

Making a *Difference*





Boone Health Patient Care Services Vision

We are committed to the consistent delivery of excellent patient care which encourages the patient and loved ones to be an integral part of the care team.

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Chief Executive Officer

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Chief Medical Officer

Edward J. Clayton, CPA, MBA
Chief Financial Officer

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Chief Nursing Officer

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Sr. Vice President, Provider Services

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With articles by Madison Loethen,
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Boone Health's mission is to improve
the health of the people and
communities we serve.

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Front cover: (L to R) LeAn Smith, ADN,RN; Danielle Major and her daughters;
Grace Westfall, ADN, RN; Lisa Smith, RN

Read more about this family of Boone Health nurses on page 10.

Inside front: (L to R) Lorin Marlay, BSN, RN; Robin Sypolt, BSN, RN, CCRN

Back cover: (L to R) Angela Miller, BSN, RN; Phyliss Golden, RN

Introduction from the CNO

"Our mission is to improve the health of the people and communities we serve. We will accomplish that mission by making Boone Health an excellent place to work and receive health care."

During Nurses' Week in 2022, our theme was "You make a difference." And it's true – Boone Health nurses do make a difference for our patients and families, their colleagues, their communities, and even the future of their profession.

Our 2022 Nursing Services Annual Report reflects the many differences our nurses have made in providing quality care, improving patient outcomes, implementing evidence-based best practices, achieving new professional development goals, and educating a new generation of nurses.

In this report, you'll see the innovations and evidence-based practices implemented by our nurses to promote safety, provide an excellent patient experience, and support current and future nurses. Our growing Nurse Residency Program continues to support nurses during their first year as they transition from classroom to bedside, while Boone Health's state-of-the-art simulation lab gives current nurses and nursing students the opportunity to do hands-on training in an interactive environment.

Nursing is and has always been a challenging profession – the roots of modern nursing can be traced back to a literal warzone. The specific challenges we face today are quite different from the ones that Florence Nightingale witnessed in Crimea in 1854, but the spirit of healthcare reform and mission of modern nursing remain relevant and strong. Similarly, the mission of Boone Health is as vital now as it was when we first opened our doors as a county hospital in 1921.

Today, healthcare organizations are challenged to develop innovative approaches to achieve excellent patient outcomes,



**Shannon Kuczynski, MHA,
MSN-A, RN, NE-BC**
Chief Nursing Officer

commit to engagement with our nursing staff, show resilience in times of change, and demonstrate that we are prepared for the future of healthcare. It is important that, just as our nurses make a difference for patients, we make a difference for our nurses.

In 2022, our nursing leadership collaborated to develop creative staffing solutions, improve certification rates, refresh our Professional Nurse Development Program, achieve PTAP accreditation for our Nurse Residency Program, recognize patient care staff who prevent near-misses, and much more.

Of course, none of this would be possible without our nurses sharing their voices and letting us know how Boone Health can better support their work and mission. I thank you all for your valuable feedback!

I am proud of how Boone Health's nurses persevere through the challenges faced by many healthcare organizations today and rise to meet them without losing sight of their priority: to provide, safe, high quality, patient-centered care. The 2022 Nursing Services Annual Report shares our story, our dedication, our challenges, and our successes.

In 2023, I look forward to working with this impressive group of nursing professionals as we continue to build upon a strong foundation of excellence and enjoy our journey towards our fifth Magnet® designation. I would like to share my sincere and heartfelt gratitude with each and every one of you – it takes a team to make all things happen, and that we are!

A handwritten signature in black ink that reads "Shannon Kuczynski". The signature is fluid and cursive.

Boone Health's New CNO

In October 2022, Shannon Kuczynski, MSN-A, MHA, RN, NE-BC, joined Boone Health as our new Chief Nursing Officer.

Shannon grew up in Columbia, attending David. H. Hickman High School before earning her degrees at the University of Kansas – Kansas City.

Shannon brings 28 years of nursing experience, with 25 in leadership roles. Before coming to Boone, she most recently served as Division Vice President, Service Lines and Division Chief Nursing Informatics Officer for Hospital Corporation of

America (HCA) in Overland Park, Kansas. While there, Shannon specialized in workflow optimization and transforming data into usable knowledge.

"I am excited to come back to Columbia and join a health system that is known for excellence in nursing," says Shannon. "I look forward to getting to know the team and making a positive impact on our employees and patients."

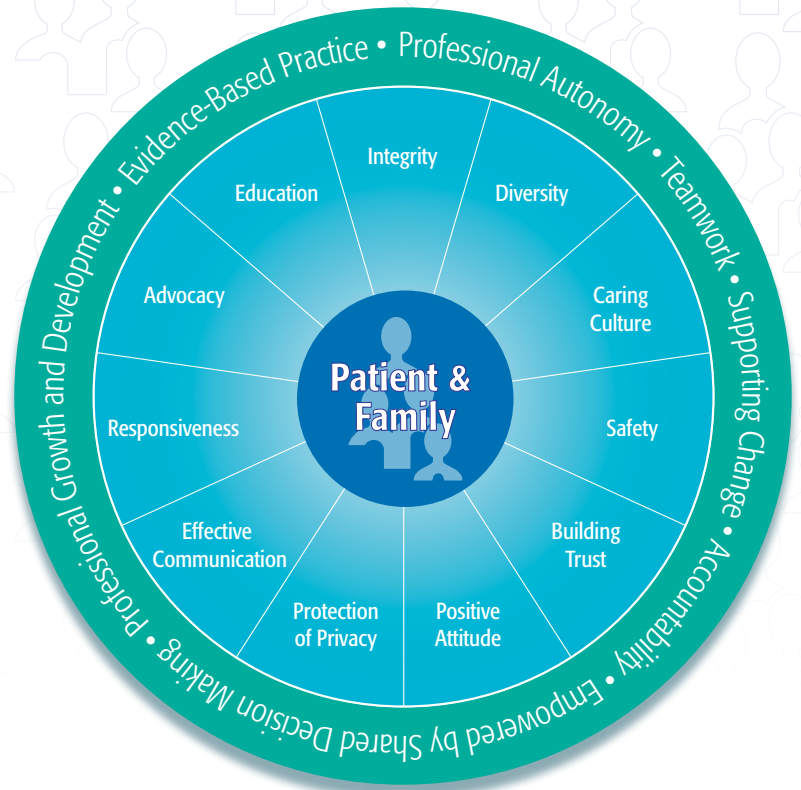
Professional Practice Model

Boone Health's Professional Practice Model is a schematic description of how nurses practice, collaborate, communicate and develop professionally to provide the highest quality care to the patients we serve. Our current Professional Practice Model was developed by the Professional Development Core Council and approved by Coordinating Council in 2018.

Because the patient and family are at the center of all our care and practice decisions, they are also at the center of the Model. The hospital's Spoonheads logo is also at the center of the Model and represents the Boone family.

Surrounding the patient and family, the next ring contains all the characteristics that make Boone Hospital nurses effective. In addition to the Standards of Excellence, responsibilities central to nursing practice include educating patients, advocating, communicating effectively, and more.

The outermost ring reflects the environment at Boone Hospital Center which enables and empowers our nurses to practice effectively, such as Shared Decision Making, our focus on teamwork, and the research and Evidence-Based Practice that keep our profession current and lead to improved outcomes for our patients.



Emergency Response

On June 27, 2022, when an Amtrak train derailed near Mendon, Mo., Boone Health was ready to help. The medical response to this accident was definitely a community effort, with hospitals and EMS crews from mid-Missouri and Kansas City receiving and treating over 150 injured passengers.

Boone Health is no stranger to coming together when the unexpected happens. On a Monday night, we treated 28

patients with mild to moderate injuries who'd been on the train.

This wouldn't have been possible without considerable help from Boone employees and medical staff who heard the call and came in to support our scheduled staff. People in all areas – Emergency Department, EMS, Medical Staff, Surgery, Anesthesia, Admissions, Radiology, Lab, People Services, Food Services, EVS and more – showed up to pitch in wherever help was needed.

We did more than provide excellent medical care to these 28 patients. We had several unaccompanied minors arrive, and employees provided advocacy, security and a calming presence. Some employees helped find shoes for patients who had lost them during the commotion. Food Services provided meals to medically cleared patients who hadn't eaten for hours. We also set up charging stations for their devices, provided clothing and arranged transportation and places to stay the night.

We spend much time planning for these type of events and praying not to experience them, but the Boone Team showed up with expedience, teamwork and compassion.



Patient Compliments

I recently gave birth to my first baby and wanted to give a huge thank you to the nurses on L&D and Postpartum floors – you all are so amazing! As scared as I was becoming a first-time mom, you made this experience so much easier and took such great care of me, my husband and son. I can't thank you all enough. You all are so knowledgeable, personable and your bedside manner was top notch going above and beyond to ensure I was okay. I appreciate you all more than words can say. Thank you again to all you wonderful nurses! If I have more babies in the future, I'll be sure to come back to Boone.

I am traveling and not feeling well. When I spiked a fever, I knew I had to get to the ER. I went to the ER at Boone and was taken in immediately. From that point on I had the best care I've ever received in my 67 years on the planet! Kind, caring, efficient! They were wonderful!

I would like to thank EVERYONE from the Boone Hospital team, the nurses, Lisa Byrd and Dr. Mellitt. I cannot name all the people from my arrival to my discharge. The professionalism, the compassion, and the caring made my stay so much easier. I knew I was in good hands.

My spouse is currently admitted in the hospital, and we are going through some hard times, but I just want to inform you that you have an amazing staff here. The nurses who assisted

my spouse are awesome. They go beyond their job descriptions! I just wanna say thanks a million for going an extra mile for us and for being so pleasant.

My surgery took place at 2:50 p.m. on July 14. Naturally, I remember very little about that day. July 15 was quite different. I remember that morning vividly and my memories are very pleasant. The three ladies who took care of me that morning were terrific. They were friendly, efficient and thorough. I very much wanted to be released by noon of that day and all three worked with me to accomplish that.

In the early morning, my loved one told me he did not feel well. The symptoms he described were classic MI symptoms. When our calls to 911 couldn't get through, we decided to call the Boone ED department and they called an ambulance to our house.

My loved one ended up having a STEMI. He arrived at Boone and they took him straight to Cath Lab. His LDA was 100% blocked and the cardiologist stented the artery. He stayed in ICU for 2 days and then the cardiology floor. Everywhere he went, he received excellent nursing care. I firmly believe that my loved one would not have survived the MI without your department calling for an ambulance so he could receive care.

Patient Appreciation

August 25, 2022 was Patient Appreciation Day, but the Infusion and Treatment Center chose to honor their patients all month long. ITC nurse Amanda Jung, ADN, RN organized Patient Appreciation activities for the ITC, including setting up a table with snacks and giveaways for patients.

ITC often keeps their department decorated with a different theme each month to help our patients feel more comfortable and at home. Many ITC patients visit on a regular schedule and our staff get to know them well, and the team looks for ways to tell their patients, "Thank you for choosing Boone Health ITC to take care of you!"





ITC Team Lowers CLABSI Rate

Infusion and Treatment Center (ITC) nurses are the vascular experts at Boone Health. In response to staffing and other challenges that COVID brought our way in 2021 and early 2022, these expert nurses rose to the challenge to make a difference for Boone Health’s patients and staff.

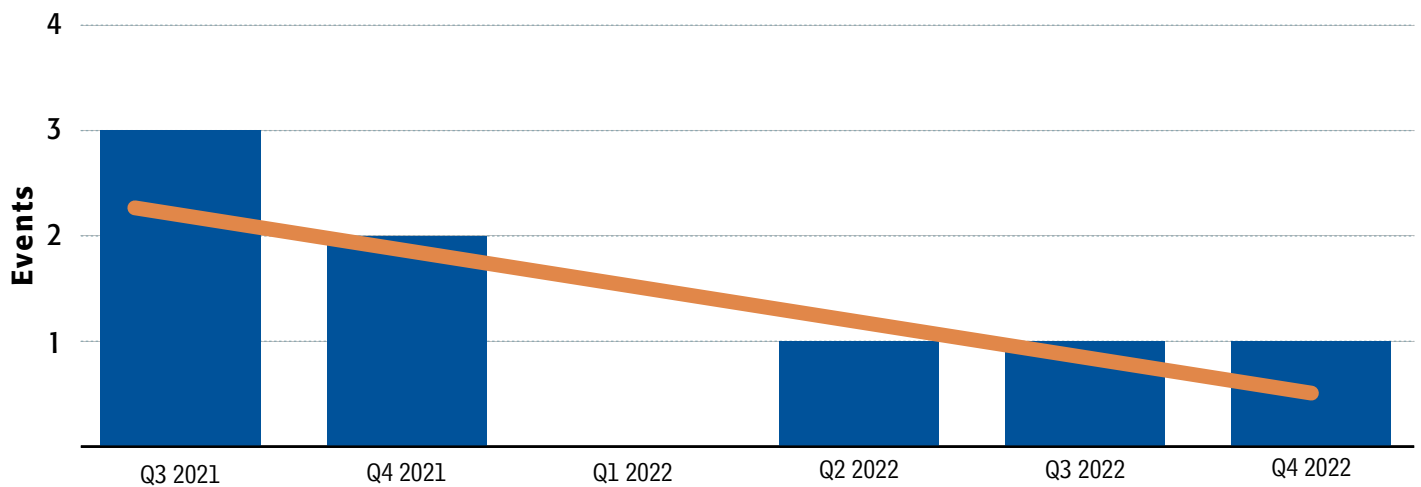
In December 2021, the ITC nurses started changing the dressing for central lines for inpatients in all areas of the hospital. When they were unable to perform the dressing changes themselves, ITC nurses called the nurses assigned to the patient to discuss the need for the dressing change.

By taking a proactive approach to ensure timely dressing changes, our infection rate associated with central lines steadily decreased.

Motivated by these excellent results, the team of vascular experts continues to lead the charge to ensure central line dressing changes occur according to best practice recommendations.

