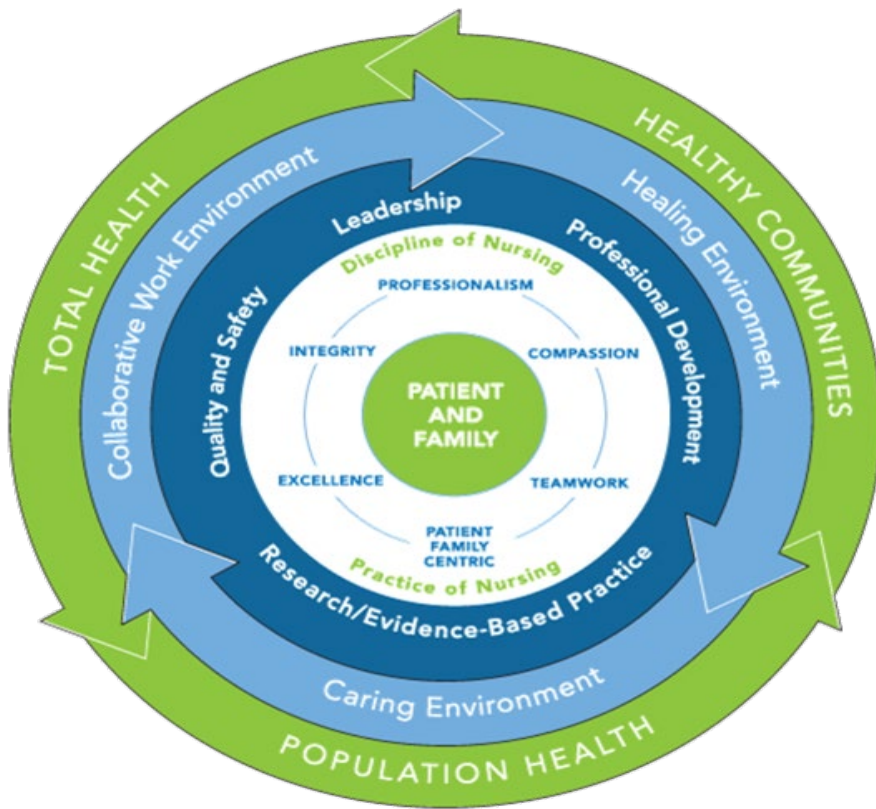


Kaiser Permanente San Diego and Zion Medical Center



Nursing Year in Review
2020

WELCOME TO

San Diego and Zion Medical Center

As the Chief Nurse, I want to recognize the unwavering commitment I've witnessed and experienced from you to our patients, our health care colleagues and your fellow nursing team members. Indeed, these have been challenging times.

Circumstances have asked you to provide care to our patients under the most stressful situations. I appreciate that you have continued to work during moments of fear, anxiety and concern, even when your personal conditions may have been equally challenging. You've exemplified what it means to be resilient, and it makes me incredibly proud.

Our patients have always needed your strength and compassion but never on such a grand scale. The stories of the outstanding care they have received from you have humbled me. As a team, we have always needed the support of colleagues, but this has been on a different scale. I have seen you lean in and help each other by assisting with patients, picking up extra shifts and staying late to help.

What has been remarkable is that, while at times the rest of the world appeared to stand still, healthcare was at its busiest. Despite the vulnerabilities of not knowing the extent of the risk you all faced, there was still laughter and joy.

I trust that with the advent of a vaccine, we will soon turn a corner. We will come through this pandemic with different attitudes and perceptions. I believe we all will have experienced some professional and personal growth due to this experience, and I believe Nursing will be a stronger profession as a result.

