inpatient and ambulatory settings, the clinical ladder has five levels (Professional Nurse I through V) that describe key competencies and accountabilities.

New hires begin at Level I or II, depending on whether they have a year or more of experience. To progress beyond the first two levels, nurses must apply for each level in order and show performance, experience and education as they climb. Each advancement on the clinical ladder is associated with a designated raise in addition to the nurse’s annual salary increase.

<table>
<thead>
<tr>
<th>Total Number of Nurses</th>
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<tbody>
<tr>
<td>Total RNs</td>
<td>866</td>
</tr>
<tr>
<td>Total LPNs</td>
<td>25</td>
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**Registered Nurse Degrees**

| Associate Degrees      | 402 |
| Diplomas               | 27  |
| Bachelor of Science Nursing | 418 |
| MSN, MN or MS in Nursing | 15  |
| PhD/DNSc                | 3   |

**Registered Nurse Certifications**

| Number of RNs Certified | 278 |
| Number of RNs with Multiple Certifications | 36  |
| Clinical Nurse Specialists         | 4   |
| Nurse Practitioners               | 41  |

SARMC supports certification as a method of validation of specialty knowledge and professional advancement. Certification demonstrates the meeting of nationally recognized standards of clinical excellence.
On November 13, 2010, the March of Dimes Nurses of the Year Award program recognized nurses throughout the state in 20 professional categories including “Distinguished Nurses of the Year”. In order to qualify, the recipient in each category must be a nurse, LPN, RN or an Advanced Practice nurse, whose leadership and contributions must have made a significant impact in their community and to the profession of nursing.

Three Saint Alphonsus nurses were nominated by their patients, friends, co-workers, businesses and organizations. The award winners for Saint Alphonsus were:

- **Kathy Higgins**
  RN, BSN
  Clinical Resource Manager
  Distinguished Career Award
  33 years of service

- **Cathie McDonald**
  RN Level V
  Intraventional Radiology RN
  Distinguished Career Award
  41 years of service

- **Adrianne Presnell**
  BSN, CNRN
  Patient Satisfaction Coordinator
  Rising Star Award
  7 years of service

“I am so impressed with the descriptions of each of these nurses as I read the nominations,” said Karen Hodge, CNO. “They represent excellence across many areas of nursing practice. The nominations themselves tell inspirational stories, stories of compassion and healing, stories of commitment and achievement, and of nurses who have truly made a difference in the lives they have touched.”