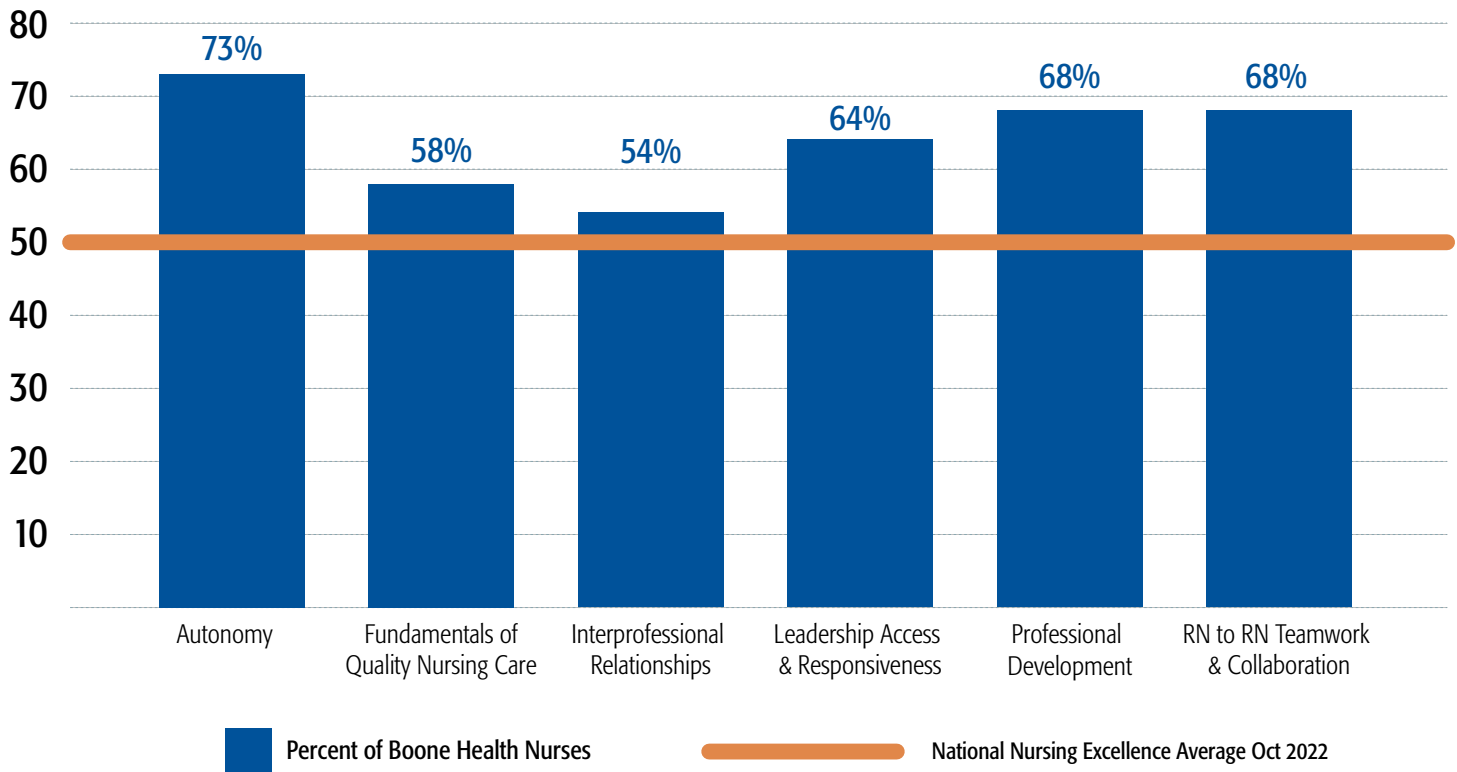
Above: Morgan Grimsley, BSN, RN, Cynthia Wharton, BSN, RN, Renae Crow, BSN, RN, VA-BC, Brenda Rippetto, BSN, RN, Lewis Daniel, BSN, RN, Amanda Jung, ADN, RN, Paige Roesner, ADN, RN

Central Line Associated Blood Stream Infections - Housewide



2022 Nursing Satisfaction Survey

2022 Overall Nursing Satisfaction



In August 2022, all Boone Health employees had the opportunity to participate in an Employee Engagement Survey. For the nurses in the organization that took the survey, 31 questions and statements were included to assess nursing satisfaction in seven ANCC categories:

1. **Autonomy:** The ability to apply professional knowledge to patient care and clinical decision-making.
2. **Fundamentals of Quality Nursing Care:** Commitment to patient and family-centered care, patient safety, delivering safe and error-free care to patients, and values reflected in our Nursing Professional Practice Model.
3. **Adequacy of Resources and Staffing:** Tools and resources needed to provide the best care and service to patients.
4. **Leadership Access and Responsiveness:** Visibility, collaborative, and transparent nurse leaders.

5. **Professional Development:** Examples include acquiring skills in advancing technology, fulfilling continuing education unit requirements (CEUs), refining interpersonal skills, honing a specific skill set to an expert level, or obtaining professional certifications.
6. **RN-to-RN Teamwork and Collaboration:** Collaboration is encouraged, and pathways are set for teamwork to occur between RNs.
7. **Interprofessional Relationships:** The ability to function effectively with nursing and interprofessional teams, fostering open communication, mutual respect, and shared decision-making to achieve quality patient care.

Participants were asked to respond to close-ended statements and questions on a scale of 1 (strongly disagree) to 5 (strongly agree).

We received responses from 20 inpatient and ancillary departments, including 277 clinical registered nurses who spend 50% or more of their time in direct patient care; 39 RNs who spend less than 50% of their time direct patient care, and 46 Nurse Managers/Directors.

Boone Health was compared to the national nursing excellence average in October 2022, which includes more than 248,000 RN respondents. Over 50% of our units outperformed the National Benchmark Mean in 6 out of 7 categories.

Clinical RNs with 50% or more direct care responsibilities outperformed or met the National Benchmark Mean in 5 out of 7 categories:

- Autonomy
- Fundamentals of Quality Nursing Care
- Leadership Access and Responsiveness
- Professional Development
- RN-to-RN Teamwork and Collaboration

Boone RNs who have direct care responsibilities less than 50% of the time in their practice outperformed or met the National Benchmark Mean in 2 of 7 categories:

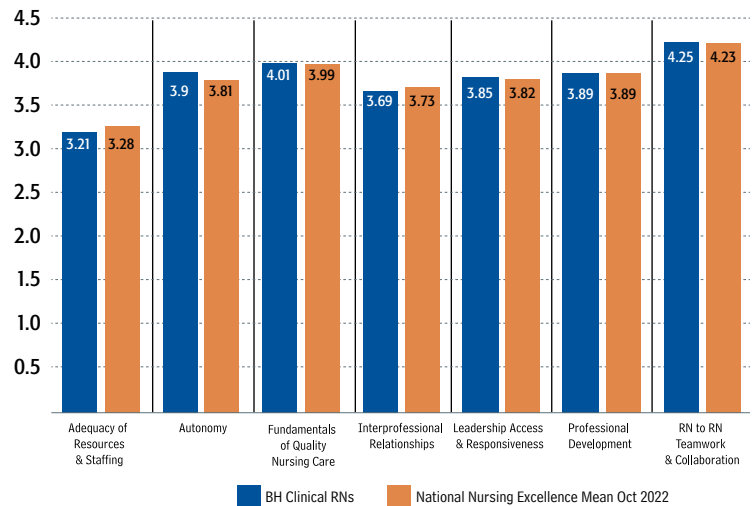
- Adequacy of Resources & Staffing
- Interprofessional Relationships

Our RN Managers and Directors outperformed or met the National Benchmark Mean in 3 of 7 categories:

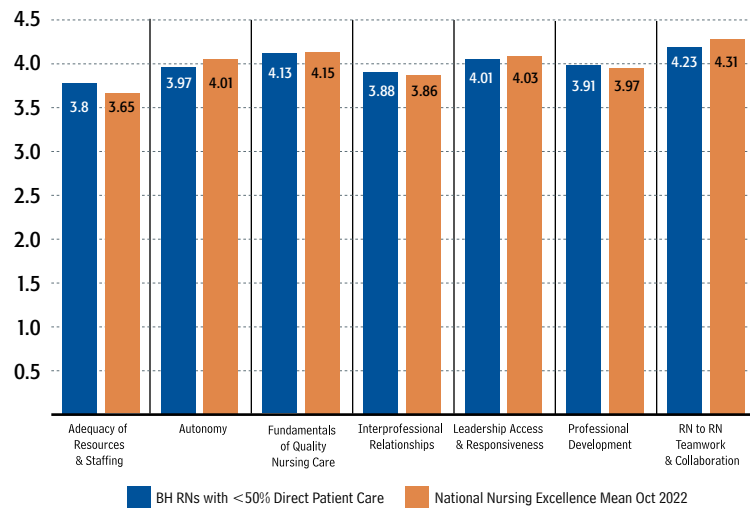
- Autonomy
- Professional Development
- RN-to-RN Teamwork and Collaboration

Nursing satisfaction and engagement remains critical to Boone Health’s success, and feedback from our nurses is highly valued. Our nursing satisfaction survey results guides our strategic initiatives in our nursing annual planning and sets the course for improving work environments and, most importantly, patient outcomes. While the work is not easy nor is it ever finished, it is the most important work that we do!

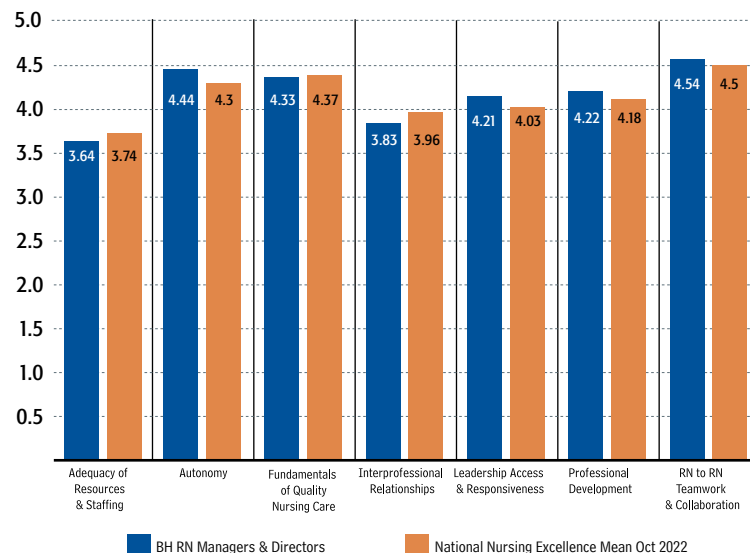
Clinical RNs • 2022 Nursing Satisfaction



RNs with <50% Direct Patient Care • 2022 Nursing Satisfaction



RN Managers & Directors • 2022 Nursing Satisfaction



A photograph of three women, likely nurses, standing outdoors in front of a blurred background of green trees and foliage. They are all wearing black scrubs. The woman on the left has long brown hair and glasses. The woman in the middle has long dark hair and is smiling. The woman on the right has long blonde hair and is also smiling. The text 'A Family of Boone Nurses' is overlaid in a large, blue, outlined font across the center of the image.

A Family of Boone Nurses

by Erin Wegner

Growing up, Danielle Major would hear her cousin Grace Westfall talk about how much she wanted to become a nurse, just like her Grandma LeAn Smith. From a very young age, this was what Grace wanted to do, and she never wavered on her desire to become a nurse.

Grace's Grandma, LeAn, worked in Boone Hospital Center's Maternal Child Health department for 43 years, delivering several family members' babies during her time at the hospital.

When she was younger, Grace would beg her grandma to take her to the hospital so she could see the babies in the newborn nursery. That was always a special trip for them.

After spending a lot of time at the hospital with her grandma growing up, Grace graduated from high school with plans to go straight to MACC – Moberly Area Community College – to become a nurse. MACC was the same place where her mom, Lisa Smith, earned her RN license, and her grandma received her LPN. It was known then as Moberly Area Technical Center. After that, LeAn went to Columbia College for her RN license.

When Grace started the nursing program, her cousin Danielle was pregnant with her first daughter. This gave Grace an opportunity to train by asking her cousin questions about her pregnancy.

Before Grace finished school, Danielle got a job at MACC as the Administrative Assistant to Dean of Health Sciences. This allowed Danielle to help get everything finalized for Grace's graduation, including a very special award.

At her graduation ceremony in December 2021, Grace received the Clinical Excellence Award for her graduating class. What made this moment special for Grace and her family is that both her mother and grandmother had also received the Clinical Excellence award for their respective graduating classes.

When Danielle found out she was pregnant with baby number two, she asked Grace where she planned to work, and Grace told her she was trying to get a job at Boone Hospital.

Grace joined Boone Hospital in January 2022. Even though she wouldn't get to work side-by-side her Grandma who retired the previous August, Grace felt her Grandma retired so that she could step in and take her place.

"When I found out she got the job at Boone, I was figuring out where she would be on my due date," says Danielle. "Knowing there was a good chance that I would have

Grace as my nurse on either Postpartum or Labor & Delivery, I told her I'd like for her to be on Labor & Delivery if at all possible."

Starting her first 12-week orientation, Grace began her training on the Postpartum floor, while the other half of her group had their orientation in the Labor & Delivery unit.

"Nurses are trained to work in all three areas; Labor & Delivery, Postpartum and the Newborn Nursery. The benefit to nurses being able to work in all areas is the flexibility it gives us for staffing. A nurse can start their shift on Labor & Delivery and then after mom delivers, the nurse can transfer mom and baby to the Postpartum floor and continue to care for her patient and the baby that she helped deliver," says Sherri Barnes, BSN, RN, RN-NIC, Maternal Child Health Patient Care Manager.

The day Danielle was scheduled to get induced was Grace's first day on the Labor & Delivery floor.

"I was more excited than nervous," Grace says. "Obviously, I was nervous to a degree, because it was my first day on a different floor, but I was excited because I knew that I was going to be taking care of my cousin Dani."

For several weeks before her cousin was induced, Grace would ask Danielle, "Are you sure you're okay with me seeing everything and being there?"

Without hesitation, Danielle would say, "I wouldn't want anyone else!"

"This was Grace's first vaginal delivery she's ever seen. This was the first baby she's been able to have hands-on experience with and help deliver," Danielle says with a smile. Danielle also knew Grace wouldn't have the extra stress of a new mom going through labor for the first time.

Danielle also got to watch as the nurse who was helping Grace walked her through everything and explained why they did things a certain way.

"It's just been an amazing experience to watch and be a part of Grace's entire process of becoming a nurse," Danielle says. "Having the generations passed down, with her grandmother delivering a lot of babies in my family, then getting to watch and experience Grace deliver her little cousin like her grandmother would have, was just special."

Left: LeAn Smith, ADN,RN, with her daughter Lisa Smith, RN and her granddaughter, Grace Westfall, ADN, RN, Labor & Delivery.

Creative Staffing Solutions

As part of our 2022 Nursing Annual Plan, we developed a Creative Staffing Solutions team which included leadership from multiple patient care and support areas, Training & Development, and Human Resources. We then created sub-teams to address challenges that were identified with input from our Unit Practice Council members.

Through the efforts of many Boone Health team members, the Creative Staffing Solutions Team saw many improvements in 2022, including improved retention and less reliance on external agency nurses.

Care Model

The Care Model sub-team worked on solutions and enhancements for on-call practices, specialized nurses in areas of increased need, stroke care, flex program options, and clinical support roles.