It is essential that as we move forward with our excellence in nursing practice that we take the time to re-energize and maintain resilience, self-care and be proud of the role you have served and continue to serve in providing service to others. Know that you are so appreciated by your patients, their families, your colleagues

With sincere gratitude, *Kerry*

Kerry Forde, MSc, BSN, RN, CPHQ, CPHRM, CPPS

San Diego and Zion Medical Centers
Chief Nurse Executive



REPORT CONTENTS:

1. Foundation of Nursing Practice
2. Strategic Alignment
3. Transformational Leadership
4. Exemplary Professional Practice
5. New Knowledge & Innovations
6. Structural Empowerment
7. Recognitions

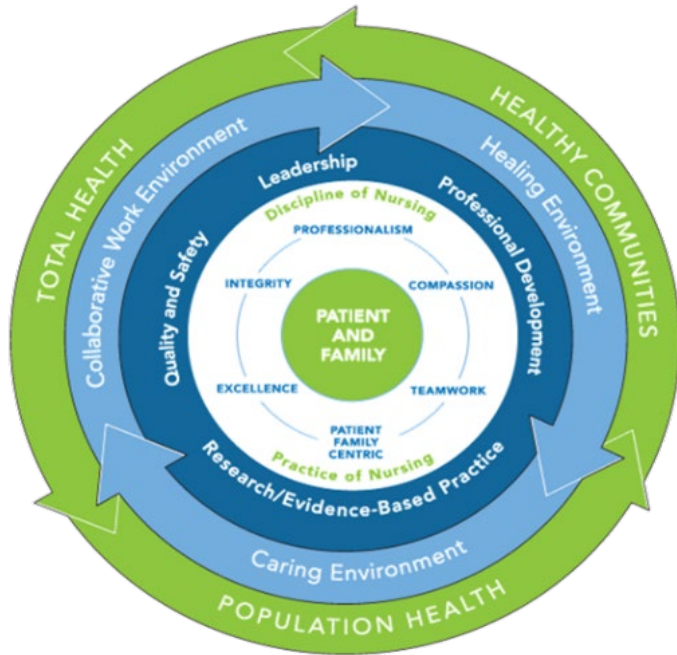


THE STORY OF US

For over 75 years, Kaiser Permanente has been committed to shaping the future of health and health care — and helping our members, patients, and communities experience more healthy years. We are recognized as one of America’s leading health care providers and not-for-profit health plans. Since July 21, 1945, Kaiser Permanente’s mission has been to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve. We currently serve 12.4 million members in eight states and the District of Columbia.

Care for members and patients is focused on their total health and guided by their personal Permanente Medical Group physicians, specialists, nurses and team of caregivers. Our expert and caring medical teams are empowered and supported by industry-leading technology advances and tools for health promotion, disease prevention, state-of-the-art care delivery and world-class chronic disease management. Kaiser Permanente is dedicated to care innovations, clinical research, health education, and the support of community health.

To learn more, please visit:
<https://about.kaiserpermanente.org/>



Nursing Professional Practice Model

Nursing Values

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

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.

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.

Extraordinary Nursing Care.

Every Patient.

Every Time.

DEMOGRAPHICS

Kaiser Permanente San Diego Medical Center (SDMC) opened in 2017 and operates a 39-bay Emergency Department.

Other services/departments include Advice, Continuing Care, Dermatology, Diagnostic Imaging, GI, Home and Hospice Care, ICU, Interventional Radiology, Labor & Delivery, Laboratory, Neonatology, Neurology, Nuclear Medicine, Ob-Gyn, Pathology, Pediatrics, Pharmacy, Pulmonary Medicine, Surgery (General, Neurological, Spine, Thoracic, Vascular), Urgent Care, and Vascular Laboratory.

