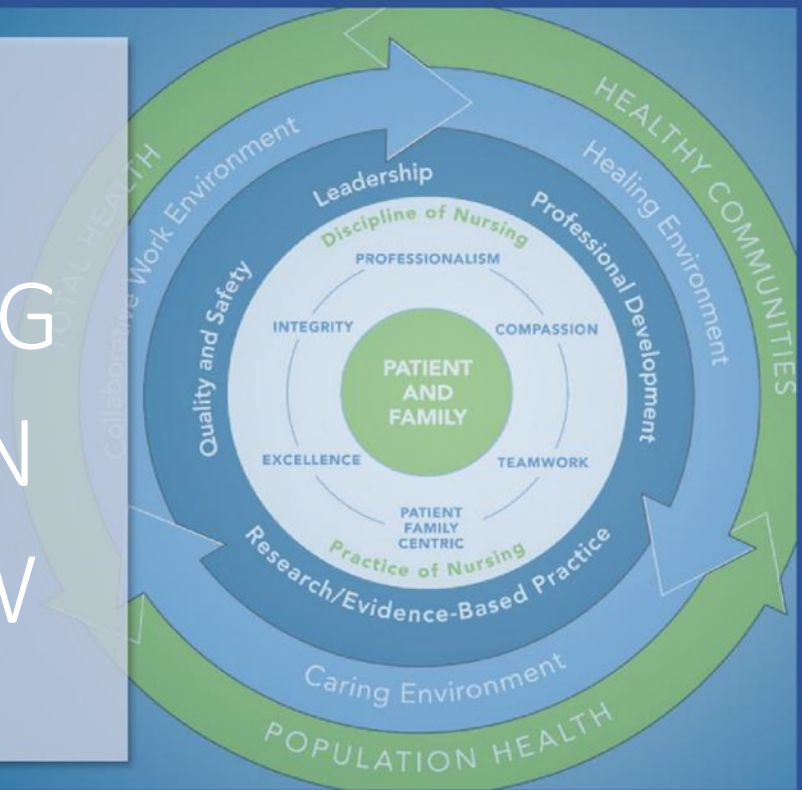


2019 NURSING YEAR IN REVIEW



*Extraordinary Nursing Care.
Every Patient.
Every Time.*

*Kaiser Permanente
West Los Angeles Medical Center*



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Message from the Chief Nurse Executive

“As leaders, clinicians, researchers, innovators and scientists, Kaiser Permanente nurses are advancing the delivery of excellent, compassionate care for our members across the continuum, and boldly transforming care to improve the health of our communities and nation.”

Kaiser Permanente Nursing Vision Statement

This annual report is dedicated to each and every one of our nurses for the extraordinary nursing care every patient every time that they do in the course of the regular day.

This has been a very special year for Kaiser Permanente-West Los Angeles Medical Center Nursing Division as we strengthen our system and processes by ensuring that we promote the voice of the patient and family and staff in all settings where patient care, treatment or services are provided. This commitment to patient/family-focused care has strengthened the commitment of connecting and caring for our patients that respect the values and preferences and needs of our patients. This annual report highlights the steps of the Kaiser Permanente West Los Angeles nurses take every day to ground and align with our mission in providing a high quality and affordable care to our members and patients and to improve the health of the communities we serve.

Year of 2019 has been a very special year for Kaiser Permanente West Los Angeles Nursing as we start to take the journey to Magnet Designation demonstrating nursing excellence and performance starting with the readiness assessment in late April and early May 2019. Then taking the NDQI RN satisfaction survey in May 2019 and continue to work throughout the year with a goal to improve the nursing culture of excellence, performance, safe, secure and respectful environment.



Liza F. Villanueva, RN, MPH, MBA
Chief Nurse Executive

Kaiser West Los Angeles Medical Center is 265-bed hospital located in Los Angeles City, California. It is recognized as a Level 2 hospital for its emergency care and a Level 3 Neonatal Intensive Care Unit. West Los Angeles nurses provide quality, safe, innovative and compassionate healthcare for KP-Southern California members as well as patients from the West Los Angeles service area.



The services that the hospital provides include the following:

- 53 Emergency Department beds
- 13 operating rooms,
- 194 Medical-Surgical beds
- 31 Intensive Care Unit
- 12 Neonatal Intensive Care Unit
- 9 Labor, Delivery, Recovery and Postpartum beds
- Chronic Ambulatory Peritoneal Dialysis
- Interventional Radiology rooms
- Procedural Sedation services
- Pain Management



242,951
Members in Service Area



8,782
Adult in patient discharges



83,859
ED Visits



229
NICU discharges



1,922
Total Births



525
Cesarean Section Cases



764
Registered Nurses
&
Nursing staff



3596 inpatient &
7333 outpatient surgeries



973
Credentialed & Privileged
Physicians

Nursing at Kaiser Permanente West Los Angeles Medical Center

Our strong nursing practice is based on providing structural empowerment for nursing, such as patient-centered care, shared decision-making, autonomy, and clinical competency. Outcomes are measured, tracked and benchmarked that provide the opportunity to improve care and acknowledge the impact that nursing has on patient care, work environment, and the community. The Kaiser Permanente and Nursing mission, vision, values and nursing professional and practice model guide our decisions and interactions with everyone we encounter.

Kaiser Permanente's Mission

Our mission is to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve.

Kaiser Permanente's Vision

We are trusted partners in total health, collaborating with people to help them thrive and creating communities that are among the healthiest in the nation.

Nursing Values

- 'Professionalism
- 'Excellence
- 'Patient- and Family-Centric
- 'Teamwork
- 'Integrity
- 'Compassion

KP Shared Agenda: Our Shared Agenda is Kaiser Permanente's 10-year ambition to transform health and health care in America. Together, we can lead the nation in a movement to improve health and health care for all.

We believe that through our Shared Agenda, we can reach our Desired Destination: **Everyone has a right to thrive.**

Over the next 10 years, we'll enable our members and people in our communities to experience more healthy years so they can live the lives they want — to play, to learn, to work, to love ...

Our Beliefs: When we connect around our shared beliefs, we can ignite change. We can spark a movement to transform health and health care in America. We have done great work. We also recognize that more needs to be done to push ourselves and the rest of the industry further to find new solutions to emerging health care challenges

Our Stories: The people of Kaiser Permanente are connected by our mission and a personal calling to help others. Since launching the Shared Agenda, personal storytelling has connected us as a team and inspired us to think differently about our work and how together we can transform health and health care in America.

Nursing at Kaiser Permanente West Los Angeles Medical Center

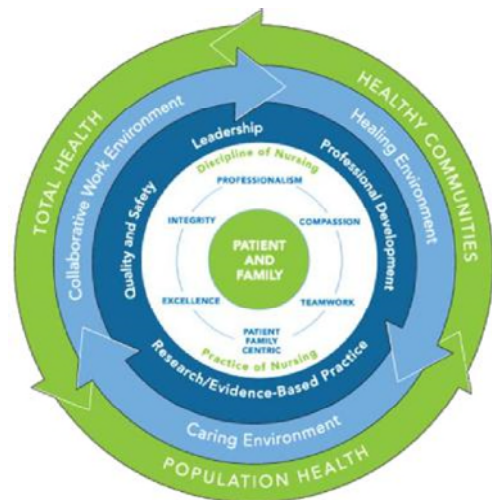
KP Nursing Vision: *As leaders, clinicians, researchers, innovators and scientists, Kaiser Permanente nurses are advancing the delivery of excellent, compassionate care for our members across the continuum, and boldly transforming care to improve the health of our communities and nation.”*

The vision reflects the boldness, innovative spirit and excellence required to shape the health care of the future. To lead health care transformation and reaffirm our commitment to the mission of providing high-quality, affordable health care services and improving the health of our members and the communities we serve, we turn to the KP Nursing Vision Statement as a source of inspiration and vision for the future.

KP Nursing Profession and Practice Model:

At the heart of the Kaiser Permanente Nursing Professional Practice Model is the patient and family. The nurse-patient/family relationship is the cornerstone of nursing practice and leverages the powerful role human relationships play in creating caring and healing environments.

Six nursing values are embedded in our discipline/practice and help to demonstrate what it means to be a Kaiser Permanente nurse. The values that underpin our work are: Professionalism, Patient and Family Centric, Compassion, Teamwork, Excellence, and Integrity. Our practice and the work of nursing are organized by four key pillars: Quality and Safety, Leadership, Professional Development, and Research/Evidence-Based Practice.



This infrastructure establishes practices, processes, and systems through which our vision is achieved. It lays the foundation that makes transformational practice possible and aligns nursing with Kaiser Permanente’s mission.

The model is designed to standardize and move nursing practice forward, and is the framework within which a nursing theory, such as Caring Sciences, can be practiced. It describes how nurses practice, collaborate, communicate, and develop professionally. It is important that each nursing group identify how this model can support their professional practice.

The model’s schematic design demonstrates how each component is aligned and integrated to support nursing practice across the continuum and to meet the needs of our patients and their families. It also demonstrates the contribution nursing makes in fulfilling Kaiser Permanente’s mission and vision.

As you begin your inquiry into the model’s various components, you will find that they have many common touch points. The six nursing values call out those touch points. Each value is further described by principles (essential qualities or elements) and example behaviors (the manner in which we function or perform) in order to further clarify those values that best exemplify Kaiser Permanente nursing.