A Unit Support Tech role (total of 4.0 FTE) was approved and implemented for Medical/Surgical and Stepdown units. The Unit Support Tech position supports licensed and non-licensed staff through job responsibilities that impact patient safety, customer service, unit cleanliness and policy compliance. Patient Care Support Services oversees the hiring and utilization of this role. This role was expanded to additional areas in the hospital. We are excited to see this role filled as it will help add staff members to the staffing pool and better utilize PCTs, LPNs and RNs in direct care staffing roles.

We also developed a Clinical Support Associate role that recognizes skill enhancement with additional compensation options.

The Flex+ program provides an additional flexible staffing option that has assisted the organization with recruiting and retaining RN, LPN, PCT and RTs. We have been able to reduce costs associated with agency staffing because of this staffing solution. The program had a successful launch for inpatient and ancillary areas and has led to a reduction in agency usage and improved staff retention.

In the Surgical Services department, a career ladder for the surgical tech role was developed and an on-call program was optimized.

Recognition

The Recognition sub-team worked on recognizing and celebrating departments and individual employees. Units have developed recognition programs and HR has assisted with recognition events, including Nurses' Week 2022.

Recruitment and Retention

The Recruitment and Retention sub-team focused on hiring for the Flex+ program for RNs, LPNs, PCTs, and RTs.



FLEX+

In 2022, Boone Health used new outlets for sourcing candidates, including the "We are Boone Health" social media pages, community career fairs and events in the community, and mock interviews with local community colleges.

The Boone Beginnings orientation was redesigned to be more interactive and create an immediate feeling of belonging, including a tour of the Hospital and various guest speakers from the organization.

Total Compensation

The Total Compensation sub-team focused on market adjustments for staff nurses, PCTs, and other staff members as well as reductions in premium pay spend for external agency nurses.

Miscellaneous

The Miscellaneous sub-team prioritized addressing multiple supply chain issues that impact direct care staff and worked with the supply chain team. This sub-team assisted with making tip sheets to help direct care staff download supply reports from Meditech.

Numerous improvements were made to Meditech in 2022, including the launch of a new version.

Much of the work of the Creative Staffing Solutions team continues in 2023.



Boone Hospital Foundation Scholarships

Congratulations to Natalie Collins and Amanda Shondy, who each received \$2,000 in matching scholarships through the Healthcare Service Group (HSG) Charitable Foundation and Boone Hospital Foundation.

Natalie Collins, PCT, was the 2022 recipient for the Guy Eastman Brown II & Ellen Tarshis Brown Scholarship. Established in June 2021, the Guy Eastman Brown II and Ellen Tarshis Brown Education Scholarship is for Boone Health employees who would like to pursue a degree in nursing or other hospital services. This scholarship is prioritized for Boone Health employees who can show proof of need for financial assistance, preferably a military veteran.

Amanda Shondy, ADN, RN, was the 2022 recipient for the Mary Lu and Lenard Politte MD Caregiver Education Scholarship. Since March 2016, this annual scholarship is given to outstanding Boone Health employees who demonstrate competence, respect, and compassion with the goal of enhancing healthcare education. The funds can be used for courses, book, lab fees, or other resources needed to complete a nursing or healthcare professional degree.

Boone Hospital Foundation was elated to present both Natalie and Amanda with matching scholarships. Thank you to the HSG Charitable Foundation for supporting our healthcare workers in their continued education.

Celebrating Lifelong Learning

Constant changes and innovations in health care require all nurses and other health care professionals to be lifelong learners. In 2022, we shared and celebrated our nurses' educational accomplishments and certifications in our monthly *Clinical Practice Update* newsletter.

Degrees

- Emily Reinkemeyer, MSN, RN, CPAN

Certifications

- Missy Barroso, BSN, RN, CNOR
- Natalie Bayer, BSN, RN, NE-BC
- Morgan Beasley, ADN, RN, MEDSURG-BC
- Cecilia Boessen, ADN, RN, MEDSURG-BC
- Jennifer Bolton, BSN, CNOR
- Andrea Fansler, BSN, RN, CCRN-K, NE-BC
- Amanda Gardner, BSN, RN, CNOR
- Taylor Gonzales, BSN, RN, RNC-OB
- Emmalee Heine, BSN, RN, Inpatient Rehab Unit Liaison
- Elina Hinds, BSN, RN, CWOCN



- Quenna Kovar, BSN, RN, CNOR
- Pam Malloy, RN, CRRN
- Michele Sprague, MSN, RN, NE-BC
- Kristin Walker, BSN, RN, PMGT-BC
- Tina Walsh, BSN, CNOR
- Charise Williams, CRCST

Certified Nurses 2022



Learning does not stop with the attainment of a nurse licensure. Achievement of certification demonstrates a nurse's professional commitment to provide the most accurate, safe and advanced care for their patients.

Certification demonstrates a nurse's commitment to quality patient care, and provides many benefits, including validation of knowledge and competence, marketability, salary increases, recognition and increased job satisfaction. Certification also benefits our patients and organization. Nurse certification has a direct correlation to reduced fall rates, reduced adverse patient events, increased patient satisfaction, and increased retention. Boone Health provides nurses with direct support

to obtain certification, including reimbursement for exam and recertification fees, and opportunities to attend conferences and earn CEUs.

Every year on March 19, Certified Nurses Day honors nurses worldwide who contribute to better patient outcomes by earning national board certification in their specialty. Boone's certified nurses were recognized with a full-page ad in the Columbia Daily Tribune and a sign board in the hospital lobby listing all certified nurses (*below*).

Above (L to R): Jesse Godec, BSN, RN, CFRN, CCEMPT; Pearl Lariosa, BSN, RN, CMSRN; Ramona Dachroeden, MSN, RN, CDCES

Addison Watson
Alicia Arth
Alisha Peters
Allison Arends
Amanda Cundiff
Andrea Fansler
Andrea Willer
Anne Balsley
April Womack
Ashley Green
Ashley Makowski
Ashley Walker-Ellis
Bethany Guy
Betty Cook
Brandi Zey-Thacker
Brandy Templeton
Brenda Wilson
Carla Kuhlmann
Carla Maylee
Carmen Colvin
Cassandra Mueller
Cheryl Stallo
Connie Dunn
Corey Hardin
Daniel Hartgrove
Deanna Powers

Debra Blazis
Deidre Anderson
Delanie Brown
Donna Simpson
Elaina Hinds
Elizabeth Crews
Elizabeth Crowe
Emily Bishop
Emily Nusbaum
Emily Reinkemeyer
Emmanuel Nana Amoako
Gwen Anderson
Heidi Hegstad
Heidi Hoffman
Heidi Woods
Hunter Smith
Jacqueline Beshears
James Boudreau
Jamie Markway
Jane Forman
Jane Vaughan
Jean Macher Japko
Jennie Collins
Jennifer Baggett
Jennifer Burnett
Jennifer Pace

Jennifer Self
Jesilda Baguio
Jesse Godec
Jessica Caszatt
Jonathon Barnes
Julia Crane
Karen Ross
Kari Gaskell
Kari Jansing
Karma Joos
Kathleen Kinnaman
Shannon Kuczynski
Kelli Cash
Kristen Maxey
Kristin Parker
Laura Schneider
Lauren Breshears
Lisa Byrd
Lisa Corser
Lisa Mefrakis
Lisa Ortvals
Liza Williams
Lori Burns
Lori Wilburn
Lugine Hein
Margaret Howser

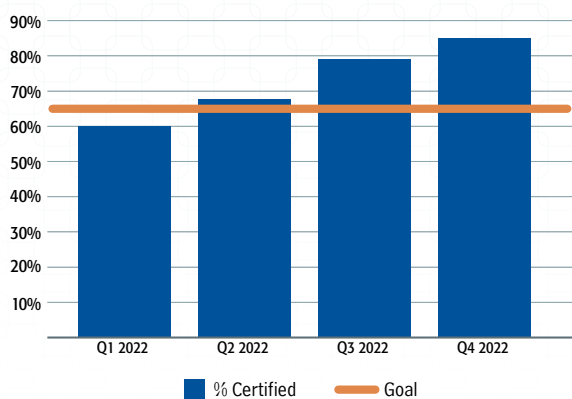
Maria Bickell
Marieme Ndiaye
Marla Owen
Mary Christie
Matt Nusbaum
Megan Brown
Meghan Pagel
Melinda Hart
Melissa Bolt
Melissa Hampton
Melissa Koga
Melodie Wigger
Mindy Doscher
Monica Smith
Pam Evans-Smith
Pamela Offield
Patricia Watson-Adams
Pearl Lariosa
Rachel Robison
Ramona Dachroeden
Rebecca Goff
Rebekah Bail
Redonda Marshall
Regan Muri
Renaee Crow
Robin Sypolt

Samantha Kreitz
Sara Revelle
Sara Rush
Sarah McBees
Shanna Marshall
Sherri Barnes
Stacey Lindsey
Stacie Barker
Stacye Klenke
Stephanie Doman
Stephanie Whitbey
Steveny Grieve
Susan Blanchard
Susan Scheer
Tara Phillips
Taylor Gonzales
Taylor Nelson
Theresa Curtis
Thersa Wells
Thomas Edge
Tiffany Carmichael
Torin Brenner
Trudy Barnes
Zoe Prevette

Improved Certification Rates

In 2021, Boone Health Patient Care Managers and Patient Care Directors established a goal to increase the professional nursing certification rate of Patient Care Leaders over the next two years. The goal was set at a reasonable level in light of the complexities and continued impacts of COVID-19 and our transition from BJC – and the goal was far exceeded. The nursing leadership team deserves to be recognized for their efforts!

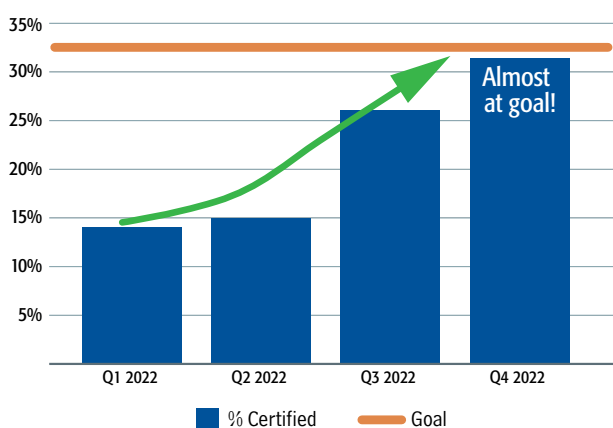
Certification Rate: Patient Care Managers & Directors



The following nursing leaders have achieved or maintained at least one professional nursing certification. Nurses who achieved a new certification in 2022 are listed in bold:

- Amy Bierk, BSN, RN, WOCN
- **Andrea Fansler, BSN, RN, CCRN-K, NE-BC**
- Corey Hardin, BSN, RN, CCRN-CMC, CV-BC
- Karen Ross, BSN, RN, CCRN
- Kristen Maxey, BSN, RN, NE-BC
- Laura Schneider, MSN, RN, CEN
- **Michele Sprague, MSN, RN, NE-BC**
- **Missy Barroso, BSN, RN, CNOR**
- **Natalie Bayer, BSN, RN, NE-BC**
- Sara Rush, MSN, RN, CNOR
- Shanna Marshall, MSN, MBA, APRN, FNP-BC, NE-BC
- Shannon Kuczynski, MSN-A, MSHA, RN, NE-BC
- Sherri Barnes, BSN, RN, RNC-NIC

Certification Rate: Surgical Services Nurses

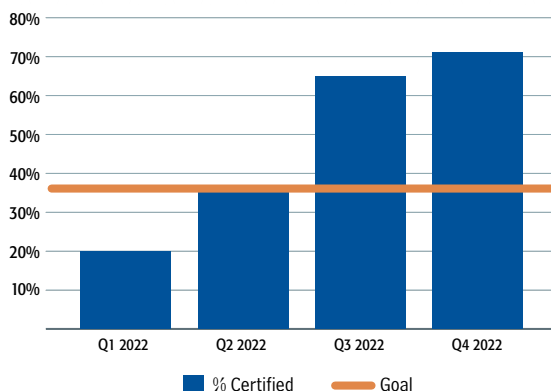


The Surgical Services and Medical Specialties departments also set out to improve their certification rates. By late 2022, they were 1% away from meeting their goal.

These Surgical Services nurses have achieved or maintained the Certified Nurse Operating Room (CNOR) professional nursing certification. Nurses who achieved new certifications in 2022 are listed in bold.

- **Amanda Gardner, BSN, RN, CNOR**
- Donna Simpson, CNOR
- Heidi Woods, BSN, RN, CNOR
- **Jennifer Bolton, BSN, RN, CNOR**
- Jennifer Pace, BSN, RN, CNOR
- Lisa Cottrell, BSN, RN, CNOR
- **Missy Barroso, BSN, RN, CNOR**
- **Quenna Kovar, BSN, RN, CNOR**
- Sara Rush, MSN, RN, CNOR
- **Tina Walsh, ADN, RN, CNOR**
- Torin Brenner, BSN, RN, CNOR

Certification Rate: Medical Specialties Nurses



These Medical Specialties nurses have achieved or maintained professional certification in their area of specialty. Nurses who achieved new certifications in 2022 are listed in bold.

- **Morgan Beasley, ADN, RN, MEDSURG-BC**
- **Cecilia Boessen, ADN, RN, MEDSURG-BC**
- Laura Schneider, MSN, RN, CEN
- Shanna Marshall, MSN, MBA, APRN, FNP-BC, NE-BC

Boone Health’s Educational Assistance policy includes reimbursement for fees for nursing certification and recertification. In 2021 and 2022, the Boone Hospital Foundation financially supported educational offerings for Nurse Executive-Board Certified (NE-BC), Certified Nurse Operating Room (CNOR) and Medical Surgical Board Certification (MEDSURG-BC) professional certifications.



Professional Nurse Development Program

Our Professional Nurse Development Program (PNDP) promotes the clinical nurse's lifelong pursuit of knowledge and expertise to provide high-quality nursing care and give clinical nurses opportunities for professional growth and advancement.

The PNDP is based on the work of Dr. Patricia Benner, PhD. Benner's five levels of skill acquisition are recognized: novice, advanced beginner, competent, proficient, and expert. The criteria become progressively more complex and demanding as one's expertise level increases. Each level (1-P through 5-P) requires a defined amount of experience and knowledge.

Evidence of the nurse's performance is demonstrated through exemplars – written illustrations of the nurse's professional practice. These exemplars represent the nurse's contribution to patients' and families' welfare and reflect the nurse's clinical knowledge and leadership.

As part of the evaluation of the nurse's professional development, Benner's seven domains indicate their competence. Competencies within each domain are evaluated as met or not met and demonstrate that knowledge and clinical application for each level is present.