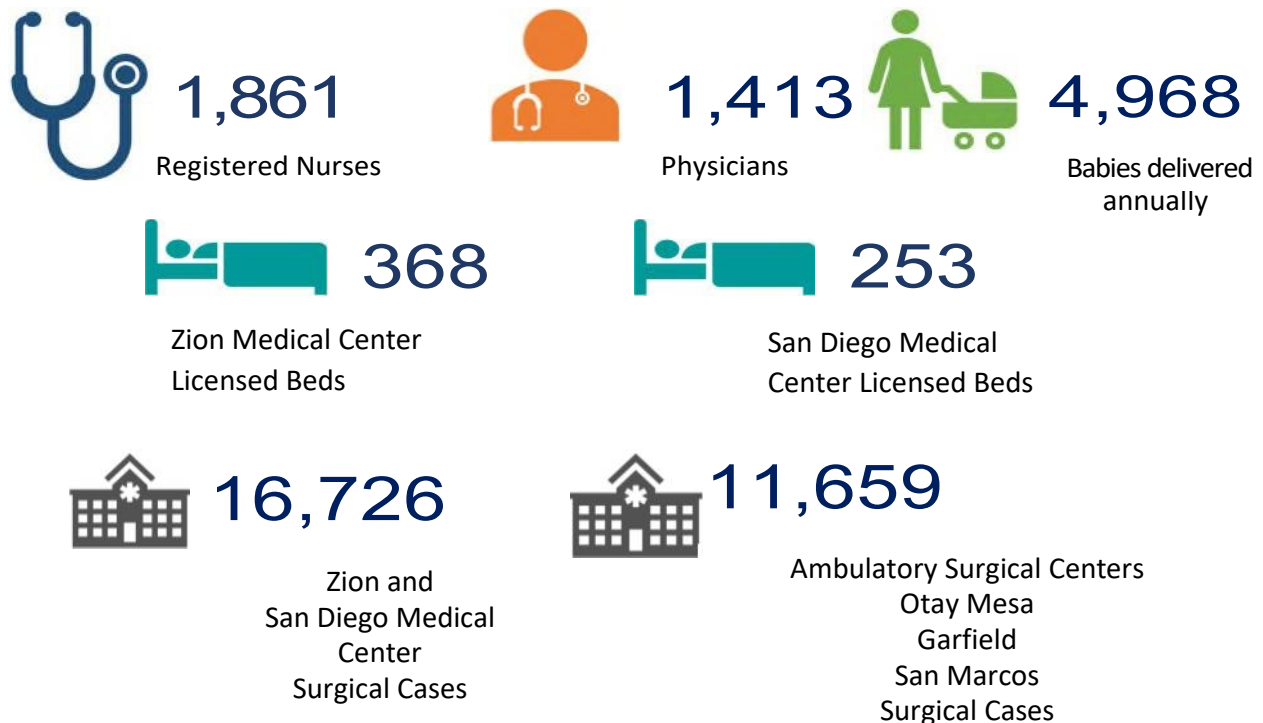
To learn more, please visit <https://thrive.kaiserpermanente.org/care-near-you/southern-california/san-diego/locations/kaiser-permanente-san-diego-medical-center/>

Kaiser Permanente Zion Medical Center (ZMC) opened in 1975 and operates a 52-bay Emergency Department.

Other services/departments include Advice, Cardiology, Continuing Care, GI, Hearing Care Centers, Hematology/ Oncology, Infectious Disease, ICU, Interventional Radiology, Laboratory, Nuclear Medicine, Occupational Health Center, Orthopedic Surgical Care, Pharmacy, Poison Control, Psychiatry, Pulmonary Medicine, Radiology/ Diagnostic Imaging, Sleep Clinic, Surgery (General, Urologic, Vascular), and Vascular Laboratory.

To learn more, please visit <https://thrive.kaiserpermanente.org/care-near-you/southern-california/san-diego/locations/kaiser-permanente-zion-medical-center/>

Together the hospitals provide services to more than 620K members throughout the 4,255 square miles San Diego service area.



ORGANIZATIONAL ACCOLADES

Recent awards and recognitions garnered include American Heart Association 2020 Gold Plus (SDMC&ZMC), Orthopedic Surgery Award™ (2020, 2019), Pulmonary Care Excellence Award™ (2020, 2019, 2018), ZMC and SDMC accredited by ACEP Geriatric Emergency Department Accreditation Program.