POPULATION

71

Certified Nursing Assistants



693

Registered Nurses



7

New Grad RNs



Largest Age Cohort



GEN X



Average Nurse Turnover Rate

PROF. DEVELOPMENT

14

Posters & Presentations

51%

Belong to Professional Organizations

3

IRB Studies

EDUCATION

56%

BSN

21%

ADVANCED DEGREES

19%

NATIONALLY CERTIFIED

NURSE RECOGNITIONS

At Kaiser Permanente West Los Angeles, we are fortunate to have a talented and dedicated group of super nurses who frequently go above and beyond to provide world-class service to our members. Our employees are regularly recognized by their managers, colleagues and members for their compassion and excellence through several awards. We are proud to recognize their wonderful work.



One of the ways we recognize them is by participating in the Daisy Award Recognition Program for extraordinary nurses. Our PERC (Patient Experience and Right Committee) Committee showcases and recognizes our Nurses of extraordinary flair through The Daisy Award. Nurse nominations are submitted by patients, peers, and managers. Here are the 9 nurses that received the Daisy Award in 2019.

Vee Wongpoundmas

2South Clinical RN

Carly Weck

FCC Clinical RN

Ittel Unger

Stepdown Clinical RN

David Borowicz

ICU Clinical RN

Lisa Lankhandaeng

2A Clinical RN

Claire Urbano

Peri OP Clinical RN

Keith Kupper

2S Clinical RN

Carmina Durich

NICU Clinical RN

Philip Pingual

SDU Clinical RN

GOOD CATCH NEAR MISSES

Nurses (and Staff) are also recognized for reporting and escalating **Good Catch Near Misses** that are caught before harm reaches a patient. The recognition is done at the monthly Leadership meeting and the individual(s) receive a baseball that is signed by MCAT along with a pin for their badge. The Good Catch Near Miss program is promoted at monthly Executive Walk rounds throughout the medical center.

Gazell Siman

2S Clinical RN

Martin Capulong

2S Clinical RN

Linda Scira

OR Clinical RN

Hae Han

2S Clinical RN

Amanda Kreiger

L&D Clinical RN

Jenny Chen

FCC Clinical RN

FACILITY RECOGNITIONS

List of Awards & Accolades Kaiser Permanente West Los Angeles received in 2019:



2019 Get With The Guidelines – Stroke Gold Plus Quality Achievement Award

Recognition on the Target: Stroke Elite Plus Honor Roll

LA County Emergency Medical Services Primary Stroke Center Recertification



The Joint Commission Disease Specific Care Certification - Sepsis

The Joint Commission Advanced Disease Specific Care Certification – Primary Stroke Center

The Joint Commission Advanced Accreditation



MBSAQIP- Accredited Comprehensive Center



Accredited as Bariatric Center of Excellence



Nursing Education and Consultation program designed to improve geriatric care in healthcare organizations



5 Star CMS rating for Quality and Service



Women's Choice Award for "Best Hospital" - in bariatric care

Nurse Sensitive Indicators

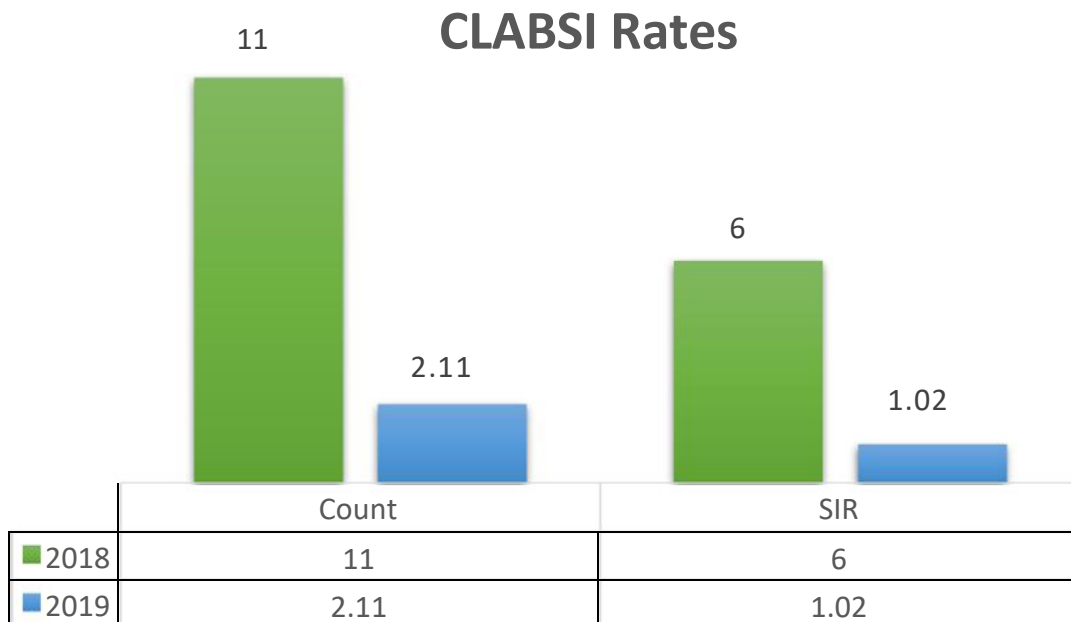
CLABSIs (Central Line Associated Blood Stream Infections)

As nursing professionals, we strive to provide safe, high quality patient care and ensure our patients thrive. In 2018 WLA adult inpatient units recorded a total of 11 CLABSIs. This was unacceptable for the standard we set for ourselves. We developed strategies in 2019 to make sure we reduce harm by preventing CLABSIs.

The nursing division established strong collaboration with the quality department. In February 2020 TIGER TEAMS were created. Educators met weekly with the quality department where they discussed potential fall outs, reason for fall outs in recorded cases, and action steps to prevent the next hospital acquired infection. This information was then brought back to the front-line staff. Charge RNs were empowered to advocate for removal of lines.

Our infection control team provide a comprehensive daily central line and Foley list with recommendations for removal, fall out information, and actions to be taken. Our educators and department administrators provide loop closure by providing additional information in a case by case manner.

In addition to these efforts, quality team representatives also attend our daily nursing operations huddle where lines are discussed with the charge RNs from each unit. As a result of their effective collaboration WLA saw a 45% reduction in count and 51% reduction in the SIR (Standardized Infection Ratio) of CLABSIs in 2019.



EMPIRICAL OUTCOMES

West Los Angeles Sepsis Worksheet

Courtney Lamb, MSN, RN

Background

From Sep '17- Aug '18, sepsis SEP-1 bundle compliance was 66.1%, consistently below our established goal of 70%. The sepsis committee identified several areas for improvement including early recognition, standardized ordering of bundle components, improved MD/RN communication, consistent documentation, and reliable inter-departmental handoff. Nursing leadership partnered with frontline nursing staff to create an electronic worksheet embedded in HealthConnect addressing these concerns. In conjunction with established HealthConnect sepsis triggers, the WLA Sepsis Worksheet allowed nursing to document and ensure completion of each phase of the sepsis care continuum while enhancing real-time ED MD/RN communication. Lastly, the WLA Sepsis Worksheet was established to standardized interdepartmental handoffs to improve overall sepsis care for our patients.

Purpose

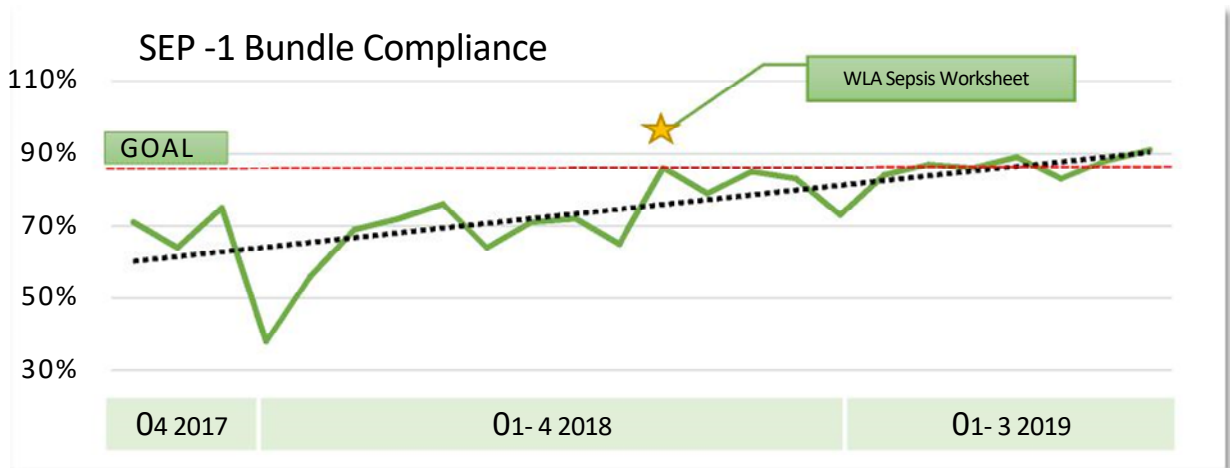
Improve SEP-1 bundle compliance and minimize gaps in sepsis care

Process

- 08/2019 WLA Sepsis Worksheet was created corresponding with established triggers
- 1-on-1 education completed with nursing staff and key points addressed in huddles
- Worksheet implemented on 9/14/2018 with a layout change on 1/21/2019
- Sepsis case study and education completed during Annual Competency Training on 10/2018
- Real-time audits conducted to identify opportunities with compliance
- Feedback provided to nursing staff on identify areas for improvement
- Weekly concurrent audits reviewing completion of sepsis SEP-1 bundle components along with appropriate documentation

Conclusion

After the initiation of the WLA Sepsis Worksheet the previous baseline average of 66.1% was improved to 84.5%.