Promotions

Alicia Arth, 3P
Brian Campbell, 3P
Nicole Cook, 3P
Angel Jacobs, 3P
Amanda Jung, 3P
Stacey Lindsey, 3P
Amberly Lucas, 3P
Evie Miles, 3P
Laura Parman, 3P
Eric Pectol, 3P
Paige Roesner, 3P
Leah Rosenstengel, 3P
Christi Warren, 3P
Briana Winn, 3P

Torin Brenner, 4P
Ty Dille, 4P
Taylor Gonzales, 4P
Jessica Kern, 4P
Quenna Kovar, 4P
Kathryn McLoughlin, 4P
Kara Turnbull, 4P
Kristin Walker, 4P
Tina Walsh, 4P
Chelsea Beck, 5P
Annette Blanchard, 5P
Patricia Urban, 5P
Cindy Wharton, 5P

Recertifications

Carmen Colvin, 3P
Tammy Adkins, 3P
Melissa Hampton, 3P
Faith Hinton, 3P
Courtney Jones, 3P
Jean Macher-Japko, 3P
Valerie Priest, 3P
Stephanie Doman, 4P
Jesse Godec, 4P
Rebecca Kinkhorst, 4P
Debra Baber, 4P
Lewis Daniel, 4P
Jesilda Baguio, 5P
Lori Burns, 5P

Renae Crow, 5P
Dawn Wetrich, 5P
Trudy Barnes, 5P
Cindy Bracht, 5P
Shelly Gibson, 5P
Pamela Huth, 5P
Andrea Primus, 5P

Improving Our PNDP

In 2022, we evaluated our Professional Nurse Development Program. Since 2019, we have seen decreased participation. We requested feedback from our Unit Practice Councils and Professional Development Core Councils to find ways to encourage more nurses to participate.

Feedback included requests to allow nurses to apply for PNDP earlier in their career, simplify the process, and improve PNDP engagement in working environments.

We removed some barriers to participation. In 2023, we will introduce a new PNDP promotion level called Staff Nurse 2+. This level, which will be open to nurses with at least 12 months' experience and a Nurse Residency certificate, will give newer nurses the opportunity to participate in PNDP earlier and allow Nurse Residency Program graduates to stay engaged with professional development in their nursing career.

Anyone with Staff Nurse 3-P status will be eligible for promotion after 6 months. Nurses with a BSN or certification will be able to apply for Staff Nurse 4-P – a BSN will still be required for Staff Nurse 5-P.

We also reformatted the application to be more user-friendly and ensure applicants submit all required information. We removed the requirement to provide verification for meeting attendance and mandatory training.

The new process will request one exemplar for each level – previously, nurses had to provide two exemplars when applying for 4-P and three for 5-P. Two references – one from a manager or director, the other selected by the manager or director – will be required at each level.

One of our biggest changes will be to stop counting Boone Points required to qualify for PNDP at each level and shift our focus to credit earned in 5 areas of priority:

1. Deliver High-Quality Care
2. Provide the Boone Touch
3. Be a Great Place to Work
4. Impacting Our Community
5. The Future of Boone Health

Credit options will vary based on PNDP level:

- 2+: 3 credit options
- 3-P: 4 credit options in 2 different priorities
- 4-P: 5 credit options in 3 different priorities
- 5-P: 6 credit options in 4 different priorities

Our new process places greater emphasis on community involvement, shadowing... and patient experience, quality improvement, and cost-saving projects.

Our new process places greater emphasis on community involvement, shadowing (other roles, departments, and leaders), and patient experience, quality improvement, and cost-saving projects.

At this time, other requirements, including direct care roles, participating departments, and years of experience for each level, will not change. We will also continue to offer two PNDP cycles each year, in the Spring and Fall, and our due dates for Letters of Intent and Portfolios will stay the same. The review process will also continue as before.

Education on the PNDP changes were provided through in-person and virtual sessions in December 2022, with plans to offer more sessions in early 2023.

Nurses applying for PNDP in 2023 will have the option to follow the application process outlined in either 2022 or 2023 Manual. Starting in 2024, all nurses interested in PNDP promotion or renewal will be required to follow the new application process.

DAISY Award for Extraordinary Nurses

Since 2018, the Boone Hospital Foundation has provided financial support for the DAISY Award program for nurse recognition. This international program rewards and celebrates the extraordinary clinical skill and compassionate care given by nurses every day.

The DAISY Foundation was established in 2000 by the family of J. Patrick Barnes who died of complications of an auto-immune disease at the age of 33. During Pat's eight-week hospitalization, his family was awestruck by the care and compassion his nurses provided to Pat and everyone in his family. In memory of J. Patrick Barnes, the DAISY Award allows patients, families and others to honor extraordinary nurses.



Boone Health nurses who are selected for a DAISY Award personify a remarkable patient experience. Awardees consistently demonstrate excellence through clinical expertise and compassionate care, and they are recognized as outstanding role models in our nursing community.

Nurses can be nominated online or at ballot boxes placed around the hospital. Each DAISY Award honoree is recognized at a ceremony in their unit and receives a certificate, DAISY Award pin, a hand-carved stone sculpture titled "A Healer's Touch," and a special treat to share with their unit.

Recent DAISY nurses are displayed on the honored nurse's unit and in the hospital's main lobby.



February 2022
Kelli Herbold, BSN, RN
Float

If it wasn't for her intuition and care for this patient's safety, I believe this patient wouldn't have lived. She came in at shift change and called a Code Stroke on a man who had been going through years of medical problems. Kelli saved this man's life because of her care and attention to detail to the safety of her patients.



April 2022
Patrick Remis, BSN, RN
Intensive Care Unit

Patrick made me feel at ease even though things were less than ideal for my grandmother. He took the time to help her call me. I didn't realize it would be our last conversation but I am forever grateful to him for giving us that moment. I truly feel like Patrick was meant to be her nurse till the end.



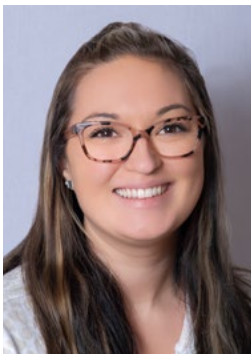
June 2022
Cynthia Bracht, ADN, RN
Labor & Delivery

We were lucky to have Cynthia as our nurse from intake, through c-section and recovery. Cynthia walked us through the entire process with love and compassion. She understood that, as new parents, we needed a lot of extra care. Cynthia became a part of our little family within those few days. We were sad to leave her care!



August 2022
Chuck Baker, ADN, RN
PASS

I was more than pleasantly surprised when Chuck treated me with such patience and compassion. He went the extra mile with lengthy explanations even though this center was bustling! I so appreciated his easy manner and professionalism with positive responses. This man knows his nursing!



October 2022
Leah Rosenstegel, ADN, RN
Intensive Care Unit

Leah went above and beyond for a pregnant patient who was COVID-positive. She recognized when the patient was starting to deteriorate and advocated for the patient and her baby. Leah kept following the patient's progress and even picked up extra shifts to be her nurse when she was ready to meet her newborn baby for the first time.



December 2022
Savannah Evans, BSN, RN
House Supervisor

Because she helped stop a huge problem from becoming worse, I want to thank Savannah for possibly saving my dad's life. With her information now it's possible to have answers and to get to work on making my dad better. I am extremely grateful that she took the call and the time to find the information for us.

Employees of the Month

In an organization with over 1,800 employees, being selected as Boone Health's Employee of the Month is no minor accomplishment. Employees are nominated by their coworkers, patients or families. A panel of peers reviews all nominations and selects an employee who has exceeded our Standards of Excellence. For their outstanding performance and their dedication to patients, their team and their profession, three Boone registered nurses were recognized as Employees of the Month in 2022.



Beth Bernt, BSN, RN
Recovery Room



Brittany Davenport, MSN, RN
Cardiac Cath Lab



Lisa Mefrakis, MSN, RN, CCRN-CSC
Intensive Care Unit

Nurses Doing Good

Debra Blazis, BSN, RN, Neonatal ICU, received the "Women Doing Good" award from The Salvation Army in Columbia, Mo. Debra was recognized not only for her work as a NICU nurse, but her volunteer work with Habitat for Humanity, Meals on Wheels, and Loaves on Fishes; and for making and donating heart cloths and baby blankets to her patients.

Congratulations, Debra, and thank you for giving your time and talents to help others!



Nurses Week 2022

During the first week of May, Boone Health celebrated Nurses Day and Nurses Week with healthcare organizations across the country. Our theme this year for Nurses' Week was "You Make a Difference!" This message was reflected on the special badge reels we gave our patient care providers.

Nurses Week also included Candy Gram delivery, on-site pet therapy for day and night shifts, lunch and learn presentations on a variety of topics, and our Cinco De Mayo-themed Nurses Week Celebration and Professional Excellence in Nursing Awards on May 5, 2022.



Boone Health Nurses Week 2022



The Professional Development Council partnered with the Boone Hospital Gift Shop to make a window display celebrating our nurses.



Andrea Fansler, BSN, RN, CCRN-K, NE-BC delivers Candy Grams to Morgan Beasley, ADN, RN, MEDSURG-BC and Mary Jane Oswald, RN

Boone Buddies

During Nurses Week 2022, Boone Health partnered with a local canine training program, Ann Gafke's Dogschool, to bring animal-facilitated therapy (AFT) to Boone staff. The day was an overwhelming success with a constant stream of staff and visitors stopping to meet the dogs and handlers.

Based on this response, Boone Health Volunteer Services has expanded AFT to become a permanent fixture here through a new program called Boone Buddies. Starting this September, Boone Buddies will be roaming our halls visiting staff and patients. Once a week on a rotating schedule, you will see these furry friends bringing joy and comfort to all they meet.

AFT has been shown to be an effective intervention to improve symptoms of pain, fatigue, stress, mood, depression, and anxiety in patients and healthcare staff alike. Not only does AFT have a positive impact on staff and patients, but the dogs and handlers enjoy it, too. *Meet one of our therapy dogs on page 21.*

Right: Cynthia Bracht, ADN, RN



Meet Timbre

By Madison Loethen

Dori Neumeier was sitting in the lounge area of the Therapy Floor when the elevators opened and out walked Timbre the therapy dog and his owner Tom Trabue. Dori felt all of her stress from the day melt away as Timbre came over and allowed her to pet him.

“When I saw Timbre, I just had to pet him! I was so in need of petting a pup.”

Dori had been hospitalized for over a week with congestive heart failure. She had been feeling weak, tired, and homesick. Little did Tom and Timbre know, Dori actually recently had to rehome her own beloved dogs to friends' homes because she was unable to care for them because of her ongoing health issues.

“When I saw Timbre I just had to pet him! I was so in need of petting a pup,” says Dori.

Dori and Tom chatted and Tom told her about the therapy dog program at Boone Hospital Center. Timbre and Tom are just one of several teams that visit the hospital through the program.

All Boone Hospital therapy dogs and their owners are certified and are a part of Therapy Dogs International (TDI). TDI is a volunteer organization that tests and registers dogs for the purpose of visiting hospitals and other care institutions. The dogs visit Boone Hospital patients and sometimes also come to staff events like Nurse's week or employee appreciation.

Timbre and Dori continued to visit and then Timbre did a lap on the floor greeting patients and staff members. Timbre and Tom came by Dori's room to say goodbye and so Timbre could give Dori an extra snuggle before they left.

“It gave me just the oxytocin I needed. It totally lifted my spirits,” says Dori.

Tom and his wife Kim have been volunteering with the therapy dog program for a few years now. They first took Timbre to get some professional training when he was



Dori Neumeier with Timbre, Boone Health Therapy Dog

young. He did so well that his instructor recommended they look into him becoming a therapy dog.

“We love to help people so we decided to do it,” says Tom.

In addition to visiting Boone Hospital, Timbre also visits family court, local schools, and area libraries through their Reading to Rover programs.

“I'm semi-retired, and so this is what I love doing. I love to see people's faces light up and see their smiles when they see Timbre,” says Tom.

Boone Health Therapy Dog program coordinator Patsy Winn says the program has many benefits for both patients and staff.

“It can reduce stress and anxiety. It can provide companionship, especially to patients who are missing their own furry friends, and it can improve health both mentally and physically,” says Patsy.



Nurses Week Celebration

For the first time since 2019, we were able to gather and celebrate Boone nurses in person! At our Nurses Week Celebration on Thursday, May 5, 2022, we enjoyed time together and Cinco De Mayo-inspired refreshments as we recognized our previous year's DAISY award winners, PNDP recertifications and promotions, Nurse Residency Program graduates, and announced our 2022 Professional Excellence in Nursing Award Winners. Thank you to the Professional Development Council, Boone Hospital Foundation, Boone Health Catering and guest speaker Kim Becking for a wonderful evening.

Above: Deb Mart, BSN, RN; Friederike Albrecht, BSN, RN; Denise McLaren, BSN, RN; Natalie Bayer, BSN, RN, NE-BC

Right top: Infusion and Treatment Center nurses Brenda Rippeto, BSN, RN; Cynthia Wharton, BSN, RN; Amanda Jung, ADN, RN; and Renae Crow, BSN, RN, VA-BC, accept the Innovation in Nursing Team Award.