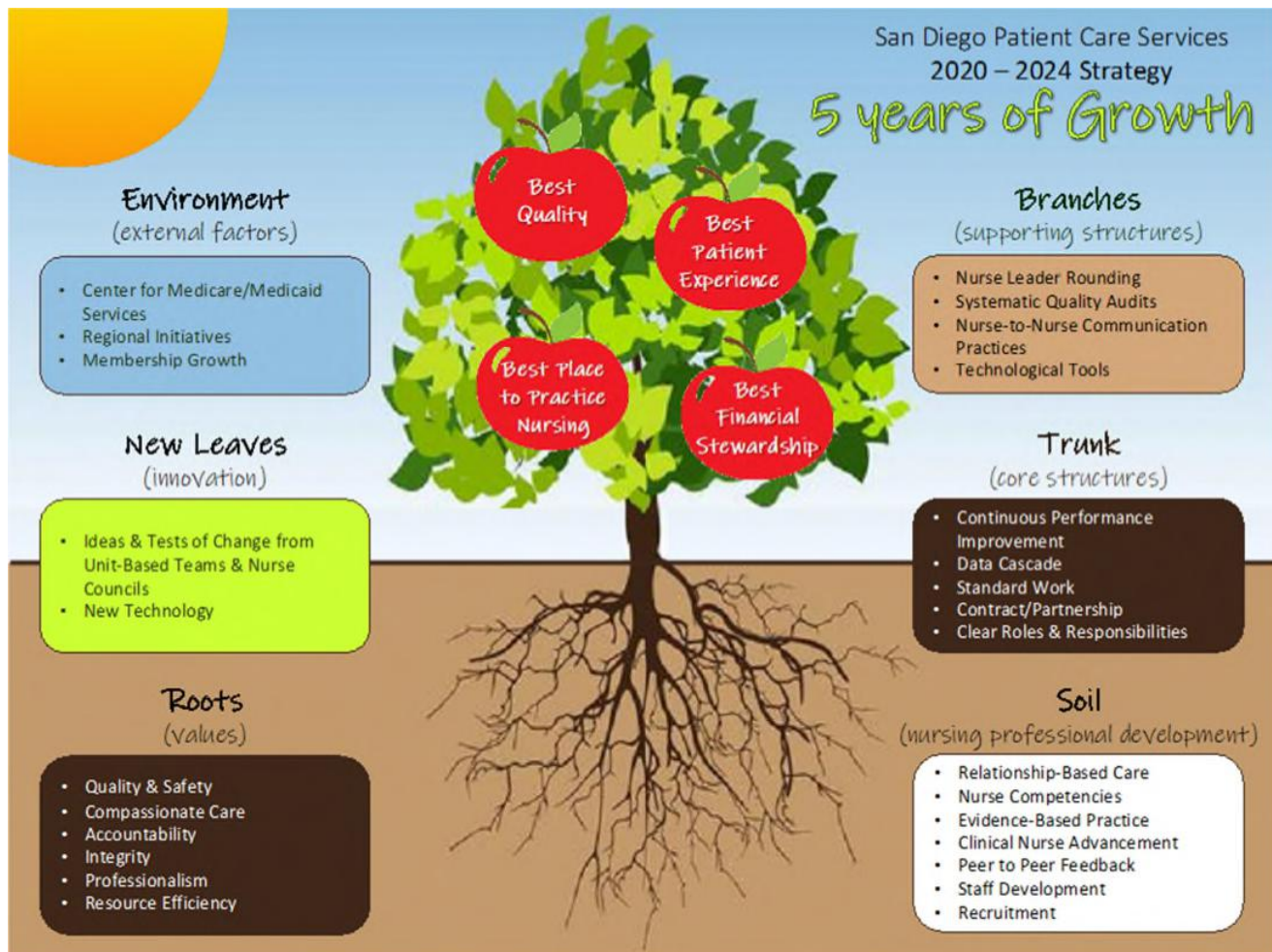
Transformational Leadership

Kaiser Permanente San Diego has established goals and activities that contribute to improvement of the organization's performance. In all areas of nursing practice, our mission, vision, values, and strategic plan align with the organization's priorities. The nursing organization takes pride in leading nursing practice and patient care through effective leadership, involvement of our clinical nurses, evidenced based practice initiatives, and interprofessional collaboration.



Nursing Strategic Plan

Our nursing strategic plan for 2020 and beyond was created by nursing leadership with input from clinical nurses, with growth and excellence of nursing practice and patient care as our overarching vision.



Nursing Strategic Plan Components and Descriptions

Descriptions of each part of the tree that will help us achieve our vision of growth.