Future Plans

Add "Inpatient Handoff Tool" to WLA Sepsis Worksheet, Initiate sepsis bedside handoff using Nurse Knowledge Exchange and Create standardized handoff process for Urgent Care sepsis transfers.

EMPIRICAL OUTCOMES

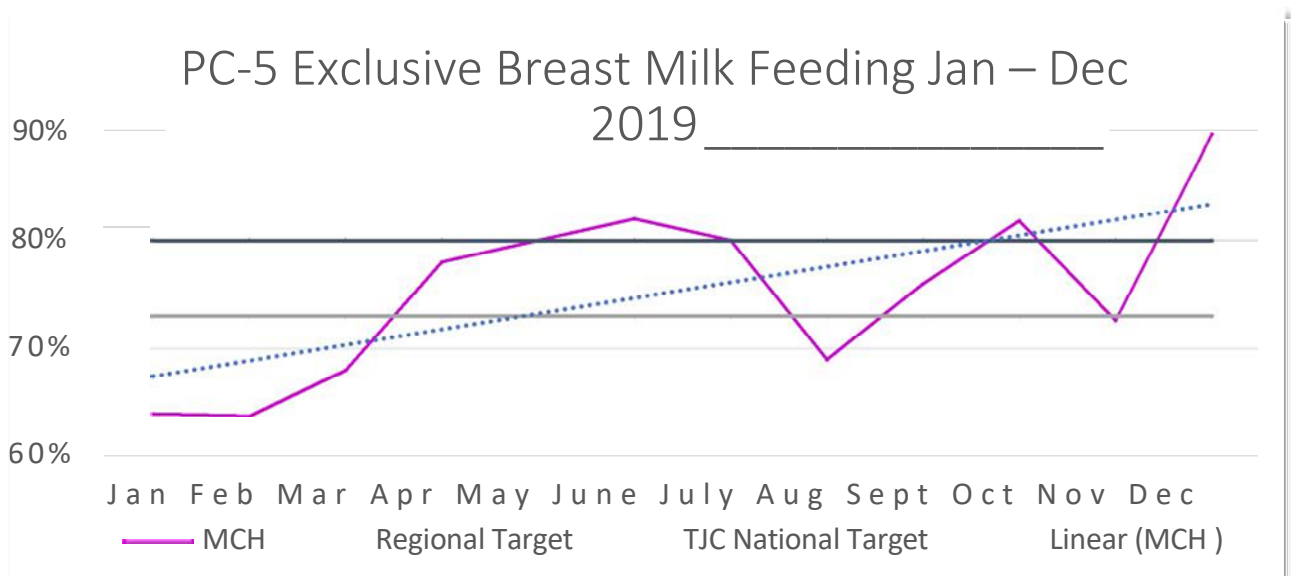
Exclusive Breast Milk Feeding

MCH Unit Nursing Leaders

Exclusive breastfeeding gives babies a healthy start that will last for a lifetime. Kaiser West Los Angeles Maternal and Child Health unit (MCH) lactation program was implemented to give mothers a better understanding of how to properly breastfeed their newborn babies to result in a healthier life. MCH has struggled with communicating education on lactation effectively to their patients which has equated to many challenges contributing to the low PC-5 rates at WLA. We have the highest population of African American Mothers in the region who are known to be one of the most difficult groups for exclusive breastfeeding along with barriers to effective lactation education. With the lack of education in lactation, mothers can face higher health risks than those who do breastfeed. Benefits of having knowledge in exclusive breastfeeding can eliminate health problems to infants in the future. We are always striving to provide the best care and wanted to improve our breastfeeding rates as it is known to increase maternal satisfaction and health benefits to infants.

Even though data shows small but steady improvements to the PC5 rates MCH was struggling to meet their target. Led by MCH Director Sujane Pak the unit started leadership rounding in Q3 of 2018 focusing specifically on our care experience and lactation education. This was one the biggest milestones in our journey to reach the regional and state target. Our DAs rounded daily on mothers educating them on exclusive breastfeeding benefits. The nurse leaders also participated in the Breastfeeding committee to bring back valuable information to the staff and patients. In an effort to increase awareness and education, MCH also trained 3 clinical nurses to become Clinical Lactation Educators (CLEs).

We onboarded excellent lactation consultants who have contributed to the ongoing success of increased breastfeeding rates and also brought the hand expression (HE) initiative to the unit in November 2019 which has already shown remarkable improvements in the rates. After implementation of staff education, visual graphics, maternal education on technique and purpose for HE initiative we noticed an increase in exclusive breastfeeding rates from 80% to 91% over a 4-week period.



LEAD ER SHIP

TRANSFORMATIONAL LEADERSHIP

Every nurse is a leader at Kaiser West Los Angeles, whether in a clinical or an administrative role is guided by the transformational leadership of our Chief Nurse Executive, Nursing Directors, and managers compelled by our vision of extraordinary nursing care, every patient, every time. Our nurses are empowered to cultivate a strong professional practice through strategic planning, collaboration and partnership with labor, physicians and stakeholders, advocacy, and influence. Kaiser Permanente West Los Angeles nurses are visionary and strategic thinkers who transform our hospital and organization to meet future demands of healthcare. They use their professional knowledge to identify opportunities and implement measures to achieve clinical excellence at the bedside and in other care settings.

Grab One, Scan One!

Interprofessional collaboration
Quality Improvement and Care Committee (QICC) & Medication Safety Committee

Barcode identification and scanning ensures that the correct product is given to the correct patient at the correct time and by the correct route. Since the implementation of Bar Code Medication Administration (BCMA) in 2008, Kaiser West Los Angeles made great improvements on medication barcode scanning at the point of bedside administration over the years, from 97% in 2018 to 98.5% in Dec 2019.

In collaboration with QICC, the Kaiser West Los Angeles Medication Safety Committee (MSC) reviews the Top 20 barcode-overridden medications (BCMA) monthly, identifying opportunities, discussing challenges, and sharing ideas to improve medication safety. In early 2018, the “Grab One, Scan One” campaign was developed to bring more awareness of the repeated top 4 most common overrides with 0.9% Sodium Chloride (NS) flushes, NS and Lactated Ringer IV bags, and chlorhexidine wipes. Team huddles along with posting of educational flyers in every inpatient medication room brought awareness and reminded everyone these were medications that required scanning as part of the medication safety check process. As we made improvements with these common medications, others moved up to the top of the list.

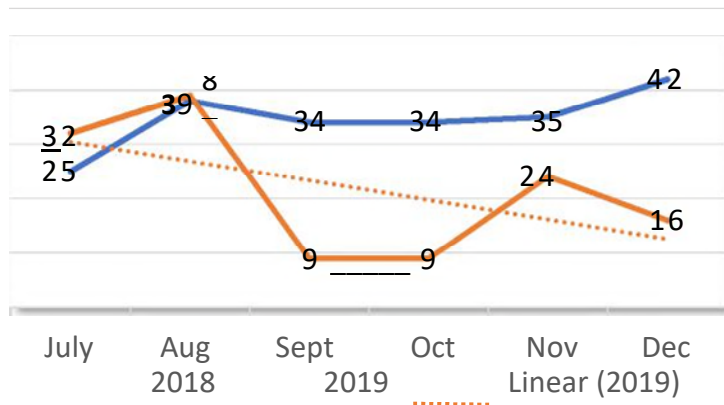


In late 2018, we did a deep dive on Potassium chloride 10 mEq/100 mL premixed IVPB overrides as it was appearing as one of the top 5, with up to 42 overrides in December 2018. What was identified was the order for multiple doses would expire even before the 2nd dose was completed due to extended infusion rates.

At the beginning of 2019, MSC members explored some functionality options that KP HealthConnect had to offer that would help address the issue of expiring orders. The use of “One Time followed by One Time” panel orders was selected. With WLA MSC’s valuable input, the Regional Nurse-Pharmacy approved this new functionality by 3rd quarter 2019 and implementation took effect in Sept 2019.

Reports comparing 2018 BCMA override rates to 2019 show that there has been more than a 60% reduction in barcode overrides for Potassium chloride 10 mEq/100 mL premixed IVPB orders since the KP HealthConnect functionality change took effect.

Number of Potassium chloride 10 mEq/100 mL premixed IVPB BCMA Overrides



2019 Nursing Division Gallery Walk

Towards the end of 2019, nursing division welcomed its new Chief Nurse Executive, Liza Villanueva. Our new CNE has been a part of the Kaiser Permanente family for 19 years. In 2012, Liza became the AMCA Quality & Regulatory Services at Kaiser Permanente West Los Angeles. Liza sets an excellent example for transformational leadership by breaking down barriers, socializing with staff, leaders, and other partners alike. She dedicatedly attends the New Hire Orientation to introduce herself and welcome staff on board. More directly, she also presents our nursing strategic plan and sets expectations and goals for 2020 for new hires and in various staff meetings.