Right lower: Monica Smith, MSN, RN, NE-BC, FACHE; Jill Wolf, ADN, RN; Crystal Peterson, BSN, RN

Below: Boone Health Trustee Jan Beckett with guest speaker Kim Becking



Boone Health
Nurses Week Celebration

Thursday, May 5, 2022

Partner in Caring Award

Jess Evans
 Occupational Therapist
 Inpatient Therapy

Jennifer Grant
 Lead Medical Assistant
 Pulmonary & Sleep Medicine

Cole Sonksen
 Patient Care Tech
 Medical Specialties

Year One Wonder Award

Meagan Coffey
 Orthopedic Specialties

Chloe Swoboda
 ICU

Excellence in Nursing Education

Jessica Fleshman
 ED & ICU

Daniel Hartgrove
 Stroke Program

Nursing Spirit Award

Cassie Mueller
 Infection Prevention

Rebecca Wilson
 Neurology/Oncology

Beyond Boone Award

Quenna Kovar
 Surgical Services

Innovation in Nursing Award

Allison Murphy
 Surgical Specialties

Transformational Leader Award

Amy Bierk
 Wound Care

DAISY Nurse Leader Award

Stacie Barker
 Neonatal ICU

Excellence in Professional Nursing Award

Carmen Colvin
 ICU

Meagan Fansler
 Pulmonary & Sleep Medicine

Kristin Walker
 Pain Management

Innovation in Nursing Team Award

ITC & Interventional Radiology

DAISY Team Award

Neurology/Oncology Team

Professional Excellence in Nursing Awards Nominees

Partner in Caring

Wendy Abbott
 Lora Andrews
 Suzette Bacon
 Wendy Barnes
 Kali Battles
 April Bernhardt
 Jess Evans
 Jennifer Grant

Jordan Hainen
 Tywon Hamilton
 Alarice Joyce
 Mary Keingatti
 Alexis Kliethermes
 Ladena Mills
 Elizabeth Moreland
 Jamie Nolke

Natalie O'Brian
 Mary Jane Oswald
 Bailey Robertson
 Cole Sonksen
 Sara Thomas
 Jordan Voss

Year One Wonder

Friederike Albrecht
 Kayelee Branstetter
 Meagan Coffey
 Saryssa Dodson
 Maddy Duren

Baylee Garrett
 Leah Jex
 Lorin Lee
 Allison Murphy
 Olivia Norcross

Patrick Remis
 Gemma Saathoff
 Lauren Stangel
 Chloe Swoboda

Nursing Education

Alicia Arth
 Melvin Close
 Jean Delgado
 Elizabeth Faye
 Jessica Fleshman

Veronica Franklin
 Corey Hardin
 Daniel Hartgrove
 Stacey Lindsey
 Stephanie Mayfield

Lisa Mefrakis
 Mika Schrimpf
 Sam Skaggs

Nursing Spirit

Morgan Beasley
 Jessica Fleshman
 Angel Jacobs
 Zaria Jones

Kellie Koob
 Quenna Kovar
 Cheyenne Lehr
 Evie Miles

Cassie Mueller
 Allison Murphy
 Gretchen Terrill
 Rebecca Wilson

Beyond Boone

Quenna Kovar

Innovation in Nursing

Stacie Barker Jessica Fleshman Veronica Franklin Allison Murphy

Transformational Leader in Nursing

Amy Bierk
 Kristen Maxey
 Galina Rasputina-Simmons

Michele Sprague
 Cheryl Stallo
 Robin Sypolt

DAISY Leader

Taylor Able
 Stacie Barker
 Cecilia Boessen
 Sadie Brimer

Lacey Clark
 Jean Delgado
 Lindsey Divins
 Sharon Everhart

Shelly Gibson
 Karen Ross
 Annie Sweet

Excellence in Professional Nursing

Bethany Blattel
 Carmen Colvin
 Ty Dille
 Meagan Fansler
 Jessica Fleshman

Madison Gooden
 Ron Hein
 Stacye Klenke
 Cheyenne Lehr
 Dalton Luper

Allison Murphy
 Martin Parks
 Chloe Swoboda
 Gretchen Terrill
 Kristin Walker

Innovative Team

Employee Health

ITC & Interventional Radiology

DAISY Team Award

Neurology/Oncology Team

Nurse Residency Program

Nursing school graduates enter the profession with high expectations but frequently experience the lowest point of their career at the 6-month mark, reporting high stress and low job satisfaction. Some nurses even choose to leave the nursing profession during their first year. With nurses in growing demand, it is extremely important that they receive support and guidance during that first year to strengthen their commitment to the profession.

Boone Health's Nurse Residency Program provides evidence-based transition to practice for new graduate nurses. Nurse residency is not an orientation program, but builds on their knowledge and focuses on building skills that go beyond the unit and shape their nursing career.

Each year, two cohorts of graduate nurses start a 12-month program focused on development in professional role, leadership, and patient outcomes. Nurses participate in monthly sessions with their peers and receive support from unit leadership, nursing preceptors, educators and mentors.

Our program continues to grow. Our latest cohort started in August 2022 with 36 nurse residents. Boone Health's Nurse Residency Program also achieved Practice Transition Accreditation Program status in December 2022.

See our Nurse Residents' Evidence-Based Practice projects on pages 26 - 32.

COHORT 9 NURSE RESIDENTS



(L to R) Back row: Leah Jex, Sarah Kirchoff, Courtney Kempker, Kayelee Branstetter, Nancy Ngo, Sam Marchetti, Kiley Waddle, Erica Rivera-Windust, Monica Smith.

Front row: Allison Murphy, Karissa Bryant, Brenna McNutt, Chloe Swoboda.

Not pictured: Bailey Jungmann

COHORT 10 NURSE RESIDENTS



(L to R) Tyson Cason, Meagan Coffey, Thomas Beck, Alexa Jacoby, Melissa Welch, Saryssa Dodson, Sydney Miller, Katherine Ridge, Lauren Bax, Olivia No-cross, Maddie Duren, Jason Kauffman, Patrick Remis, Zaria Jones, Kellie Koob, Rebecca Schroeder, Samantha Skaggs, Frederike Albrecht, Courtney Gutche, Bailey Garret, Lauren Stangel, Emily Reinkemeyer

Not pictured: Molly Unterseher

PTAP Accreditation for Nurse Residency Program

In December 2022, Boone Health's Nurse Residency Program successfully achieved Practice Transition Accreditation Program (PTAP) accreditation.

Provided by the American Nurses Credentialing Center, or ANCC – the same group who provides Magnet designation – PTAP accreditation recognizes organizations for proven excellence in transitioning new nurses from school to clinical practice, including preceptors, supervisors, educators, leaders, and everyone else who shapes nurses' first year of practice. PTAP is centered on building nursing skills during a graduate nurse's first year that go beyond the unit and shape their future professional career.

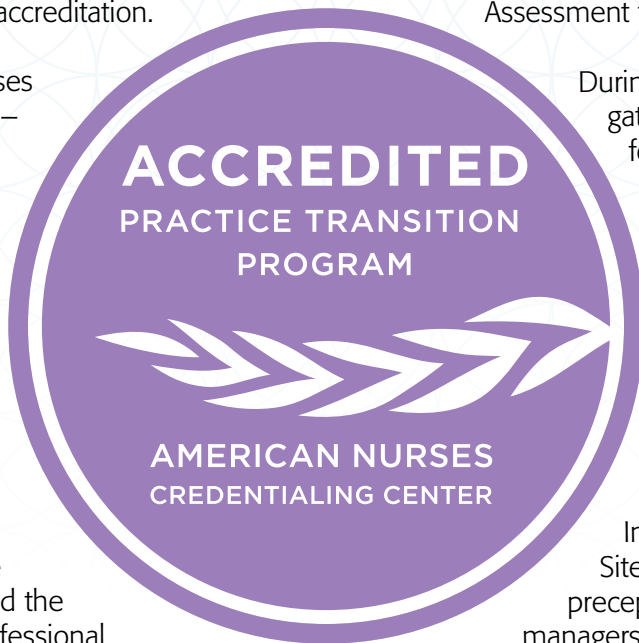
This achievement was the result of a team effort over several years. Since we launched the Nurse Residency Program at Boone Health, our team has tracked program

outcomes, documented improvements, and continuously evaluated our program. We also revamped Competency Assessment tools for each unit and housewide.

During the first half of 2022, our team gathered and wrote self-study examples focused on previous nurse residents who graduated from the program. In July 2022, we submitted our self-study. In August, we completed a Resident Survey, which required responses from 51% of nurse residents from the past two years. Thanks to the support and efforts of unit leadership, we heard from 54%.

In September 2022, we held a Virtual Site Visit from the ANCC. Residents, preceptors, supervisors, educators, managers, directors, and leadership from all areas of patient care attended to represent the Nurse Residency Program.

The results of this process were announced in December 2022. This is a great accomplishment for Boone Health!



Celebrating Nursing Preceptors

Our Boone Health nursing preceptors have a significant role in our Nurse Residency Program – and our Nurse Residents have expressed their gratitude for the preceptors who helped them through their first year of their nursing career. The following preceptors were recognized by our NRP participants – their commitment to supporting our new nurses is greatly appreciated.

Cohort 9

- Carmen Colvin, ADN, RN, CCRN, ICU
- Cecilia Boessen, ADN, RN, MEDSURG-BC, Medical Specialties
- Kayanna Hardesty, ADN, RN; Cardiology
- Madison Gooden, ADN, RN; Stepdown
- Kylie Johnston, ADN, RN; Clinical Resource Nurse

Cohort 10

- Amber Christopher, ADN, RN; Float Pool
- Jennifer Burnett, ADN, Pediatric CCRN; Maternal Child Health
- Michelle Crowe, BSN, RN; Maternal Child Health
- Emily Wood, ADN, RN; Maternal Child Health
- Michelle Caldwell, BSN, RN; Maternal Child Health
- Marla Owen, BSN, RN, RNC-OB; Maternal Child Health
- Pam Offield, BSN, RN, RNC-OB; Maternal Child Health
- Lisa Ortvals, ADN, RN, RNC-NIC; NICU

Evidence-Based Practice Projects

BREAST PUMP IMPLEMENTATION FOR NICU MOMS

Bailey Jungmann ADN, RN; LaTisha Micetich BSN, RN; Karyssa Giboney ADN, RN • EBP Mentor: Stacie Barker MSN, RNC-NIC

Background

For mothers of newborns in our Neonatal Intensive Care Unit (NICU) breast pumping, or other nipple stimulation, is often not implemented in a timely manner after delivery, which is important to ensure increased milk production and positive outcomes for mother and newborn.

Clinical (PICO) Question

In mothers of NICU admitted newborns, does breast pumping within the first 2 hours after delivery compared to no nipple stimulation improve mother's milk production within 48-96 hours after delivery?

Project Goal & Implementation

- Early initiation of breast pumping and timing of first milk expression to maximize breastfeeding continuation
- Ideally pumping 2 hours post delivery, dependent on mother's acuity
- Develop maternal self-efficacy for feeding preterm babies in NICU with education and support
- Coordinate with lactation nurse
- Create a breast pump log
- Educate Maternal Child Health staff

Evidence Gathering & Search Strategy

- Breast pumping
- Nipple stimulation
- Neonatal intensive care unit/Intensive care nursery
- Premature infants/Preemies/ Preterm
- Low birth weight/LBL/VLBLE
- Newborns/neonates
- NICU mothers
- Postpartum mothers
- Electric breast pump
- Manual breast pump
- Milk production
- Expressed breast milk/human milk

Parent Information and Recommendations

Benefits of supportive staff and hospital practices:

- Providing access to NICU lactation care providers with expertise in breast pump dependency
- Education on how breast pumps serve as a necessary substitution for direct breastfeeding in preterm infants



Outcomes in Addition to Increased Milk Production

- Promotes bonding with newborn
- Assists with relieving guilt associated with NICU newborns
- Creates feelings of fulfillment and reward

Acknowledgements

- Maternal Child Health Lactation Team
- MCH Unit Practice Council
- Sherri Barnes BSN, RNC-NIC
- Cheryl Rowland BSN, RN
- Karissa Bryant MSN, RN
- Stacie Barker MSN, RNC-NIC, EBP Mentor

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Evidence-Based Practice Projects

BATHING PRACTICES IN HOSPITALIZED PATIENTS

Study Group: Mary Rose Gonzalez BSN, RN; Cori Laxson BSN, RN; George Osebreh ADN, RN; Lindsey Ott ADN, RN; Richard Azucenas Rabara, BSN, RN • **Implementation Group:** Allison Murphy, BSN, RN; Leah Jex, ADN, RN; Shirley D. Baker, BSN, RN

Study Group: Clinical (PICO) Question

In hospitalized patients, how does soap and water bathing using a basin affect exposure to bacteria and ease of use compared to pre-packaged bathing cloths?

Study Group: Clinical Problem

According to hospital metrics, there is opportunity for improvement in patient bathing practices at Boone Hospital Center (BHC). Bath basins, soap and water are currently used for patients who do not shower.

Study Group: Evidence-Based Practice (EBP) Recommendations

BHC should implement use of a pre-packaged patient bathing product in order to:

- Increase the number of patients bathed daily
- Improve staff satisfaction
- Reduce time spent by staff on patient bathing
- Reduce risk of hospital-acquired infections in our patients

Support for Evidence-based Practice Recommendations

Contamination Concerns: Smaha (2013) Reports

- 14-50% infections found were due to water supply; 43 outbreaks of waterborne HAI leading to 1400 deaths
- Gram negative and positive rods were identified in bath water
- 98% of all basins in various ICUs grew bacteria
- Reduction in UTIs when using pre-packaged bathing cloths Marchaim – Systematic Review (2012)
- Study in 88 hospitals showed 62% of basins were contaminated
- Identified bath basins as a reservoir and possible source for the spread of nosocomial MDRO
- 34.9% of basins in the 80 hospitals studied tested positive for VRE

Implementation Group: Project Goal

The study group explored whether there was a connection between hospital-acquired infection and bathing practices. As a result of the critical appraisal, there was an opportunity to implement a new bathing process at Boone Health.

The new project goal for the implementation group was to explore the impact warmed personal cleansing cloths have on perceived patient satisfaction, staff satisfaction, bed bath compliance, and time spent bathing patients.

Evaluation

Pre- and post-implementation surveys.

Conclusion

With the use of prewarmed bathing wipes, the percentages of patients bathed daily increased; time spent bathing decreased; satisfaction with ease of supplies increased; and patient satisfaction increased significantly.

Survey from Floor Staff Pre and Post Implementation

Questions	Pre-Survey Average Control	Pre-Survey Average Implementation	Post-Survey Average Control	Post-Survey Average Implementation
Percentage of patients receiving a bath/shower daily 75-100% = 4 50-75% = 3 25-50% = 2 0-25% = 1	3.1/4	3.4/4	3.25/4	4/4
Time spent bathing each patient 0-10 minutes = 4 10-15 minutes = 3 15-20 minutes = 2 20+ minutes = 1	2.3/4	1.8/4	1.75/4	3.8/4
Satisfaction with ease of use of bathing supplies provided Very satisfied = 5 Satisfied = 4 Neither = 3 Dissatisfied = 2 Very Dissatisfied = 1	3.8/5	4.1/5	3.75/5	5/5
Perceived patient satisfaction Very satisfied = 5 Satisfied = 4 Neither = 3 Dissatisfied = 2 Very Dissatisfied = 1	4.6/5	4.1/5	4/8	5/5

2021 Compliance Monitoring: Daily Bathing

	November 1	December 1
Control Floor	80%	82%
Intervention Floor	59%	70%

Recommendation

Prewarmed bathing wipes should be implemented on all patient care floors at Boone Health.

Acknowledgements

Thank you to Cheryl Stallo, MSN, APRN, FNP-BC; Susan Lambert, MSN, RN; and Jose Velarde, MBA.

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Evidence-Based Practice Projects

SEDATION VACATION PROTOCOL

Chloe Swoboda BSN, RN; Erica Rivera-Windust BSN, RN; Brian LaValle BSN, RN

Clinical (PICO) Question

In mechanically ventilated patients who are sedated, how does a sedation weaning schedule affect patient outcomes and ventilator days compared to current practice?