Kaiser Permanente Nursing Strategic Plan

Soil

- The soil represents our strategy to **develop, nourish, and enrich** our nurses in order to achieve growth
 - To enrich the tree, we need to **focus on Professional Development** of our staff through:
 - Relationship-Based Care
 - Nurse Competencies
 - Evidence-Based Practice
 - Clinical Nurse Advancement
 - Peer to Peer Feedback
 - Staff Development
 - Recruitment

Roots

- Represent **our core values and priority areas that inform growth**, which are:
 - Quality & Safety
 - Compassionate Care
 - Accountability
 - Integrity
 - Professionalism
 - Resource Efficiency

Trunk

- Represents our strategy to monitor **“big picture”** issues and **long-term improvement**
- **Core Structures/ Processes include:**
 - Continuous Performance Improvement
 - Data Cascade
 - Standard Work
 - Contract/Partnership
 - Clear Roles & Responsibilities

Branches

- Represent our strategy to **support day to day operations and compliance with core processes**, which includes:
 - Nurse Leader Rounding
 - Systematic Quality Audits
 - Nurse-to-Nurse Communication Practices
 - Technological Tools

New Leaves

- Represent our strategy to **foster new ideas, innovation**, and cutting-edge practice
- Leverage our UBTs and Nurse Councils & new technology to generate new ideas

Sun-Rain-Environment

- Represent outside factors contribute to growth (stakeholders, support departments, regulations)

Everest: Transition to Practice

Nikola (Nikki) Smith has been the evening Labor and Delivery Assistant Nurse Manager for approximately two years. She transitioned to the Maternal Child Health (MCH) Nursing Leadership team from her prior role as the Full-Time Night Charge Nurse on Labor and Delivery. Her experience and ability to engage and motivate her team has been a contributing factor in her continued success as the Assistant Nurse Manager. Nikki was nominated by the MCH Nursing Director to attend the Everest Program due to her eagerness and willingness for continued growth and development.

The Everest Program is a professional development program for new inpatient nurse managers. The course objective is to provide guidance on nurse manager roles and responsibilities and incorporating Kaiser's Mission and Vision into their daily workflow. The intent is to have this program become a standard part of nurse leader onboarding. Due to Covid, the last cohort had nine virtual sessions from May 2020 – December 2020 that included, but not limited to, Mentoring, Project Improvement, Care Experience, Leadership, Finance, HR, and Labor Management. Nikki completed all nine sessions along with feedback for each session and received 11.9 CEUs. The course also included starting a Capstone project. Unfortunately, presentations of the Capstone projects were not done this year due to Covid.

Nikki's Capstone Project is ongoing and currently still in progress. The Smart Goal for the project was to increase CHG wipe usage prior to cesarean sections. Initial baseline was 18% utilization. With continued education and guidance, Nikki was able to see a positive trend in CHG usage with achieving a rate of 58%. Regional goal for this metric is 50%.

She continues to provide support and work with her team to ensure continued improvement and sustainability.

Feedback from prior managers and Nikki, who have attended the Everest Program, was very positive. They enjoyed the interaction and learning from their peers. The programs provided them the opportunity to "think outside the box" which is an important skill to have as a Nurse Leader. MCH nursing leadership has future plans to have all new MCH nurse leaders participate in the Everest Program.



Combining Phase I and Phase II Recovery in the Post Anesthesia Care Unit (PACU)

Unit charge nurses identified the need for a process change to support the PACU, which was to combine Phase I and Phase II recovery to improve coordination of care. They partnered with the Unit Based Team (UBT), unit educators, and the perioperative leadership team.

Discussions regarding combining Phase I and Phase II took place at the Highly Reliable Surgical Team meeting (multidisciplinary attendance including quality department) to explore the value of this change.

At the time, the current patient workflow included the surgical patient initially being recovered from anesthesia in Phase I of the post anesthesia care unit. Once the patient met recovery criteria they were then moved to Phase II and the RN in Phase I would handoff to the RN in Phase II. Lack of continuity of care and increased length of stay prompted the need for change.

The priority for this change was to increase patient safety, patient, and staff satisfaction, and reduce the length of stay for our patients. Charge nurses struggled to place patients coming out of the operating room because of delays in discharges.

A new process design was developed based on evidence-based research and best practices. The process included 1) utilizing every bed space for recovery of patients, and 2) eliminating the fragmentation of care by consolidating care in one location.

This was the first time this new process was introduced to Kaiser San Diego Medical Center. Patient satisfaction scores improved almost immediately.

This process change continued through 2020 and is being reviewed for updates in 2021.