As soon as she came on board, Liza wanted to throw an end of the year celebration for our nursing division. She wanted to showcase the accomplishments of the Nursing Division for 2019 and also identify opportunities for growth. A gallery walk was set up for staff from each service line to view their scorecards. Upon their entry, there was soft music playing in the background, along with a slide show of our nurses' pictures that were taken throughout the year. The new CNE greeted each nurse and took the time to have a conversation with them before starting the gallery walk. The room was set up like an art gallery, where each service lines achievements were highlighted on one side and the opportunities for growth were displayed on the other side. After a brief conversation with the CNE and touring the gallery everyone was served hot delicious breakfast.



TRANSFORMATIONAL LEADERSHIP

Supply Chain and Peri-Op Rapid Improvement Model

Interprofessional Collaboration
Peri-Operative Department and Supply Chain

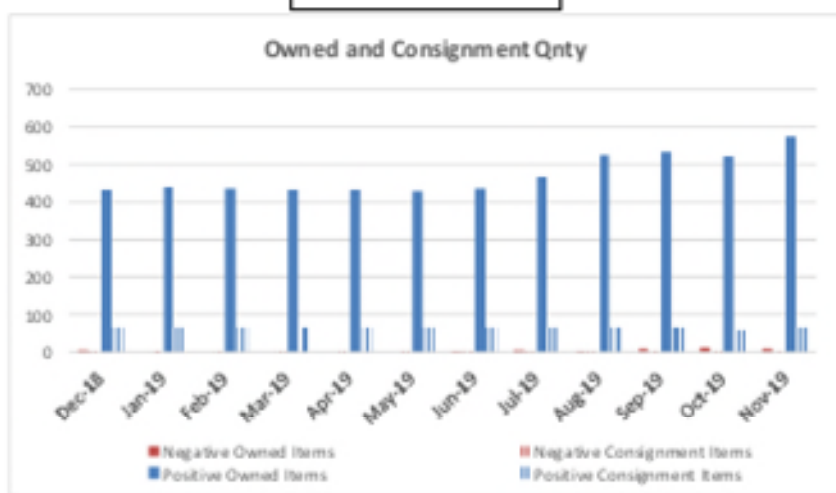
The Supply Chain and Peri-Operative departments collaborated on a process improvement project focused on utilizing the appropriate ordering system/channel for OR supplies to meet Service Level Agreements. Supplies that met a certain criterion were transferred from the OR ordering purview (special orders) to Supply Chain ordering purview (Point of Use System). This allowed the OR team to focus on patient care and the Supply Chain team to adequately order and monitor the supplies.

The Supply Chain and OR teams met every week to review the project status and roadblocks and brainstormed on how to best accomplish the goal. We achieved a greater sense of collaboration, teamwork and trust in the ordering system all in support of patient care.

Objectives:

- To improve efficiency & reduce waste
- Accurate supply/product verification process
- Supplies in single organized location
- Redefine roles/responsibilities to match processes
- Accurate Point of Use (POU)/ OneLink ordering system

WEST OR Tower



EAST OR Tower



The project commenced in July 2019 and concluded in December 2019. The graphs show the increased volume of supplies added to the Supply Chain purview from July to December.

Professional Development



Specialty certified in 2019

Ittel Unger	PCCN Certification
Grace Chiu	RNC - NIC
Windy Steiner	RNC - NIC
Sorah Kim	RNC - NIC
Victoria Stringfellow	RNC - NIC
Angela Zermeno	CNOR
Morgan Rouge	CNOR
Joseph Castillo	RN CPAN
Bonnie Flores	CCRN



Advanced nursing degrees in 2019

Sazia Malek	MSN NP
Christopher Dayoan	MSN NP
Vanessa Fabro	MSN
Suzi Kim	MSN
Benjamin Virojesangthong	MSN
Weave Bishop	MSN
Maggie Rasekhi	APRN
Diana Mejirar	APRN
Melissa McKlein	APRN
Janet Dalling	DNP
Maggie Rasekhi	FNP



Graduated with a BSN in 2019

Caroline Thacker
Martin Capulong
Adelyn Martinez
Chelsey Kinnon
Delia Reyes
Lucrecia Bojorquez
Angel Kao
Kimberley Bianco Parrales

STRUCTURAL EMPOWERMENT

Professional Development

In 2019 our nurse managers and educators have been quite busy putting together various trainings and development programs for our frontline nurses. Here is the brief list of activities.



Use of Simulation in New Nursing Orientation in the Acute Care Setting

Quincyann Tsai, MSN, RN and Liz Pham, BSN, RN

Kaiser Permanente West Los Angeles, Professional Development and Education

Background

- Simulation as an educational tool uses a situation or environment to allow persons to experience representation of a real event.
- Past New Nursing Orientation (NNO) surveys revealed areas of opportunities.

Purpose/Significance

- The low fidelity sim navigates along our three-day nursing orientation program and allowing speakers to speak about our sim patient “Ms. Appleton. Goals are to increase staff engagement, enhance clinical skills, acquire knowledge of Kaiser Permanente Professional Practice model & Team Strategies and Tools to Enhance Performance and Patient Safety (TeamSTEPPS)

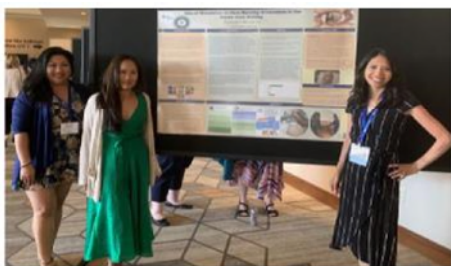


Process

- Framework used: Quality and Safety Education for Nurses (QSEN) and TeamSTEPPS
- “Ms. Appleton” introduced in NKE+
- Debriefing techniques and feedback used to enrich discussions and critical thinking skills and use safe body mechanics and practice of hospital equipment in a risk-free environment.

Conclusion

- SurveyMonkey® suggests that low fidelity simulation encourages engagement and participation in the adult learner:
 - “Ms. Appleton simulation allowed me to tie in all the topics taught together in a fun and safe environment.”
 - “Having the Ms. Appleton simulation all throughout orientation increased my interest.”
 - “First time to have a simulation embedded all throughout the speakers and orientation, really well thought out!”



Alignment with Magnet Journey and Organizational Strategic Priorities

SE9- Simulation in the New Nursing Orientation demonstrates the transition of new graduate nurse and newly hired experienced nurse transition from orientation to their nursing practice environment.

Next Steps

- More nursing education research needs to be conducted on the perceptions of the new generation nursing employee pre and post use of simulation and its impact on their nursing practice environment.
- Presented at American Hospital Association June 2019 and given Best Poster People Choice Award
- Disseminate to more external conferences and spreading to other KP medical centers.

STRUCTURAL EMPOWERMENT

Nurses Week Celebrations

On the week of May 6 through 12th, we had the opportunity to celebrate our wonderful Nurses by highlighting the diverse ways in which they work to improve the overall healthcare of our members here at Kaiser West LA. We wanted our nurses to know that we appreciate them for their contributions and commitments to such a vital role in the healthcare system. The theme for our Nurses week was captured by the hashtag #SpreadHappiness, with “We Love Our Super Nurses” displayed on the back of our shirts.



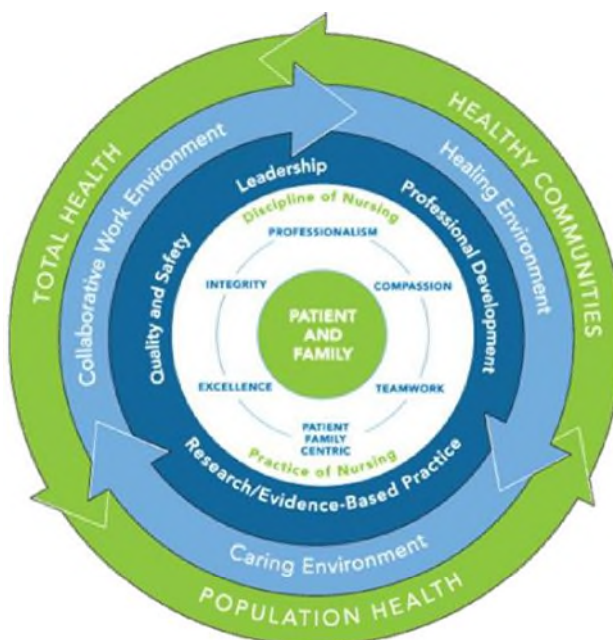
To start the week off, Nursing Leaders devotedly set their mornings aside to embellish our second-floor kitchen to make it a fun and festive Taco Tuesday. On the second day of Nurses week, Nursing Leadership worked another long shift to create the theme of ‘Carnival Day’, where chili was served with another endless servings of toppings, popcorn, cotton candy, and fun music.

May 7th was the grand gesture of Nurses week. Nursing schools came from across the country to give them a glimpse of what furthering their education will look like. In addition, we had our nurses showcasing their accomplishments in their committees such as NKIC, PERC, NDAC, and QICC.

Our Nursing Leaders showed their dancing skills by performing a Bollywood dance during the talent show. After showcasing many talents throughout KPWLA, it was time for us to recognize the talent, ambitions, and dedication of some of our RNS. First our SVP Georgina Garcia, CEO Eugene Cho, and CNO Claudia Dalziel presented staff with a few words of thankfulness. Following, was our CNE Goni Naidoo, who presented awards for the Nurse of the Year (Hae Han), and Honorary Nurse of the year (Paige Lin), and Extreme Nurse Leader award (Elizabeth Carreon).