Clinical Problem

- Increased ventilation time increases morbidity and mortality
- Current lack of adherence to established protocols due to lack of education and overall awareness can cause harm to patients

Project Goal

- Show the importance of the use of the ABCDEF bundle when caring for a ventilated patient
- Improve patient outcomes and reduce number of ventilator days
- Systemize the sedation weaning process
- Patients who are intubated in an intensive care setting are quickly started on medications to initialize and maintain sedation to safely control medical ventilation. This aids in reducing anxiety, minimizing the body's sympathetic response to efficiently ventilate at the alveolar level and reducing any neurocognitive trauma from medical interventions needed during a critical period of hospitalization.

Reason for Project

- To optimize outcomes in mechanically ventilated patients to prevent addiction, tolerance and inability to extubate in a timely manner
- With improvements in these regards, an increase in patient outcomes is seen with shorter intubation periods, shorter hospital stays and better long-term lung function
- Education, awareness, and compliance of existing sedation vacation protocol among staff members is crucial for patient safety and overall quality of care

Evidence Supporting Intervention

- Use of sedation assessment, spontaneous awakening trial (SAT) and spontaneous breathing trial (SBT)
- Some pharmacological mechanisms of actions can cause a tolerance threshold that, when continuously administering, can cause addiction and a hard threshold to break when use is no longer necessary. Therefore, sedation vacation is critical in reducing mortality and morbidity among ventilated patients.
- Consideration of type of sedatives for aggressive weaning of sedation in a proper and timely manner
- Use of proper sedative combinations for shorter intubation times; medications include benzodiazepines, opioid analgesics and antipsychotics.
- Following proper weaning guidelines to reduce tolerance to medications and withdrawal and addiction to medications; SATs and SBTs
- Fewer days on the ventilator also reduces the risk of ventilator associated pneumonia (VAP)

Protocols

Pre-Extubation Assessment:

- Boone Hospital Center (for post-op patients)
 - Tidal Volume of 6-10 ml/kg
 - RR <20/min with absence of accessory muscle use
 - Adequate neurological function and ability to follow commands
 - Gas exchange within parameters per lab values
 - Hemodynamic stability

- Interdisciplinary team collaboration between Provider and Respiratory Therapists for patient readiness throughout the weaning process
- AHRQ
 - Spontaneous Awakening Trial completion leading to Spontaneous Breathing Trial
 - By following AHRQ protocol, the number of days a patient is intubated is reduced, as is the incidence of ventilator associated pneumonia

Evidence-Based Practice Recommendations

- Effectiveness of music therapy and other calming techniques such as massage while weaning off sedation medications to better increase successfulness of SBTs and decrease length of time on ventilator
- Add SBT and sedation vacation in the charting
- Have a set time for Intensivists to evaluate patient readiness for SBT
- Create policy/protocol for sedation titration per TJC recommendations
- Implementing evidence-based SATs and SBTs per policy/procedures will significantly reduce patients being sent home on dangerous sedative medications

Implementation

- By implementing evidence-based practice SATs and SBTs, patients are not able to fall into a deep sedation, improving outcomes in patient care
- With daily SATs and SBTs, sedation is paused or decreased to assess patients' ability to breathe on their own per the ventilator settings, as well as the ability to assess patients' mental status, decrease risk for delirium and promote brainwave function.
- Use of continual learning education resources to ensure staff education
- Indication of learning can be assessed through improved intubated patient outcomes measured by decreased ventilator days and decrease occurrences of VAP

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Evidence-Based Practice Projects

SIMULATION FOR HEALTH CARE EDUCATION

Kayelee Branstetter, Courtney Kempker, Sarah Kirchoff, Brenna McNutt, Sam Marchetti, Nancy Ngo, Kiley Waddle

Clinical (PICO) Question

In licensed healthcare workers, does the use of simulation as a teaching strategy compared to no simulation affect staff confidence and knowledge, or improve patient outcomes?

Clinical Problem/Reason for Project

- According to Knowles' adult learning theory, adults learn through experience, problem solving, and learning information related to their job
- Despite reduced clinical rotation opportunities in higher education due to global pandemic, newly licensed RNs are more likely to be involved in patient safety events compared to experienced RNs
- Inability to control the situations or scenarios staff may encounter
- Rare medical emergencies require prompt and accurate response when they do take place, but we cannot predict when/where these will occur to facilitate learning experiences
- Literature suggests there are often delays in recognition and intervention or even absence of action when patients are deteriorating, which can negatively impact patient outcomes
- With implementation of RRTs, true emergency situations occur less frequently
- Knowledge achieved during a life-support skills course deteriorates as quickly as 2 weeks after class completion
- Successful completion of life-support courses does not guarantee participants will recall the content and perform competently during an emergency
- Lack of knowledge and poor communication contribute to delays and inability to intervene appropriately
- Simulation is being used widespread to improve patient outcomes in the clinical setting

Goal of Project

To use Boone Health's new high-fidelity simulation lab to expose health care staff to real-time medical emergencies, allowing them to practice appropriate interventions within a safe learning environment. Aim is to increase the confidence and knowledge of interdisciplinary teams, and subsequently improve patient outcomes.

Evidence Supporting Intervention

- Nurse competence and knowledge shows statistically significant clinical improvements post simulation
- A systematic review of 12 quantitative studies found improvements in various patient outcomes (sepsis, acute respiratory distress, falls, etc.), as well as general improvements in the nurses' abilities to flag deteriorating patients and intervene appropriately following simulation learning experiences
- This increased ability to recognize patient decline earlier is linked to an improvement in patient outcomes, including fewer incidences of cardiac arrests
- Post surveys show statistical improvement in nurse knowledge at 6 months but a return to baseline control group by 24 months
- Code blue audits show increased improvements in staff competency at one year post simulation
- Simulation provides a safe learning environment for staff and allows them to improve critical thinking/problem solving skills, as well as allows participants to see and practice their response to critical scenarios
- Simulation has a positive impact on communication among interdisciplinary team

Pre- and Post- Intervention Results

Nurse residents in Cohort 10 at Boone Hospital were given pre- and post-simulation

surveys following a high-fidelity mock code blue scenario to evaluate the effectiveness of the learning experience in regards to knowledge acquisition and confidence level.

Evidence Based Practice Recommendations

- Simulation experiences facilitate learning in a safe environment, improve knowledge retention, and increase staff confidence
- Additional evidence is needed to explore differences in the role simulation plays in staff with varying experience and educational levels. It appears less experienced medical-surgical nurses and night shift nurses may benefit the most from simulation learning experiences
- More studies are needed on how long information is retained by interdisciplinary teams to determine longitudinal effect
- Larger sample sizes are needed in studies of this nature
- More studies needed on how simulation experiences specifically affect patient outcomes

Evaluation/Plan for Implementation

- Simulation holds significant promise for training new and experienced nurses
- High-fidelity simulations are widely accepted within clinical organizations
- Recommend simulation for high-risk and infrequent events, varying from one specialty to another
- Recommend that simulation experiences be gradually incorporated into annual competency evaluations, followed by debriefing sessions to increase knowledge retention
- Obtain buy-in from unit leaders/educators and streamline process for them to incorporate simulation into annual competency evaluation, in collaboration with simulation coordinator
- Conduct internal evaluation with our staff, such as pre- and post-simulation surveys, as well as to determine what they would like to learn in future simulations

Acknowledgements

Karissa Bryant, MSN, RN (Project Mentor)

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Evidence-Based Practice Projects

POST-INTENSIVE CARE SYNDROME

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Purpose Statement

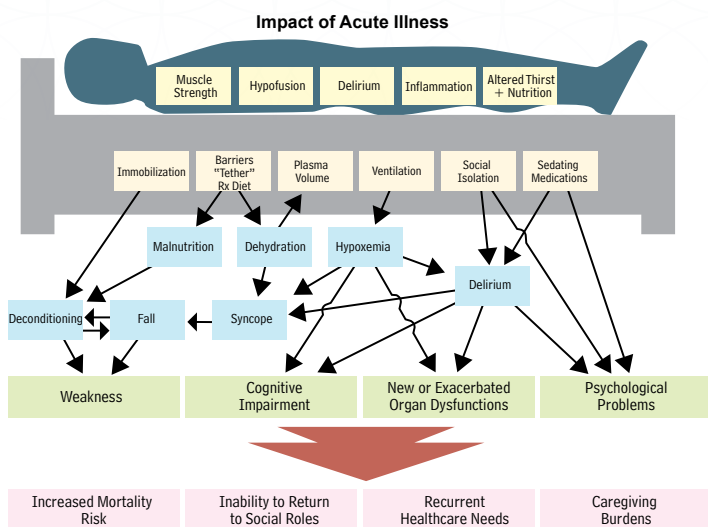
To educate and bring awareness concerning Post-Intensive Care Syndrome to fellow staff members in order to improve patient outcomes.

Clinical Problem

"Post-Intensive Care Syndrome (PICS) is defined as new or worsening impairment in physical, cognitive, or mental health status arisen and persisting after hospitalization for critical illness." (Zahn) Survivors of critical illness face a prolonged and resource intensive recovery. Advances in technology and therapeutics continue to improve survival of critically ill patients, however, with improved survival has come the recognition that many ICU survivors face a complex recovery trajectory following discharge from the ICU.

Project Goal

Increase knowledge of PICS across various disciplines of the hospital.



Significance of Project

PICS affects 50-70% of ICU survivors and can last 5 to 15 years. 75% post discharge survivors required 2 months rehabilitative care. More staggering, 57% of ICU survivors require 12 months of assistance care. Family caregivers themselves experience depressive symptoms, caregiver burden, post-traumatic stress, and poor physical health. The "greater the symptom burden of the ICU survivor is significantly correlated with family caregiver's depressive symptoms at 2 weeks post ICU discharge."

57% of individuals experience cognitive impairment six months post discharge. It has been shown that 40% of cognitive deficiencies are consistent with a moderate Traumatic Brain Injury (TBI). Additionally, 44% of survivors are jobless post discharge from ICU. Pulmonary dysfunction, ARDS, sexual dysfunction, chronic pain, and functional disability are among the many challenges ICU survivors face.

Risk Factors

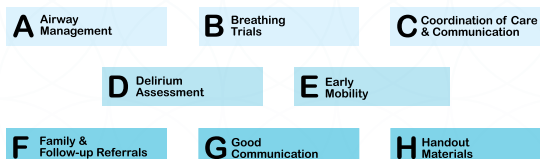
- Delirium
- Previous mental condition
- Pre-existing impairments (cognitive, physical)
- Mechanical vent
- Social isolation

- Sepsis
- Decreased plasma volume
- Hypoglycemia: depletion of essential nutrients
- Hypoxia
- Excess sedation

Prevention

- Identify who's at risk
- Education to staff and family involvement
- Education for public and promoting health maintenance
- Communication tool for report pass off

Intervention



Evidence Based Practice Recommendations

- Creation of educational materials for staff and patient populations
- Inclusion of PICS information during patient care orientation
- Unit-based huddle discussion
- Clinical Practice Update
- Invitation to department leads to attend poster presentation

Evaluation

Implementation of red book module to be completed within the following year.

Acknowledgements

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Evidence-Based Practice Projects

QUALITY IN QUANTITY: QUANTITATIVE VS. ESTIMATED BLOOD LOSS

Melissa Eskew ADN, RN; Lauren Reddin BSN, RN; Cassidy Rice ADN, RN; Anna Rioux ADN, RN; Madeline Stewart BSN, RN; Grace Westfall ADN, RN

Clinical (PICO) Question

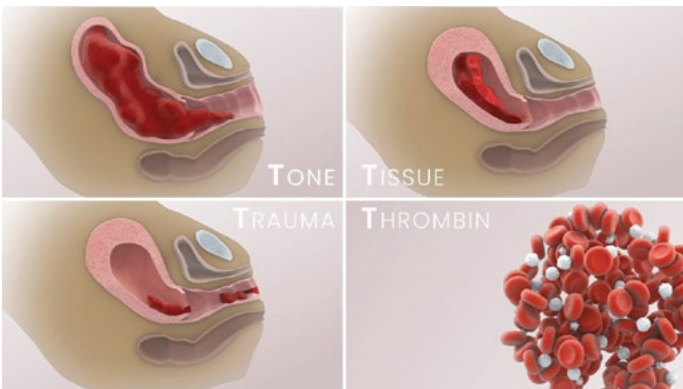
In patients experiencing a post-partum hemorrhage (PPH), does measurement of quantitative blood loss (QBL) versus visually estimated blood loss (EBL) lead to better patient outcomes?

Project Goal

Quantification of blood loss in a post-partum hemorrhage leads to earlier recognition and treatment which improves patient outcomes

Background

- Post-partum hemorrhage is the 4th leading cause of maternal mortality in US
- Estimated blood loss is 31% less accurate compared to quantitative blood loss
- 35.6% of women are not accurately diagnosed with estimation of blood loss
- Post-partum hemorrhage commonly caused by
 - Tone
 - Trauma
 - Tissue
 - Thrombin



Evidence Supporting Intervention

- Current recognition of PPH comes from experience, visualization, and patient assessment, not from actual measurement of blood loss
- Hemorrhage protocol/bundles improve outcomes
- Providers start treatment when “abnormal” loss is recognized, continuous ongoing assessment is essential for diagnosis

Recommendations

- Visualize drape volume prior to delivery of placenta for a vaginal delivery
- Weigh chux and any blood-saturated items in a vaginal delivery
- Measure suction cannisters and drapes in a Cesarean section delivery
- Subtract pre-placental fluid volume from post-placental fluid volume
- List of dry weights of supplies (e.g. chux, drapes)
- Hemorrhage risk assessment, labs, and iron supplementation completed

on all patients

- Obesity and advanced maternal age at higher risk

Implementation Plan

- Obtain a hemorrhage cart
 - Scale
 - Medication storage
 - IV supplies
 - Mass transfusion protocol
 - List of dry supply weights
 - Graduated drapes
 - Bakri balloon
 - Urinary catheter
- Standardized chux and drapes on units to ensure accurate weight
- Obtain physician collaboration
- Educate unit staff
 - Initial education on new practice through class or module
 - Incorporate education into annual competency
- Staff support in hemorrhage situation
- Ensure policy and unit practices align
- Standard nursing note to document QBL use



Evaluation Plan

- Review patient cases of PPH for accurate usage of QBL
- Goal: 90% of documented PPH incidents quantitative blood measurement is performed

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Evidence-Based Practice Projects

VIOLENCE AND AGGRESSION TOWARDS HEALTHCARE STAFF

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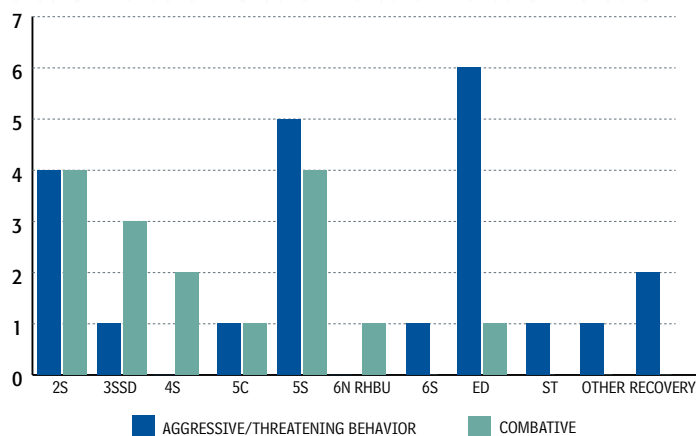
Problem Statement

How does screening for possible violence or aggression reduce workplace violence for healthcare staff?