In 2019 score improved as follows:

Communication = 91.1% (+7.6% improvement from 2018);
Facility/Personal treatment = 94.8% (+0.9% improvement);
Discharge = 94.2% (+5.2% improvement).



Structural Empowerment

Kaiser Permanente San Diego uses multiple strategies to create structures and processes that support a lifelong learning culture. These structures and processes are designed to support the value and image of nursing to include promotion of role development, academic achievement, career advancement, and ongoing professional development. We believe that continuous professional development of our nurse's results in better patient outcomes.

STRUCTURAL EMPOWERMENT



5.6%

Annual Nurse
Turnover Rate

Our Nursing Turnover rate includes Registered Nurses from San Diego Medical Center, Zion Medical Center and our Ambulatory Surgery Centers: San Marcos, Garfield, Otay Mesa and Vandever.

Kaiser Permanente San Diego (KPSD) is currently capturing baseline data from our nursing staff related to specialty certification and highest nursing degree obtained.

Primary method of collection is during the nursing staff's annual evaluations. Other opportunities for collection will be in unit huddles, Professional Development Days and New Employee Orientation.

Currently our Shared Governance Councils are working with our UBTs on projections related to increasing certification rates and increasing advanced degree rates.

Specialty Certified
Nurses and Nurses
with Bachelor's
Degree or Higher

Team Nursing Model During COVID Surge: What, Why and How

What we did? Why we did it? How was it Operationalized?

As we reflect upon last year, which proved to be one of the most challenging times of our nursing careers at all levels of our profession, we have experienced many emotions and truly have risen to the challenges we faced and continue to face. Some of the emotions that come to mind include courage, flexibility, adaptability, resilience, and innovation.

Knowing that the surge(s) were coming and staffing for these exceedingly high patient volumes would be an arduous task, we had to become creative in developing a nursing model of care that would meet these expectations as a result *A Team Nursing Model* was developed. This team nursing model included all of our nurses at every level of care; from our inpatient nurses, to our 3P nurses, to our Ambulatory Care RNs & LVNs. These extraordinary times required all of us to support each other to be able to provide the best possible care to our patients.

In this *Team Nursing* approach, a group of patients were cared for by nursing teams who were led by a primary nurse, working alongside secondary nurse and support personnel (which included runners, student nurses in a helping hands capacity, etc.) As an example, the role of the primary nurse in the ICU acted as the team lead and provided critical care nursing interventions; the secondary RN who was paired up with the primary RN supported the primary RN in the performance of patient care based on their scope of practice and training received. This model was actually piloted in our SDMC ICU with two of our amazing nurses: ICU RN, Kristen Wagner in the role of the primary nurse and Med/Surg RN Andrea Hegaredia in the role of the secondary nurse, who we would like to sincerely thank for the courage they demonstrated in helping us be innovators.

A *Transition to Practice Essentials* training program was created for our 3P RNs, Ambulatory Care RNs & LVNs and our own inpatient nurses who were interested in transitioning to work in the next level of inpatient care. In addition, CRNAs were also integrated into primarily a “secondary RN” role to augment this team model.

This was all operationalized through several teams: 1) Nurses within our organization who volunteered to work in either the primary, secondary or runner roles; 2) our Nursing Education and Professional Development team who designed the transition to practice programs and relentlessly onboarded all of these volunteers and 3) our Staffing Office who scheduled all of these additional volunteers.

In the words of Dr. Kenneth Blanchard related to what constitutes a high performing team, “No one of us is as smart as all of us”. We thank all of our nursing partners for being a part of a high performing Kaiser nursing team model, which is displayed on the next page.