On the last day of Nurses week, the week was settled down by doing a ‘choo choo train’ of health goodies. Nursing Leaders went around to wish all of the nurses a ‘Happy Nurses week’ and to give them a health snack to offset all of the delicious goodies that were given earlier in the week.





EXEMPLARY PROFESSIONAL PRACTICE

As a nurse, you are one of our strongest advocates for quality care and patient safety. And we salute your pride in-and dedication to-the practice of nursing. We want you to have every possible advantage in ensuring the best possible care for our members. The Inpatient Nursing Quality Indicators Program and the Inpatient Medication Improvement initiatives are examples of our commitment to quality and patient safety. By promoting safety in the workplace, we generate better care while reinforcing our sense of teamwork. And that gives us all something to be proud of.

We also know that research has found a direct correlation between care quality and service quality. Nurses have more meaningful interactions, more frequently, and for longer periods of time than any other constituency in health care and as such have the greatest impact on the patient's service experience.

Nurses at Kaiser Permanente practice all three levels of care. The first level of care is competence. The second level of care is courtesy. Finally, there is the third level of caring, compassion. Compassion goes beyond common courtesy; it means attending to the patient in a way that demonstrates genuine concern. Authentic compassion and caring about each patient on a personal level is the most evident form of personal behavior in health care and our nurses are at the heart of care quality, patient safety, and service excellence at Kaiser Permanente.

EXEMPLARY PROFESSIONAL PRACTICE

Embracing the Kaiser Permanente Nursing Values and PPM

Maria Masangkay, MSN, RN, CNML, Quincy Tsai, MSN, RN, Bonnie Flores, MSN, RN-BC, ACCNS-AG, CCRN
New Knowledge and Innovation Committee (NKIC)

Professional Development and Leadership and EBP, Research, and Innovation

Background

Embracing our PPM and Nursing Values was chosen because NKIC wants all our RNs to understand what guides our practice. At the heart of our PPM is the patient and the family. In doing so, how we as KP nurses have a role in creating a caring and healing environment through understanding our PPM and Nursing Values.

Purpose/Significance

A component of Magnet is for our nurses to know their Professional Practice Model (PPM) and Nursing Values. NKIC identified there was a lack of knowledge in this area, so wanted to come up with an interactive way for RNs to understand our PPM and how our nursing values are embedded into the PPM

Process

Inspired by the 2017 ANCC Magnet Conference and KPSB, NKIC created a tabletop escape room activity for Nurse's Week. The booth consisted of 5 activities that took about 10-15 minutes to complete. In addition, to capture more RNs not able to attend the festivities, NKIC did an escape room road show.

Task #1
You demonstrate this at the beginning, end, and during any handoff.

Task #2
Our practice and work of nursing are organized by four key pillars. Which pillar will supports practice, innovation, and new knowledge?

Task #3
Based on all the evidence gathered, what do all these people have in common.

Task #4
Build puzzle in this section

Task #5
Please see committee member for further instructions

Task #6
Please go to committee member when complete

Conclusion

Majority of the staff that participated in the table top escape room and road show didn't understand the significance of our PPM. Many didn't know we had a PPM, despite having the wheel attached to their badges.



Alignment / Future Plans

This project didn't influence the bottom line but helped our nurses understand the value and vision in being a KP Nurse. Our practice revolves around the patient and family and we create every touch point in their stay. Our PPM embodies our values which guides their professional practice. Our future steps are to transform this table top escape room into an activity sheet for road shows.

TRANSGENDER CARE – THRIVE **YOUR WAY**

2A Med Surg Unit

In 2017, Kaiser Permanente West Los Angeles became the first Southern California hospital to offer gender-confirming surgeries. This Transgender Program initially offered vaginoplasty and labiaplasty surgeries for transgender women. In 2019, phalloplasty surgeries became available for transgender men.

Since the beginning of the Transgender Program, our nurses and physicians have gone through extensive training and education to be culturally competent and also provide excellent care to this population. According to a report of the National Transgender Discrimination Survey by the National Gay and Lesbian Task Force and the National Center for Transgender Equality, survey participants reported they postponed medical care due to discrimination or inability to afford it. 28% of respondents were subjected to harassment in the medical setting and half of the respondents reported having to teach their medical providers about transgender care.

Our Med-Surg Unit (2A) wanted to make a difference. Nurses went through training that included education about how to care for our patients both physically and emotionally. Plastic surgeons educated them about the types of surgeries offered and what is needed to care for our patients after the surgery is complete. This included what to expect after surgery, what to report to doctors, and how to promote healing.

Nurses worked with social workers to learn about the psychosocial needs of our patients and how we can best support them emotionally during this crucial time of transitioning. Our nurses practice cultural competence by using the patient’s preferred terminology/pronoun, allowing the patient to share their story without referring to their lives prior to transitioning, and being sensitive to possible genital dysphoria and assisting patients in their journey to acceptance.

West Los Angeles Medical Center is proud to show outstanding patient satisfaction results as a result of our efforts to provide quality care to our transgender patients.

Transgender (Women) Patient Satisfaction Survey Results	
Patients Surveyed	Avg. Satisfaction
39	98%

The nursing and assisting staff were outstanding, very respectful and caring.

Overall Question Results	
1. Supported by Surgeon	98%
2. Supported by Therapist	99%
3. Housekeeping and staff, treat with courtesy, compassion and respect.	97%
4. Physicians and staff address with preferred pronoun	97%
5. Understood surgery and in control of decisions taken	96%
6. Suitable pain control following surgery	97%
7. Sufficient instructions on dilation	99%
8. Dilation education private and respectful	99%
9. Prepared to go home	95%

Everyone in the team was great.

I would like to thank all the nurses/staff. Their attentiveness and caring personality really made my stay pleasant

MY BIRTH JOURNEY at KAISER PERMANENTE WEST LOS ANGELES

MCH Unit Based Team

The care experience scores in our Family Centered Care (FCC) unit was consistently low towards the end of 2018. In order to enhance our patient’s experience and improve our scores our Maternal & Child Health (MCH) UBT members decided it was time to change the way they did rounding. To facilitate rounding, the unit staff, with the support of their leaders came up with a creative solution to tackle all aspects of their care experience ratings and created the “MY BIRTH JOURNEY AT KP WLA” binder. The binder contains the Medication Side Effect trifold, Getting to Know You (GTKY) form, Thank You cards, education materials, and Help at Home resources among others. The team took the binder another step forward to personalize it for each mother and their new born – the front cover of the binder, has a clear pocket that will contain a picture of the family & baby taken after delivery at the bedside.



The binder became an integral part of MCHs daily patient rounding. The team knew that the key to their success would be consistency in messaging and created scripts for rounding. Rounding on the patients, started with managers initially and later the Charge and Relief Charge Nurses were trained as well. During daily huddles, Patient Care Experience scores were shared to encourage and acknowledge all nurses and their excellent nursing care. Staff were held accountable using a rounding log that was maintained by the staff and management.



As a result of these efforts, the MCH unit has seen outstanding improvements in their Care Experience scores and was awarded the “Most Improved Performance” Award which recognizes improved performance on, ‘RN explained things understandably’ for Q3-2019 by the SCAL UBT Care Experience Reward & Recognition Program. **(94.6/5 Star rating)**



The team continues to monitor their care experience scores and in the future, plans to share their experience with other medical centers.



Management Co Lead: Marie Viramontes
Labor Co Leads: Lucrecia Bojorquez, Cynthia Ekpo & Tammy Isaac
Members:
 Emily Mmeje
 Mercy Wafula
 Alma Avelar
 Bilqees Asunramu
 Jacky Alvarado
 Oak Kim
 Diana Escolero
 Arleena Iwane
 Ashley Burris

I KNOW MY MEDICATION SIDE EFFECTS

Stepdown Unit Based Team

The What

The overall goal of the project is to increase patient knowledge and understanding of possible medication side effects leading to an improvement in compliance to medication regimen.

The Why

Medication Side Effects (MSE) HCAPHS scores in Stepdown unit in the beginning of 2019 was very low. In order to provide safe patient care throughout the care continuum and empower patients and families to better understand their medication regimen Stepdown frontline RN's felt it was important to improve and innovate education on medication side effects. The project was developed and implemented by clinical RNs of the unit that advocated for the needs of their patients.

The How

Upon admission to the unit patient receives a bright colored (yellow) informational folder and trifold that contains education on medications patient is currently on and their possible side effects. Primary RN utilized "ask 3 teach 3" method to educate patients/family on MSE. Charge RN does daily rounds after primary RN education and rewards patient/family that can verbalize side effects of one medication with "I know my Medication Side Effects" branded pen/pill dispensers. On discharge patient/family who were able to communicate possible MSE were rewarded with "I know my MSE" water bottle pill dispenser.