Significance of the Issue

- Approximately 70-74% of all workplace assaults occur in healthcare and social service settings.
- 44% of nurses report physical violence and 68% report verbal abuse.

Areas of Reported Violence: Boone Health 01/01/22 to 09/20/22



Background

The Broset Violence Checklist (BVC) correctly predicted no risk for severe violence in 99.2% of all assessments.

The Broset Violence Checklist

	Day	Evening	Night
Confused			
Irritable			
Boisterous			
Verbal threats			
Physical threats			
Attacking objects			
SUM			

- Score the patient at an agreed time on every shift.
- Absence of behavior gives a score of 0.
- Presence of behavior gives a score of 1.
- Maximum score (SUM) is 6.
- If the score is >2 the risk of violence is very high, preventative measures should be taken, and a plan should be developed to manage the potential violence.

Limitations of Research

- Several of the studies used were out of the United States.
- Most articles in the study referenced ED/Psych units as opposed to inpatient units.
- No standardized implementation plan.

Solution

Implementation of the BVC assessment tool should be employed for the purpose of anticipating the potential of violence to staff from patients and visitors.

Recommendations

- Utilize the SWAT and Code White teams and buoy indicators on patient doors (Nurse is responsible to hang buoy).
- Implementation into Emergency Department on triage assessment
- Add to worklist for updating on inpatient side (i.e., if patient becomes more violent later in their stay, update the chart regarding aggressive behavior then rescore patient).
- Have a pop-up in Meditech that alerts staff that SWAT team has been activated during patients stay- take this to CIS/Meditech optimization team for implementation.
- Initiate an additional worklist row specifically for the BVC checklist.
- Implementation of pre survey and education module on Workday prior to start of BVC on units.
- Trial for 3-6 months, do a statistical analysis to assess efficiency, and send a post survey for staff on efficiency of BVC checklist.



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Healthcare Simulation Week

Boone Health celebrated Healthcare Simulation Week from September 12 to 16, 2022 with interactive demonstrations by Susan Lambert, MSN, RN, and tours of The Learning Center, or TLC.

Designed to be used by both Boone Health staff and nursing students, the state-of-the-art simulation center houses four advanced patient simulators, a medication room, two classrooms, a debrief room, computer lab, and more.

Right: Susan Lambert, MSN, RN with pediatric patient simulator, Hal.



Burn Treatment Simulation

When Stephens College nursing students come to Boone Health's simulation lab – known as The Learning Center – Susan Lambert, MSN, RN, Simulation Center Coordinator and Clinical Educator, strives to make training experiences as true to life as possible.

After a Stephens College instructor asked for supplies for a scenario where a patient is burned after putting gasoline on a fire, Susan researched, investigated, and produced a simulated experience, using Elmer's glue, tissue paper, make-up, simulated blood, plus some innovation and resourcefulness. Nursing students were able to practice treating a burn victim in a medical setting and respond to the specific needs of a patient with severe burns.

Hands-On Healthcare Education

by Michelle Terhune



Students learning how to be nurses, respiratory or speech therapists, paramedics, radiology technicians, and other healthcare professionals can only learn so much in the classroom. There comes a time when they need to begin working with real patients in real situations. And that's where Boone Health comes in.

Boone Health works with roughly 50 schools to provide clinical education opportunities to about 700 students every year. Boone Health works with programs at Stephens College, University of Missouri, Columbia College, Moberly Area Community College, Central Methodist University, and more, including online education programs that offer clinical opportunities for students close to where they live.

Deanna Powers, BSN, RN, NE-BC, Supervisor of Clinical Education Training and Development, is the link between the schools, instructors, students, and staff at Boone Health.

"When you're in nursing school, you get the book information. You get scenarios. You get simulations with a mannequin or a mock patient," Deanna says. "But nothing ever takes the place of a real patient. Nothing can simulate that relationship with a patient."

Because students aren't licensed, they work with preceptors – Boone Health licensed professionals who show students how to do their future jobs. This is extra work for nurses, technicians, therapists, and others on top of their inherently busy jobs, but at Boone Health, these preceptors want to teach students what they know. They understand they may be teaching their future coworkers and that has never been more important than now.

"COVID changed the world and healthcare in particular," Deanna says. "For a while, we didn't have students. As we started hiring students who had finished nursing school during COVID but didn't have the in-person clinical experience, we had to precept them differently."

An analysis done by the journal *Health Affairs* shows that the number of registered nurses declined in excess of 100,000 in 2021. Nurses have been in short supply for years before the pandemic, but stress caused many to leave the profession, which leaves institutions like Boone Health hungry for new talent.

"Part of my job is recruiting students who want to get their clinical education at Boone," Deanna says. "I need to help make their experience fascinating and exciting and let them see what happens here at Boone, so they want to come and work here."

Nursing is a profession that requires knowledge of human nature and skills to communicate with patients in a very intimate way. Trust developed between a nurse and a patient makes patients

more willing to stick to a treatment plan which leads to better patient outcomes. Deanna says teaching nursing students how to be comfortable with that type of interaction is critical and not something learned from a book. It's no small challenge. Younger generations are more digital and often less social on a personal level.

"The digital world has made us change the way we do patient education," Deanna says. "A fairly high percentage of our patients are over 65, and we still need to have conversations with them about their care because they aren't comfortable with digital delivery of that information. Our nurses need to know how to do that."

Clinical education at Boone isn't just about the students and preceptors. The patient remains front and center in everything Boone delivers.

"Patients always have a choice. You can refuse to have a student present, and that's perfectly fine. We will find another patient who is okay with that," Deanna says. "There are no consequences. That's your right as a patient here."

Students work under the supervision of licensed professionals. The quality of patient care and protection of their rights to privacy are non-negotiable.

If patients receive the highest quality of care and students receive hands-on education from some of the best healthcare professionals anywhere, what does Boone Health get?

"Recruitment," Deanna says. "If students come here and have a great experience, they may want to work here. And we know they've had great training. It's a win for everyone."

The nursing shortage has also led to nurses becoming preceptors and charge nurses much earlier in their careers. That's why Boone Health continues to educate and support nursing staff as they make the transition from student to professional.

Boone's Nursing Residency Program builds clinical skills by providing ongoing classroom and hands-on education during a nurse's first years. They are prepared for patient care as well as for teaching tomorrow professionals when they graduate.

But nurses have always needed to be prepared for anything, including teaching students not long after being students themselves. Deanna says new nurses make great preceptors because they haven't forgotten their own experience.

Left: Blaine Meek, BSN, RN, MEDSURG-BC, demonstrates charting with Stephens College nursing student Monica Stallings.

**"When you're in nursing school,
you get the book information.
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*Deanna Powers, BSN, RN, NE-BC, Supervisor of Clinical
Education, Training & Development*



Learning Center Presentation at INACSL Conference

In July 2022, Susan Lambert, MSN RN, The Learning Center (TLC) Coordinator at Boone Health attended the International Nursing Association for Clinical Simulation and Learning (INACSL) conference held in Milwaukee, Wisc. Susan presented a poster about the collaboration between Stephens Nursing program and Boone Health. The title of the poster was: *Academic-practice partnership: How a new nursing program and community hospital innovate training.*

This year's conference focused on the theme "Stronger Together" and was the first in-person event following COVID-19. The conference had over 700 nursing simulation champions from around the world with 14 workshops, over 50 educational sessions, more than 60 poster presentations, and more than 25 exhibitors.

ACADEMIC-PRACTICE PARTNERSHIPS: How a community-based hospital and new nursing program innovate training

Sarah Gill, DNP, CNM, APRN and Susan Lambert, MSN, RN



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BACKGROUND


- Simulation centers within university-affiliated hospital systems facilitate worker recruitment and retention.
- Community hospitals must employ additional measures to build workforce.
- Literature rarely discusses benefits of simulation center relationships with community hospitals.

DESCRIPTION

- A partnership was formed between a community hospital and a nursing school.
- Goal was to create a uniquely hands-on approach to education and training of nursing students.
- Expect this to significantly advantage graduates and assist the hospital in recruitment and retention.
- A state-of-the-art simulation center hosted within the hospital mirrors the workplace.

The Learning Center at Boone Health



DISCUSSION

- As the program is still in the foundational phases, numerous opportunities remain for continued development, policy change, and personnel education.
- With simulation fidelity advancements, students still gain valuable clinical experience despite shortage of clinical site placement and availability.
- Recent SARS-Covid-19 global pandemic has seen decreased patient encounters, overburdened staff, and decreased available preceptors.
- State boards of nursing allow more simulation time, partnerships between community hospitals and schools of nursing could drastically minimize the scramble.

OUTCOMES

- The program has been enacted for less than one year; however, evaluation metrics have been established to guide future evolution.
- QR code linked to a short survey is posted outside each patient room and gather data regarding fidelity, utility, and TLC upkeep.
- Students are graded using point-based rubrics for participation and performance.
- Since completing the nursing foundations course, 67% (n=8) of students in the first cohort applied for patient care technician positions with 5 still working on the floor.

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LEARNERS

- Primary learners are baccalaureate nursing students.
- A hospital employee and a school of nursing faculty member serve as simulation coordinators.
- Hosting "The Learning Center" within the hospital has opened simulation experiences to hospital staff for training as well.
- Students from the school of nursing additionally have opportunity to apply for a patient-care technician position after completing the Nursing Fundamentals course.
- To support the work-learning balance, nursing students are given unique scheduling opportunities.

Boone Nurse Educator Published

In September 2022 Emily Reinkemeyer, MSN, RN, CPAN, Clinical Educator and Nurse Residency Coordinator in the Training and Development department, published an article in the journal *Nurse Education Today*. The article, "Escape rooms in nursing education: An integrative review of their use, outcomes, and barriers to implementation," was Emily's final project for her master's degree in nursing education. Emily worked with her professors to follow the paper through to publication.



Emily Reinkemeyer, MSN, RN, CPAN
Clinical Educator & Nurse Residency
Coordinator

Escape rooms have become a popular teaching tool in many fields, but their effectiveness in nursing education had yet to be examined. The article by Emily, Mathew Chrisman, and Sarah E. Patel

evaluated the use of simulation-based escape rooms in nursing. Emily reviewed 18 studies, focusing on teamwork, perceived learning, and increased confidence and knowledge, to identify student satisfaction as well as barriers to educators.

Emily's article concluded that escape rooms can be effective for many nursing education topics and their use has been well-received. Further research is required to assess ideal group sizes for educational escape rooms, to determine how escape rooms can most effectively produce education-focused outcomes, and to develop frameworks to guide the implementation of escape rooms in nursing education.



Virtual Reality EBP Takes First Prize at Magnet Conference

At the ANCC Magnet Conference in October 2002, Boone Hospital Center was awarded first place for one of our Evidence-Based Practice project posters, "Virtual Reality for Anxiety Reduction in Health Care Workers" (below).

of virtual reality can have a therapeutic effect and reduce anxiety. Other findings included a reduction in feelings of anger, depression, and tension when participants measuring happiness and calmness.

In 2021, many Boone Hospital Center departments experienced the benefits of the Healium Virtual Reality devices deployed to their units. Based on research that included Boone Health caregivers, we now know the use

Above: (L to R) Andrea Fansler, BSN, RN, CCRN-K, NE-BC; Monica Smith, MSN, RN, NE-BC, FACHE; Michaela Popescu, MS, CCRP; Michele Sprague, MSN, RN, NE-BC

Virtual Reality for Anxiety Reduction in Health Care Workers

Michele Sprague, MSN, RN
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Abstract

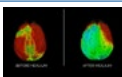
The purpose of this study was to examine whether a virtual reality plus neurofeedback (VR+NF) meditation experience (experimental condition) was more effective than a standard guided audio-only meditation (control condition) in improving mood in healthcare workers.

What is Healium?

Healium VR experiences are viewed using a VR headset. Participants used the "Relaxation Beach" experience from the Healium VR app with an Oculus Go headset. The visuals are from the perspective of the user sitting on the beach on a sunny day while waves calmly wash upon the shore. The audio-only guided meditation used the same audio track as the VR experience.



For neurofeedback, participants in the VR+NF group wore a BrainLink Lite EEG headband. The wearer's amount of high beta activity is represented on the screen by a glowing ball that moves up and down in relation to changes in amplitude. This "firefly" moves across the screen in relation to time. A solid white threshold line is displayed in the same space providing a baseline of brainwave information. This threshold can be adjusted to make the task easier or harder. For this study, the threshold was adjusted to "easy".



Hypothesis

Both groups would show reductions in negative mood states and increases in positive mood states, but that these changes would be significantly greater in the VR+NF group.

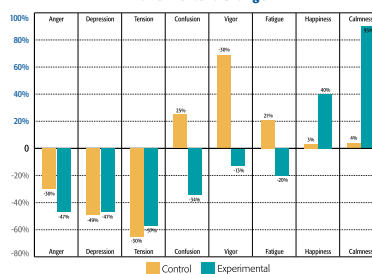
Participants

100 healthcare workers in a hospital setting at the height of the COVID-19 pandemic were alternately assigned to one of the two conditions.

Before and after their experience, participants completed a Brunel Mood Scale survey. The scale consists of 32 mood descriptors categorized into 8 dimensions: anger, tension, depression, vigor, fatigue, confusion, happiness, and calmness. Participants were asked "How do you feel right now" and indicated the extent of their "in the moment" experience of the mood descriptors using a 5-point scale. The pre and post measures took place within one 50-minute session.

Control Group	VR Condition	Both Groups
<ul style="list-style-type: none"> Higher baseline average for most measures including: anger, depression, tension, confusion, happiness, calmness Lower scores for fatigue and vigor, compared with the VR group (the difference were not statistically significant) 	<ul style="list-style-type: none"> Significantly large increases in happiness and calmness, while the control group saw almost no difference from baseline Decrease in fatigue and confusion, suggesting improved alertness at the meditation session 	<ul style="list-style-type: none"> Significant decreases in anger, depression and tension

Brunel Percent Change



Conclusion

Both meditation experiences seem to help decrease feelings of anger, depression and tension. The VR experience seems to have a deeper and different effect on relaxation compared to audio-guided meditation, without inducing tiredness and sleepiness. The results are consistent with other VR (Healium) research showing most people feeling relaxed and alert after a VR experience. The results suggest that using VR technology for short relaxation sessions could improve alertness and diminish fatigue in health workers during stressful working hours.