STRUCTURAL EMPOWERMENT



San Diego Nursing Roles & Responsibilities

ICU LEVEL OF CARE		INTERMEDIATE LEVEL OF CARE (IC)		MED/SURG LEVEL OF CARE (MS)	
Primary ICU Nurse	Secondary ICU Nurse	Primary IC Nurse	Secondary IC Nurse	Primary MS Nurse	Secondary MS Nurse
<p><i>RNs: Critical Care RNs or RNs trained to work in Critical Care (Traveler, DOU trained, 3P with ICU Experience)</i></p> <p><i>* Refer to Unit Based Orientation Checklists for Specific Duties</i></p>	<p><i>RNs Paired with ICU RNs: (PCS DOU trained to ICU, 3P trained to ICU PCS Med Surg RN)</i></p> <p><i>* Refer to Unit Based Orientation Checklists for Specific Duties</i></p>	<p><i>Primary RN: PCS DOU RN, PCS Med-Surg Monitored (MSM)/Tele trained to DOU</i></p> <p><i>* Refer to Unit Based Orientation Checklists for Specific Duties</i></p>	<p><i>Secondary RN: 3P RN trained to intermediate, PCS MSM/Tele trained to intermediate, PCS MSM/Tele, PCS MS RN</i></p> <p><i>* Refer to Unit Based Orientation Checklists for Specific Duties</i></p>	<p><i>Primary RN: (PCS MS RN)</i></p> <p><i>* Refer to Unit Based Orientation Checklists for Specific Duties</i></p>	<p><i>Secondary RN: AMB trained MS RN, AMB LVN trained to MS</i></p> <p><i>* Refer to Unit Based Orientation Checklists for Specific Duties</i></p>
<p>General Patient Care:</p> <ul style="list-style-type: none"> Conducts critical care patient assessment, identifies nursing diagnoses based on assessment and overall care coordination 	<p>General Patient Care:</p> <ul style="list-style-type: none"> Conducts patient assessment based on level of competency in collaboration with the primary ICU RN Performs tasks assigned by primary ICU RN based on level of competency 	<p>General Patient Care:</p> <ul style="list-style-type: none"> Conducts patient assessment, identifies nursing diagnoses based on assessment and overall care coordination 	<p>General Patient Care:</p> <ul style="list-style-type: none"> Conducts patient assessment based on level of competency in collaboration with the primary IC RN Performs tasks assigned by primary IC RN based on level of competency 	<p>No change in practice or duties</p>	<p>General Patient Care RN</p> <ul style="list-style-type: none"> Conducts patient assessment based on level of competency in collaboration with the primary MS RN <p>General Patient Care LVN:</p> <ul style="list-style-type: none"> Provides care according to scope of practice and under the supervision of the primary RN (see checklist for specific duties)
<p>Ventilator Management:</p> <ul style="list-style-type: none"> Perform assessment and provides care according to unit guidelines 	<p>Ventilator Management:</p> <ul style="list-style-type: none"> Provides care only if competent to manage stable/chronic vented patients (excludes MS RNs) 	<p>Ventilator Management:</p> <ul style="list-style-type: none"> Provides care only if competent to manage stable/chronic vented patients 	<p>Ventilator Management:</p> <ul style="list-style-type: none"> Provides care only if competent to manage stable/chronic vented patients (excludes MSM and MS RNs) 	N/A	N/A
<p>Medication Administration:</p> <ul style="list-style-type: none"> Administers all critical medications based on PCS related policies. 	<p>Medication Administration:</p> <ul style="list-style-type: none"> Administers any non-critical medications within scope of practice. 	<p>Medication Administration:</p> <ul style="list-style-type: none"> Administers medications within scope of practice 	<p>Medication Administration:</p> <ul style="list-style-type: none"> Administers medications within scope of practice 		<p>Medication Administration RN:</p> <ul style="list-style-type: none"> Administers medication within scope of practice <p>Medication Administration LVN:</p> <ul style="list-style-type: none"> PO, IM, SQ, and rectal meds IV fluids without additives and antibiotics Blood Administration (If IV certified)
<p>Documentation:</p> <ul style="list-style-type: none"> Assessment of critical care patient, nursing diagnosis, care planning and patient education 	<p>Documentation:</p> <ul style="list-style-type: none"> Assessment, care planning and patient education based on level of competency. 	<p>Documentation:</p> <ul style="list-style-type: none"> Assessment, care planning and patient education based on level of competency 	<p>Documentation:</p> <ul style="list-style-type: none"> Assessment, care planning and patient education based on level of competency 		<p>Documentation RN:</p> <ul style="list-style-type: none"> Assessment, care planning and patient education based on level of competency <p>Documentation LVN:</p> <ul style="list-style-type: none"> Care planning and patient education based on level of competency

TRANSITION TO PROFESSIONAL PRACTICE

MEDICAL SURGICAL NURSING TO TELEMETRY NURSING COURSE OFFERED In August-September 2020!