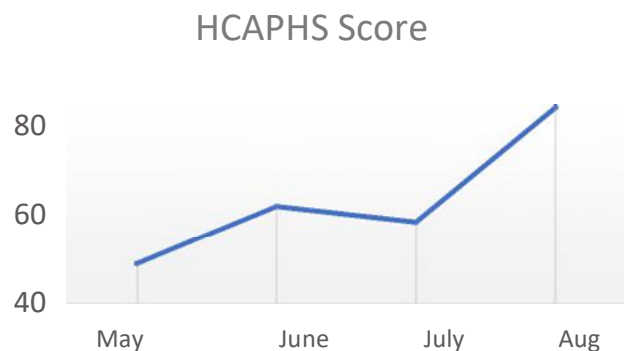
Results

HCAHPS star rating under medical communication - 'medication side effects described' score was 1-2 star from Jan to March 2019 which was the pre-implementation phase. "I know my MSE" project was implemented in April and evolved through rapid improvement model until July 2019. In August 2019, stepdown unit achieved the highest score they have in the past 12 months in MSE category- a 4 star rating. Patient satisfaction scores are continuing to improve in the unit and the initiative is being adopted in other units throughout the medical center. Comment cards show that patients are feeling empowered and more involved in their care. Frontline nurses feel empowered to create change and implement performance improvement projects essential to provide extraordinary care every patient every time.

Management Co Lead: Tierra Norman, Bridget Williams

Labor Co Leads: Gianna Valenzuela and Sherry Echano

Members: Patty Pascual, Camille Diaz, Saba Tesfaye, Veronica Islas, Ana Razon, Artuto Lasquete, Janine Eiley, Abigail Padin, Lisa Barrett, Sonia Flores, and Mattie Ruffin.



SEPSIS NKE HAND OFF

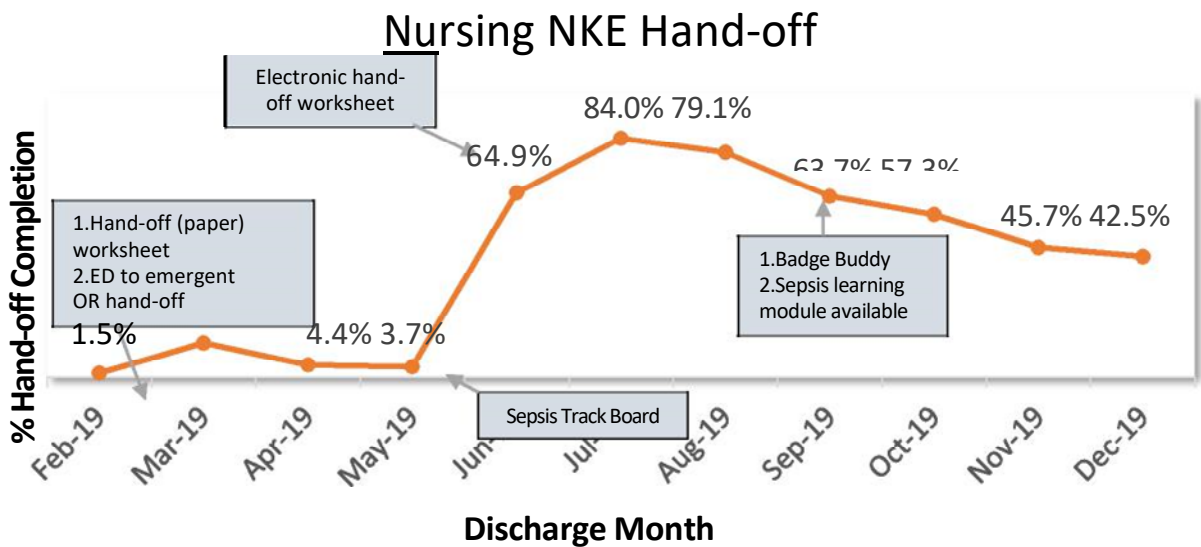
Performance Improvement – Quality Management

Background

The process of hand-off from the emergency department to the inpatient units for Sepsis patients in the beginning of 2019 was through a paper worksheet. Tracking of the NKE hand off showed an average of 5.4% completion rate in the first four months.

Action Taken

An electronic sepsis worksheet tool was introduced in June 2019 to enhance Nurse Knowledge Exchange (NKE). This resulted in variation outside control limits with a sharp increase of 61.2% difference, which may be an indication of favorable upward trend.



Conclusion

A sharp upward trend over a 4-month period averaging 73% resulted after the change, in contrast to 5.4% average over 4 months before the change. However, more quantitative data points are required to understand if the variation indicates a favorable trend overtime, given that the 2019 YTD average is only at 45.6%.

Next Steps

1. Continue to utilize the ED Sepsis Track Board tool which indicates what measures are still outstanding in order to support timeliness of sepsis intervention(s).
2. Continue Nurse Knowledge Exchange (NKE) between ED nurse and floor nurse utilizing electronic sepsis hand-off worksheet tool.
3. Continue to monitor and report fallouts to ED Nursing Leadership to address through nurse 1:1 education and coaching.
4. Continue efforts to improve daily sepsis clarity report to include sepsis NKE data pull.
5. Continue to monitor data and report performance to the Sepsis Steering Committee.

NEW KNOWLEDGE, INNOVATION, & IMPROVEMENTS

ED FLUBALL

Emergency Department Leadership and Unit Based Team

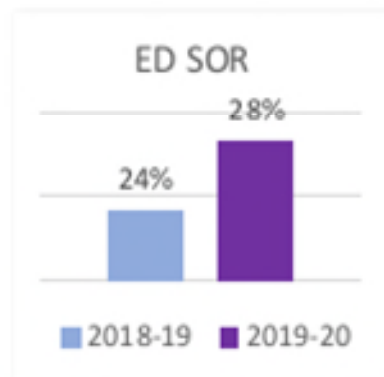


FluBall originated through a brainstorming session with Clinical Director Sarah Poetter and one of our front-line nurses who were discussing ways to motivate staff to give the flu shot. Thinking that a little *healthy* competition always gets people motivated and with football season looming, the spark of **FluBall** was ignited.

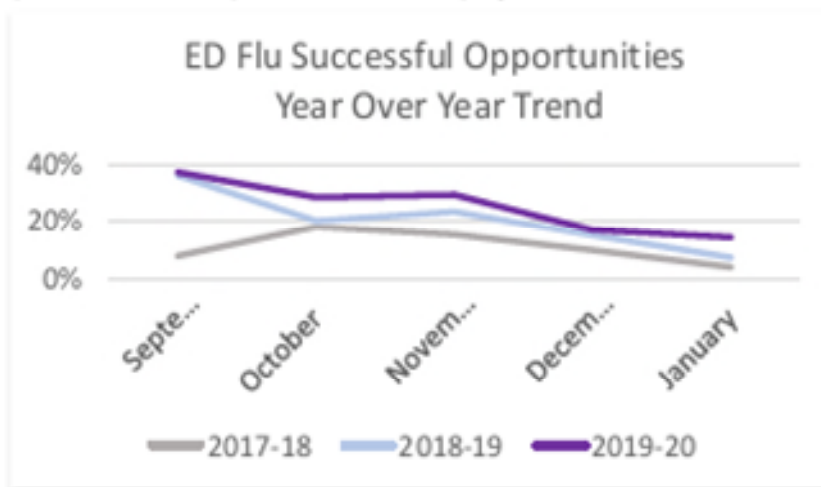
We quickly developed rules for the game, designed our giant **FluBall** field and started notifying staff of what was coming. 12 ED Leadership Members were randomly assigned teams of RNs (Players) – ERA (Asst Coaches) – Clerks (Cheerleaders) – MDs (General Managers).

We publicized FluBall through our shift huddles, which is also where the FluBall field was posted, as well as online communications (Shifthound, e-mail). Each Friday, the total number of flu shots given by each nurse/team was tallied and converted to Touchdowns (10 flu shots = 1 Touchdown). The teams' helmets progressed weekly on our FluBall Field, with MVPs receiving special recognition. Coaches determined how to incentivize/reward their teams via small tokens/recognition.

The first year of FluBall ran from Sept 1 – Dec 31. The month of December was designated as the Play-offs with the Top 4 teams advancing. From those four, the final Top 2 teams advanced to the **SUPER FLU-PERBOWL**, with one team taking the Championship (**Sarah's Bengals**). Each team member from the Championship team received a prize, with the Season MVP (**Jorge Valencia**) receiving a larger gift. The graphs show how impactful our FluBall project has been.



SOR: Successful Opportunity Rate



COMPASSION FATIGUE AMONG NURSES WEST LOS ANGELES MEDICAL CENTER

Lina Najib Kawar, PhD, RN, CNS and Quincyann Tsai, MSN, RN

Introduction

Compassion fatigue (CF) among clinical nurses is on the rise. This era of patient's complexity at the regular medical surgical unit is comparable to the ICU patients' condition in the 1970s, which may contribute to provide compassionate, nurturing care.

Background

- Compassion fatigue is defined as emotional exhaustion due to severe and prolonged interaction with clients, use of self, and exposure to stress (Coetzee et al., 2010).
- The literature revealed that CF has sudden onset compared to a gradual overtime appearance of burnout (BO) (Hunsaker et al., 2015).
- It was prevalent, especially among young inexperienced clinical nurses who are challenged to learn new information and development (Sung et al., 2012).
- CF is different than BO and has unique symptoms, triggers, and risk factors.
- CS is related to the positive aspect of the nursing profession and gained fulfillment of helping (Hunsaker et al., 2015).



Purpose

The purpose of this study is to describe the self-reported prevalence of CF, burnout (BO), and compassion satisfaction (CS) among clinical nurses in Southern California Kaiser Permanente and examine the relationship between demographics CF, BO, and CS.