Reference

Tarrant, J., Jackson, R., and Vicksa, J. (2022) A Feasibility Test of a Brief Mobile Virtual Reality Meditation for Frontline Healthcare Workers in a Hospital Setting. *Front. Virtual Real.*, 26 January 2022 | <https://doi.org/10.3389/fvrl.2022.764745>



Promoting Safety: Great Catch Award

Many times, our employees catch events before they happen, which is exactly what we want to happen! These events are referred to as a "near miss" in the risk management world.

Preventing safety events from reaching our patients, staff or hospital is extremely important to our organization. To recognize employees who identify and prevent near-misses, Boone Health Risk Management and the Professional Development Core Council developed and introduced the Great Catch Award in late 2021, with the first winner announced in February 2022.

At Boone Health, incident reports are entered in Meditech. Every staff member has the ability to log in to Meditech and report safety concerns and incidents that need review. When



Boone Health *Great Catch* Award

incident reports are entered, management can review a situation as it is told from the writer's perspective so that it can be analyzed from a safety perspective and for tracking purposes.

We added a Great Catch section of the incident report which could nominate people for the award. Management team members can also submit a name when they review the incident. The Great Catch Award Committee reviews nominations and chooses winners. The award is presented bi-monthly, and announcements are made

in the winner's department.

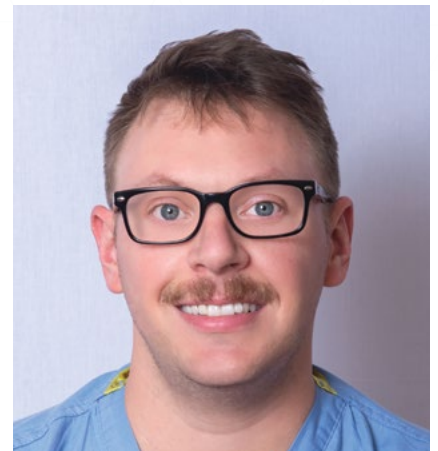
Because safety is everyone's #1 priority at Boone Health, any employee who helps to create a safer patient care environment can be nominated for a Great Catch Award.



Gemma Saathoff, BSN, RN
Oncology/Neurology



Saryssa Dodson, BSN, RN
Orthopedic Specialties



Mark Bayliss, ADN, RN
Stepdown Unit



Erin McGuire, BSN, RN
ICU



Rebecca Schiffbauer, BSN, RN
Post-Anesthesia Care Unit



Tyler Cramer, PharmD
Inpatient Pharmacy

Childbirth Education Goes Virtual



During the pandemic, Boone Family Birthplace (BFB) reinvented their Family Life Education classes. BFB offers a Prepared Childbirth course as part of its Family Life Education program. Over several weekly sessions, the class provides detailed childbirth preparation in a small group setting, covering physical and emotional changes of pregnancy, the labor and birth process, Cesarean birth, pain management, and postpartum and newborn care.

In March 2020, classes were cancelled to prevent the spread of COVID-19, but patients were reaching out to their doctors and nurses for information on the Prepared Childbirth class. There was an immediate need to replace in-person education classes for expecting parents with a virtual option, but what would that be and what would it look like?

Giving birth in a hospital can be a scary experience even without giving birth during a pandemic. Staff nurse Brandy Templeton, RN, RNC-OB, knew how important it was to make the hospital experience less scary. A creative and innovative solution was needed – and quickly. Brandy approached BFB leadership with new ways to continue to provide this valuable education to new and growing families.

One idea to replace in-person Prepared Childbirth Education class was to make videos of the birthing process at Boone Hospital. At the time, this information was not available on a virtual platform. In-person classes shared posters and videos during sessions, but had nothing that a patient could watch from home. Brandy worked with Jennifer Roelands, MD, and Leah Smith, MD, to create virtual birthing class videos covering patients' most common questions and concerns

"These videos are short and concise. They offer answers to the top questions we hear in our birthing classes and show a consolidated tour of our birthing unit," says Brandy. "Being able to see where they would

give birth even without in-person classes was helpful to our families."

Video topics included "What Happens in Labor," "What Are My Low Intervention Options," "Can I Move in Labor," "What If I Want a Natural Labor," "What About Pain Meds," "What Happens During Active Labor and Delivery," and "Do I Need a Birth Plan?"

While the videos eased stress and worry for expecting parents, they couldn't completely replace what was lost when in-person classes were cancelled. In 2022, virtual birthing classes using Microsoft Teams went live. This allowed the educators and families to see and speak to each other.

Rebecca Romero, RN, Childbirth Educator, was instrumental in developing the virtual classes. Rebecca worked with Boone Health Information Technology to learn how to set up and run online sessions. Virtual classes were promoted on the Boone Health website and to Women's Health Associates' patients.

The response was impressive. Mothers and couples from all over mid-Missouri signed up for classes through the website, but it didn't stop there; expectant parents from Illinois and Kansas signed up for classes because their local hospitals didn't offer virtual education.

In May 2022, Family Life Education classes met in person again. In addition to Prepared Childbirth, Boone Family Birthplace also offers courses on Breastfeeding, Infant Safety and CPR, and a condensed version of the Prepared Childbirth class called Childbirth in a Day.

"It's great to be able to meet in person again, but I'm grateful that we were able to continue providing this valuable education and offering reassurance to our new parents even with the pandemic restrictions in place," says Brandy.



Infection Prevention Week

The 50th Annual International Infection Prevention Week took place October 16 through 22, 2022. On October 20 and 21, the Boone Health Infection Prevention (IP) team was on the Bridge over Broadway to increase C. diff awareness among staff with activities, games, treats, and prizes.

Boone Health team members were also given an opportunity to visit the IP Room of Horrors throughout the week. In the Room of Horrors, team members were tasked with finding real life examples of IP risks in a simulated patient room. 58 Boone Health teammates entered the challenge, identifying the infection prevention horrors.

Boone Health's IP Team strives every year to find engaging and creative educational opportunities to remind everyone of their part in our efforts to keep our patients and each other safe.

Left: Rachael Hahn, MPH, CPH Infection Prevention Specialist, stands behind Cassie Milnes, MSN, CIC, CNL, Infection Prevention Consultant during a C. Diff Awareness event.

Columbia College Summer Nursing Camp

With the sponsorship of the Boone Hospital Foundation, Columbia College hosted a Summer Nursing Camp from June 13 to 16, 2022. During this camp, participating area high school juniors and seniors experienced a few aspects of nursing and toured areas of Boone Hospital Center, including the Cardiac Cath Lab (*right*).

Several Boone Hospital nurses volunteered to make the Nursing Camp a memorable and educational experience:

Amanda Jung, ADN, RN; Cindy Wharton, BSN, RN; Heidi Woods, BSN, RN, CNO; Lisa Cottrell, BSN, CNOR; Melissa Welch, ADN, RN; Pat Urban, MSN, RN; Renae Crow, BSN, RN, VA-BC; and Shelly Gibson, ADN, RN,

Amanda Koetting (Radiology), Alan Kettlekamp (Cath Lab), Rhoda Phillips (Cath Lab), Cheryl Rowland (Maternal Child Health), Emily Reinkemeyer (Training and Development), Randy Fry (T&D), Tyson Cason (T&D), Andrea Fansler (T&D), Lindsay Divins (ICU), Corey Hardin (ED), and Jesse Godec (Emergency Department) led camp participants on tours.





Connecting Lives: Organ & Tissue Donation

Boone Hospital Center partners with Midwest Transplant Network to connect lives through organ donation. Midwest Transplant Network is a federally designated not-for-profit organ procurement organization active in Kansas and western Missouri that provides services including organ procurement; surgical tissue and eye recovery; laboratory testing; and 24-hour rapid response for referrals from hospital partners.

In 2022, Midwest Transplant Network recognized partnering organizations and individuals during their annual Excellence in Donation Awards. Boone Hospital Center was recognized for having a higher-than-average number of families granting authorization for organ donation.

Boone Health Intensive Care Unit Director Karen Ross, BSN, RN, CCRN, was also awarded with the Excellence in Donation Award for working closely with Midwest Transplant Network to better educate our ICU staff and physicians about organ donation, resulting in increased

donations. Karen was one of 6 individuals in MTN's service area to be recognized in 2022.

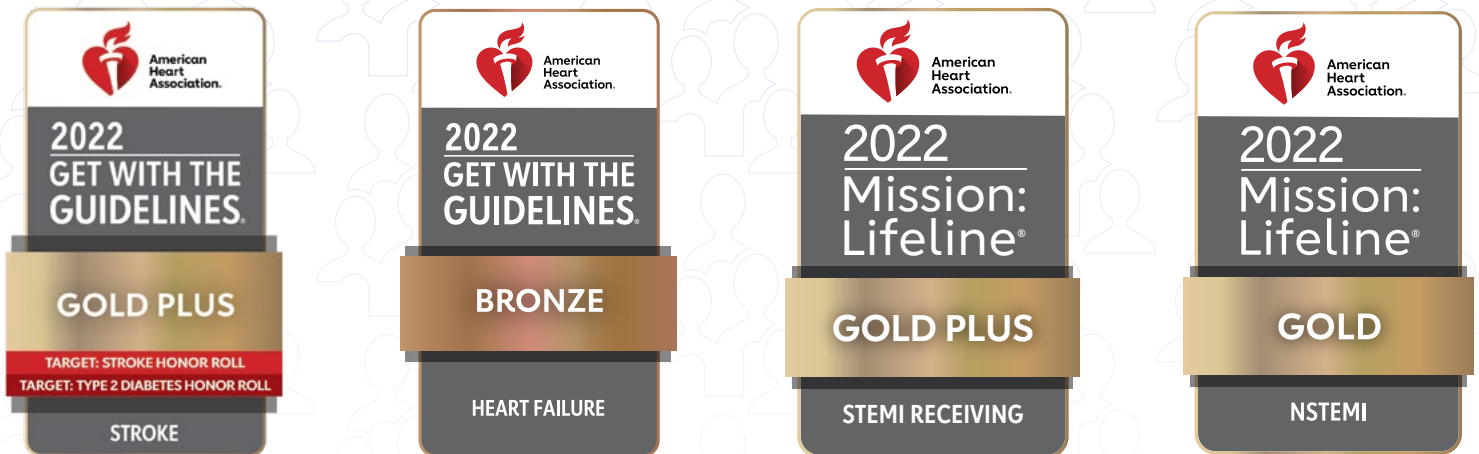


Boone Health also contributed a rose to the Donate Life Float at the 2023 Rose Parade® in Pasadena, Calif. on Monday, January 2. CEO Troy Greer included a message, "On behalf of the Boone Team, bless you for giving the gift of life!"

Donate Life, a national non-profit organization, works closely with Midwest Transplant Network to educate the community on the importance of organ donation and to help patients receive donated organs, eyes, and tissues.

Above: (L to R) Karen Ross, BSN, RN, CCRN, ICU Director; Shannon Kuczynski, MHSA, MSN-A, RN, Chief Nursing Officer; Monica Smith, MSN, RN, Chief Operating Officer; Troy Greer, Chief Executive Officer; and Lori Clark, Director of Columbia Operations, Midwest Transplant Network

2022 Awards & Designations



American Heart Association Awards

In 2022, Boone Health received four American Heart Association Get With The Guidelines and Mission: Lifeline achievement awards demonstrating commitment to following up-to-date research-based guidelines for the treatment of heart disease and stroke, ultimately leading to more lives saved, shorter recovery times and fewer re-admissions to the hospital.

These awards included:

- Get With The Guidelines® - Stroke GOLD PLUS with Target: Stroke Honor Roll and Target: Type 2 Diabetes Honor Roll
- Get With The Guidelines® - Heart Failure BRONZE
- Mission Lifeline® - STEMI Receiving Center – GOLD PLUS
- Mission Lifeline® - NSTEMI – GOLD

Every 40 seconds, someone in the U.S. has a stroke or heart attack, and heart disease and stroke are the No. 1 and No. 5 causes of death in the United States, respectively. Studies show patients can recover better when providers consistently follow treatment guidelines.

Get With The Guidelines and Mission: Lifeline put the expertise of the American Heart Association and American Stroke Association to work for hospitals nationwide, helping ensure patient care is aligned with the latest evidence- and research-based guidelines.

As a participant in both Mission: Lifeline and Get With The Guidelines programs, Boone Health qualified for the award by demonstrating how their organization has committed to improving quality care.

U.S. News & World Report

For the seventh year in a row, Boone Hospital Center was ranked the #1 hospital in mid-Missouri by *U.S. News & World Report* and was ranked the #6 hospital in the state, up from #7 in the state last year.

U.S. News & World Report also rated Boone Hospital Center "High Performing" in abdominal aortic aneurysm repair, aortic valve surgery, chronic obstructive pulmonary disease (COPD), colon cancer surgery, heart attack, heart bypass surgery, heart failure, hip fracture, hip replacement, kidney failure, and stroke.



Wound Healing Center Earns Distinction

Boone Health's Wound Healing Center received the 2021 Center of Distinction award by Healogics®, the nation's largest advanced wound care service provider. Our Wound Center achieved outstanding clinical outcomes for 12 straight months, including a patient satisfaction rate higher than 92%.

Achieving Center of Distinction reflects the Boone team's unwavering commitment to an excellent patient experience. Even with the extraordinary circumstances presented by the pandemic, Boone Health Wound Healing Center has persevered with a people-first, patient-centered approach to care.

The Wound Healing Center is a member of Healogics' network of 600-plus Wound Care Centers®, offering highly specialized wound care to patients with diabetic foot ulcers, pressure ulcers, infections, and other chronic wounds that don't heal in a reasonable amount of time. Advanced wound care modalities provided by our experts include negative pressure wound therapy, biosynthetic dressings, growth factor therapies, and hyperbaric oxygen therapy.



Boone Health Wound Healing Center Team



STS Three-Star Rating for Heart Surgery

Boone Health earned a distinguished three-star rating from The Society of Thoracic Surgeons (STS) for its patient care and outcomes in isolated aortic valve replacement (AVR) surgery. This is the highest possible honor, and it places Boone Hospital Center among the elite in the U.S. and Canada when it comes to AVR surgery. The heart team also earned a STS three-star rating for isolated coronary artery bypass grafting (CABG) procedures.

The STS star rating system is one of the most sophisticated and highly regarded overall measures of quality in health care, rating the benchmarked outcomes of North American cardiothoracic surgery programs. The rating is calculated using a combination of quality measures for specific procedures performed by 3,800 STS Adult Cardiac Surgery Database participants from January 2019 to December 2021.

Historically, approximately 4%-8% of participants receive three-star ratings for isolated AVR surgery and 20% for CABG.

Left: Josh White, ADN, RN



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