Methods

Design: Multi-site mixed methods exploratory descriptive cross-sectional correlational study.

Sample Size: All KP in patient registered nurses were invited to participate in the study. There were **n= 106** inpatient KP West Los Angeles medical center clinical nurses, who completed the survey.

Data Collection: The survey will be electronically accessed through the web-based survey provider company named 'Survey Monkey' over a 2-month survey period.

Procedure:

- All in patient registered nurses at KP West Los Angeles medical center were invited to participate in this study via flyers, email, and verbal presentation.
- Upon completing and submitting the electronic questionnaire consent of participating in the study will be confirmed.
- Aggregated data will be downloaded from Survey Monkey.

Tools:

1. Professional Quality of Life Scale (ProQOL R-IV) (Stamm, 2010).
2. Three subscales of the Practice Environment Scale of the Nursing Work Index (PES-NWI), an organizational measure.

COMPASSION FATIGUE AMONG NURSES WEST LOS ANGELES MEDICAL CENTER

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Results

- Of the total participants 106 nurses were from WLAMC at over 21% representation.
- Age in years M 39 (SD 10.9, range= 24-65); years of experience M 12 (SD 10.6, range= 0-42)
- CF M= 22.63, SD = 5.39; BO M=22.35, SD = 5.71; CS M = 40.94, SD = 5.45
- There were significant intermediate correlations r between CF & BO positive $r = .62$; CF & CS negative $r = -.44$; and negative strong r between BO & CS $r = -.70$ at the 0.01 (2-tailed).
- For WLAMC clinical nurses about 25.5% are considered at risk for the CF and 25.5% are at risk of BO, however 32% seem to show CS. The subscales T-scores were for the level of CF 49.96 (SD=9.75), BO 49.6 (SD=10.38), and CS 51.68 (SD=9.52) among WLAMC clinical nurses, sequentially. According to the ProQol tool cut off criteria, 47.2% of the clinical nurses were in the average level of CF (score 43.3857.86), 42.5% of those nurses were in the average level of BO (scores 41.69-58.06), and 48.1% of the sample were in the average level of CS (scores 46.55-58.76).
- Differences between and among the groups yield significant results between position (charge versus clinical nurses) on CS ($F= 5.73$, $p=.018$) and length at WLAMC and CF ($F=4.240$ $p=.038$). No significant results on education, years as RN or the facility, employment status, shift length or type, specialty, or position on CF, BO, and CS were found.

Conclusions

- WLAMC nurses had low to average level of CF and BO and average level of SC.
- Charge nurses exhibited higher CS levels compared to clinical nurses.
- Shorter time at WLAMC contribute to CF among the clinical nurses.

Recommendations

- Encourage management in building supportive environment to mitigate CF and BO.
- Implement strategies that are available in the literature and are suitable for WLAMC culture. This might mitigate the occurrence of CF and BO.
- Investigate what strategies can be offered to support and rejuvenate the relief charge nurses.
- Study what tactics nurses who worked at WLAMC for longer time can offer to other nurses to combat CF and BO.
- Further studies to investigate coping strategies that might decrease CF and BO could be applied.
- Continue the research to find the factors contributing to the charge nurses CS.



BUILDING THE PROFESSIONAL NURSE FOR OUR GERIATRIC POPULATION: AN INNOVATION

Quincynn Tsai, MSN, RN, Maria Masangkay, MSN, RN, CNML, May Barraquias, BSN, RN, Rebecca Cimino, ADN, RN-BC, Sherry Echano, BSN, RN-BC, PHN, Poliana Elliott, BSN, RN-BC, Jamie Fajardo, MSN, RN, CNL, PHN, Bonnie Flores, MSN, RN-BC, ACCNS-AG, CCRN, Jocelyn Gonzales, MSN, RN-BC, CMSRN, Teresa Poy, RN-BC, CCRN, Rowena Pineda BSN RN, Maggie Rasekhi, BSN, RN-BC, Phoebedel C. Reyes, BSN, RN-BC, PHN, Michelle Suico, BSN, RN, PHN, CMSRN, Ittel Unger BSN, RN-BC

Introduction


- Kaiser Permanente West Los Angeles (KPWLA) is the third highest in all of Southern California KP medical centers that have a rise of geriatric patients being admitted in the acute care setting.
- The Nurse’s Improving Care for Healthsystems Elders (NICHE) committee is a nursing education and geriatric resource nurse (GRN) consultation that provides clinician expertise and patient preferences and values to make healthcare decisions for the older adult population developed and revamped to help address these unique needs of older populations at WLA.
- The NICHE committee designed an educational refresher course training on the use of The Hester Davis (HD) Fall prevention program to address the high incidence of falls.
- The NICHE committee identified that there was a lack of adherence and knowledge of the HD tool based on GRN rounding and HD audit tool.

Background

- The NICHE program at KPWLA provides resources for nursing and interdisciplinary teams to achieve the organizational goals for the care of our older patients.
- NICHE Committee used evidenced based care to older adult patients, which translates into better healthcare outcomes for our older adult patients who may have complex conditions and are a vulnerable population.
- A unique role of the geriatric resource nurse ensured that upon rounding with their peers at the bedside Fullmer’s “SPICES” framework assessment tool for the older adults were being demonstrated as standardized geriatric nursing excellence care.
- The NICHE committee created an electronic work bench that inclusion criteria’s that were high risk triggers for the older adult patient to create a round list.

Purpose and Goals

- The KPWLA NICHE Committee composed of specialty certified Geriatric Resource Nurses (GRNs) took on a leadership role to develop an educational curriculum to help further engage frontline clinical nurses.
- The purpose of the educational program was to provide peer-to-peer teach-back from the weekly HD fall audit tool.
- The goal of the educational program was to increase the knowledge of the clinical nurse on the use of all the elements of HD fall prevention tool.



SPICES

Sleep	<ul style="list-style-type: none"> • Ask about sleep. • Observe sleep patterns.
Problems with eating or feeding	<ul style="list-style-type: none"> • Evaluate appetite and food preferences. • Evaluate ability to feed self.
Incontinence	<ul style="list-style-type: none"> • Observe voiding and bowel patterns. • Evaluate for causes of incontinence.
Confusion	<ul style="list-style-type: none"> • Establish baseline cognitive status. • Monitor for cognitive changes.
Evidence of falls	<ul style="list-style-type: none"> • Ask about a history of falls. • Evaluate for additional risk factors.
Skin breakdown	<ul style="list-style-type: none"> • Identify any skin breakdown. • Evaluate risk factors for skin breakdown.

Fullmer, T. (n.d.). Fullmer SPICES: An overall assessment tool for older adults. Retrieved from <https://consulgeri.org/try-this/general-assessment/issue-1>

Fullmer, T. (2007). How to try this Fullmer SPICES. *American Journal of Nursing*, 107(10), p. 40-41. doi:10.1097/01NAJ.0000292197.74076.e1

BUILDING THE PROFESSIONAL NURSE FOR OUR GERIATRIC POPULATION: AN INNOVATION

Process

'A Flyer was posted on units and clinical staff were scheduled by their managers.

'The educational curriculum was composed of low fidelity case studies, story- telling, and the use of a game-based learning platform known as *Kahoot!* as a method to assess knowledge learned.

'The HD refresher course conducted five-day trainings with two sessions each day over the course of three months.

'At completion of the HD refresher training, the attendees were given an optional survey using Survey Monkey.

'Survey was 5-point Likert type scale questions and open-ended comments from survey monkey can compiled from survey to determine themes.

HD Falls Program Audit (Intervention Documentation)										DATE				
Unit	<input type="checkbox"/> 2A	<input type="checkbox"/> 2S	<input type="checkbox"/> ICU	<input type="checkbox"/> SDU	MRN		MRN		MRN		MRN		MRN	
					Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
Was the HDS Score correct?														
Was patient wearing Yellow Fall ID?														
Was the Care Plan individualized?														
Correct fall sign outside the room?														
Patient/Family Education Documented?														
HDS Fall Score														
Fall Risk Level					<input type="checkbox"/> High <input type="checkbox"/> Moderate and scored 2 or greater in MOBILITY or MENTAL STATUS <input type="checkbox"/> Moderate <input type="checkbox"/> Low	<input type="checkbox"/> High <input type="checkbox"/> Moderate and scored 2 or greater in MOBILITY or MENTAL STATUS <input type="checkbox"/> Moderate <input type="checkbox"/> Low	<input type="checkbox"/> High <input type="checkbox"/> Moderate and scored 2 or greater in MOBILITY or MENTAL STATUS <input type="checkbox"/> Moderate <input type="checkbox"/> Low	<input type="checkbox"/> High <input type="checkbox"/> Moderate and scored 2 or greater in MOBILITY or MENTAL STATUS <input type="checkbox"/> Moderate <input type="checkbox"/> Low	<input type="checkbox"/> High <input type="checkbox"/> Moderate and scored 2 or greater in MOBILITY or MENTAL STATUS <input type="checkbox"/> Moderate <input type="checkbox"/> Low	<input type="checkbox"/> High <input type="checkbox"/> Moderate and scored 2 or greater in MOBILITY or MENTAL STATUS <input type="checkbox"/> Moderate <input type="checkbox"/> Low	<input type="checkbox"/> High <input type="checkbox"/> Moderate and scored 2 or greater in MOBILITY or MENTAL STATUS <input type="checkbox"/> Moderate <input type="checkbox"/> Low			
Mats in place					<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA - patient risk LOW or MODERATE wo 2+ mobility or mental risk factors	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA - patient risk LOW or MODERATE wo 2+ mobility or mental risk factors	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA - patient risk LOW or MODERATE wo 2+ mobility or mental risk factors	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA - patient risk LOW or MODERATE wo 2+ mobility or mental risk factors	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA - patient risk LOW or MODERATE wo 2+ mobility or mental risk factors	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA - patient risk LOW or MODERATE wo 2+ mobility or mental risk factors	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA - patient risk LOW or MODERATE wo 2+ mobility or mental risk factors			
LOW RISK score of ≥ 7					MODERATE RISK Score of ≥ 11 AND \geq ON Mobility or Mental Status					HIGH RISK Score > 15				

Results

- A total of 228 staff nurses that attended from adult in-patient services.
- 136 nurses completed the survey and common theme from comment section of survey revealed that staff needed to choose all the elements of the HD tool and the need for the tool to be updated every shift.
- The most significant learning based on the comments were the importance of medications that impact cardiovascular, central nervous system, chemo agents, medications given as needed and within 24 hours was perceived to be a new learning for their nursing practice.

Conclusion

- Clinical nurses revealed a 80% increase in compliance to the HD fall tool in the electronic medical record based on HD audit tools.
- The use of Benzodiazepines also decreased with the aid of the breakout session on medications during the HD training.
- The creation of the HD training evolved the creation of badge which showed the common medications used at WLA and would impact the HD fall score.
- HD training allowed GRNs to present evidenced based practices on handling geriatric delirium and de-escalating techniques on physical combativeness and emotional behaviors.

NURSE POSTER/PODIUM PRESENTATIONS

Quincyann Tsai, MSN, RN

2019 National Nursing Leadership Conference:
Culture of Nursing Excellence: Celebrating our Legacy.
Creating Our Future- May 14 and 15, 2019
*Podium Presentation: Nursing Research &
Evidence-Based Practice at the Medical Centers*

Lina Kawar, RN, PhD, CNS, and Quincyann Tsai, MSN, RN

2019 National Nursing Leadership Conference:
Culture of Nursing Excellence: Celebrating our Legacy.
Creating Our Future- May 14 and 15, 2019
*Poster Presentation: Compassion Fatigue Among
Nurses In The Acute Care Setting*

Quincyann Tsai, MSN, RN and Liz Pham, BSN, RN, Maria Masangkay MSN, RN, CNML

2019 American Healthcare Association Team Training
National Conference June 3-5, 2019
*Poster Presentation: Use of Simulation in New Nursing
Orientation in the Acute Care Setting*
Awarded- People Choice Best Poster

Rowena Maria Pineda, BSN, RN

2019 Sigma SoCal Odyssey Research Conference –
October 10 and 11, 2019
*Poster Presentation: Building The Professional Nurse For
the Geriatric Population*

Quincyann Tsai, MSN, RN

2019 Sigma SoCal Odyssey Research Conference –
October 10 and 11, 2019
*Podium Presentation: Mentorship of Nursing Research
Committee Chairs*

Quincyann Tsai, MSN, RN and Lina Kawar, RN, PhD, CNS

2019 Sigma SoCal Odyssey Research Conference
– October 10 and 11, 2019
*Poster Presentation: Compassion Fatigue Among
Nurses In The Acute Care Setting*

Quincyann Tsai, MSN, RN and Maria Masangkay MSN, RN, CNML

Call to Excellence; KP Magnet Forum- October 18,
2019 *Podium Presentation: Use of Simulation in New
Nursing Orientation*

Bonnie Flores, MSN, RN-BC, ACCNS-AG, CCRN, Maria Masangkay MSN, RN, CNML, and Quincyann Tsai, MSN, RN

Call to Excellence; KP Magnet Forum- October 18,
2019 *Podium Presentation: Embracing the KP Nursing
Values and PPM*

Quincyann Tsai, MSN, RN and Maria Masangkay MSN, RN, CNML

Call to Excellence; KP Magnet Forum- October 18,
2019 *Poster Presentation: Building The Professional
Nurse For the Geriatric Population*

Courtney Lamb,

Call to Excellence; KP Magnet Forum- October 18, 2019
Poster Presentation: WLA Sepsis Worksheet

Keith Kupper, RN, BSN and, Mariel Dumaguin-Velarde, RN, BS

Call to Excellence KP Magnet Forum- October 18, 2019
Poster Presentation: 2018 Fall Prevention Project

Suzi Kim, Charge RN and Liz Carreon, Director of Nursing

Call to Excellence KP Magnet Forum- October 18, 2019
*Poster Presentation: The Care of our Transgender
Population*

Lina Kawar, RN, PhD, CNS, and Quincyann Tsai, MSN, RN

Call to Excellence KP Magnet Forum- October 18, 2019
*Poster Presentation: Compassion Fatigue Among
Nurses In The Acute Care Setting*

Bonnie Flores, MSN, RN-BC, ACCNS-AG, CCRN, Kristina Santos, BSN, Dinah Perez, BSN, Lucrecia Bojorquez, BSN, Lutchie Divinagracia, Quincyann Tsai, MSN, Maria Masangkay, MSN, RN, CNML NKIC members

2019 KP Leadership Meeting- July 19, 2019
*KP Southern Nursing Research – Awarded Nurse
Knowledge and Innovation Committee (NKIC)- Plaque
for continued Programmatic Nursing Research 2019-
2021*

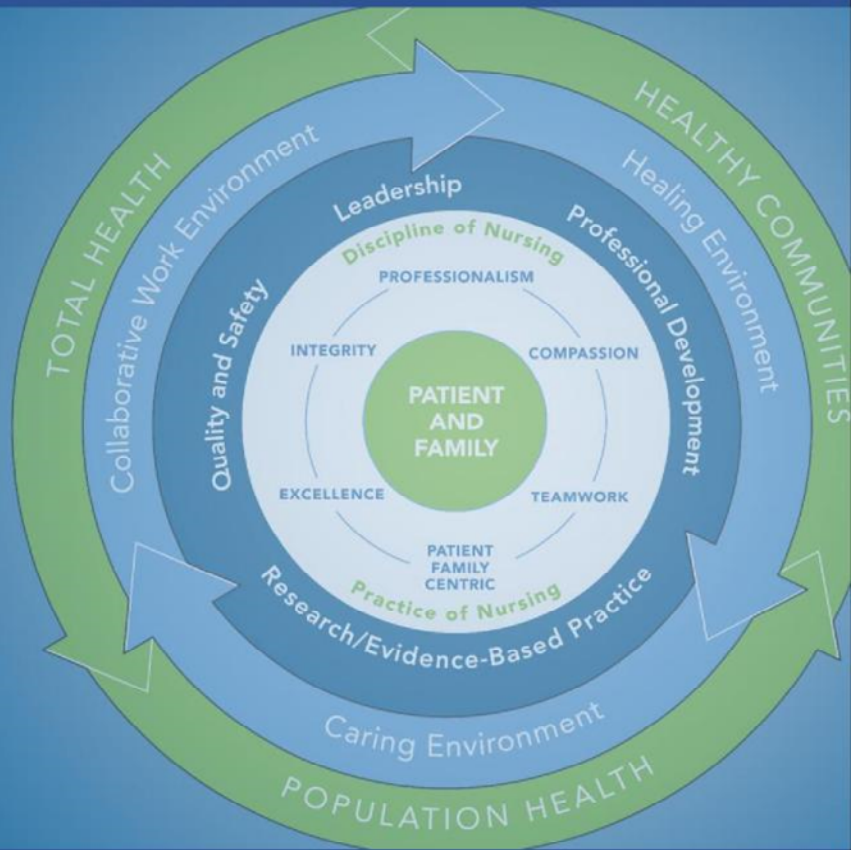
Very few organizations have the credibility and resources to transform health and health care in America. Kaiser Permanente has made that declaration and now we must focus on making it a reality, because “everyone has a right to thrive.” These aren’t just words to us. This is our priority on behalf of millions of Americans. We are learning and adapting together as we deliver on our Shared Agenda to create more healthy years. And, we will know we have succeeded when our commitment inspires the nation and the world to do the same.

For 2020, we will implement our redesigned shared governance model with relaunching our nursing committees addressing structural empowerment, transformational leadership, new knowledge, innovation and improvement, and exemplary professional practice. Nurses will have the opportunity to grow and develop as they engage in shared decision-making to lead change and advance the health and well-being of those we serve.

2020 Nursing Strategic Priorities:

- Care Experience - Achieving 4-5 stars HCAHPS Summary Rating
- Workplace Safety – Best place to receive and best place to give care by decreasing workplace injuries among nurses
- Staffing Optimization – Placing the right RN and staff at the right time and right place and achieving performance in attendance
- Magnet Designation by 2022 – Improving the culture of nursing and passing the RN Satisfaction survey
- Implementation of West Los Angeles Quality and Safety initiatives and projects to improve outcomes i.e. nursing sensitive indicators (Falls, mobility, hospital acquired infections, hospital acquired conditions such as HAPIs)
- Joy in work – Work-life balance, teamwork and staff engagement





Extraordinary Nursing Care.

Every Patient.

Every Time.