Education & Nursing Professional Development offered a Telemetry Transition to Practice Course to enable full-time and part-time nurses the opportunity to transition from *Medical-Surgical (Med-Surg) Nursing* to *Med-Surg Monitored (Telemetry) Nursing* practice.

Our commitment was to help all interested Med-Surg nurses achieve success as a Telemetry nurse.

Course Description: This very informative two-day course was designed to prepare the nurse working in a Med-Surg level of care for career progression to a higher level of care and professional nursing development. The course included both a virtual classroom and clinical component.

A) Virtual Classroom content:

Day One: Systems Review, Neurology (Stroke Signs, Symptoms and Treatment), Sepsis Signs (Symptoms and Treatment), Cardiac Care & Treatment, Respiratory Problems and Treatment, Simulation Exercises.

Day Two: ECG Course with interactive exercises throughout featuring noted speaker and author, Laura Gasparis Vonfrolio, PhD, RN.

B) Clinical component: Six to eight shifts with an assigned preceptor.

Eighteen nurses successfully completed the course. Given the interest in this course and nurses desire to progress in their career, more transition to practice courses is being planned for other levels of care.

STRUCTURAL EMPOWERMENT

Stroke Certified Registered Nurse (SCRN) Certification Review Course

A Stroke Certified Registered Nurse (SCRN) Certification Review Course was offered on November 16th & 17th, 2020 with Arlene Boudreux, MSN, CCRN, CNRN, SCRN, as the featured speaker.

This was a two-day virtual course designed to prepare the nurse specializing in caring for stroke patients to successfully complete the Stroke Certified Registered Nurse Examination. The course reviewed all of the major topics of the examination and provided information regarding the latest guidelines and protocols for managing stroke patients. It reviewed different stroke types, assessment, acute management and rehabilitation of strokes.

Course Objectives were:

- Identify the different types of strokes, its pathophysiology, and signs and symptoms
- Describe the circulation venous drainage, cerebrovascular arterial and CSF circulation.
- Enumerate common stroke syndromes and stroke mimics
- Verbalize the rationale for hyperacute care of the patient with stroke
- Describe the rationale for stroke program systems and quality of care
- Identify the primary and secondary methods of stroke prevention
- Enumerate stroke related diagnostic procedures and medications
- Verbalize the current stroke guidelines for managing patients with stroke
- Demonstrate comprehensive neurological assessments in stroke patients
- Teach patients and family about prevention and recognition of stroke
- The class was held virtually via Zoom with 75 participants. One clinical nurse, Rebecca Schult, took the exam upon completion of the course and was successful! Congratulations to Becca, our Trailblazer”!



Other Educational Activities 2020

- Annual Competency Validation
- Quarterly Professional Development Days
- ACLS
- BLS
- Product In-services
- Evidence-Based Practice Institute
- Certification Review Courses
- Rapid Response Team Training
- Sepsis Simulations – ICU/DOU/MS/MSM Levels of Care





Exemplary Professional Practice

Exemplary professional practice at Kaiser Permanente San Diego (KPSD) Medical Centers is evidenced by effective and efficient care services, interprofessional collaboration and high-quality patient outcomes. Our nurses' partner with patients, families, support systems, and interprofessional teams to positively impact patient care and outcomes.

Zion 4NS/4W Essential Oil Project

Aromatherapy is an underutilized evidence-based proactive tool in hospital units 4NS/4W at Zion Medical center, our UBT implemented aromatherapy by utilizing essential oil tabs designed to target symptoms of anxiety, nausea, pain, and restlessness. Our RNs and staff report improved patient mood and reduced need for medications in some cases post implementation of the essential oil tabs. During leader rounding, patients have identified the tabs as a significant satisfier improving their inpatient hospital experience.



We want to offer you the best possible care while making your experience as pleasant as possible. Please let us know if you would like Aromatherapy during your visit.

<p>Lavender & Sandalwood Helps you relax and provides comfort.</p>		<p>Orange & Peppermint To calm anxiousness. Helps rest and brings increase sense of peace.</p>	
<p>Lavender To calm anxiousness, helps rest and increase peace.</p>		<p>Lavender & Peppermint To calm and soothe Queasiness</p>	

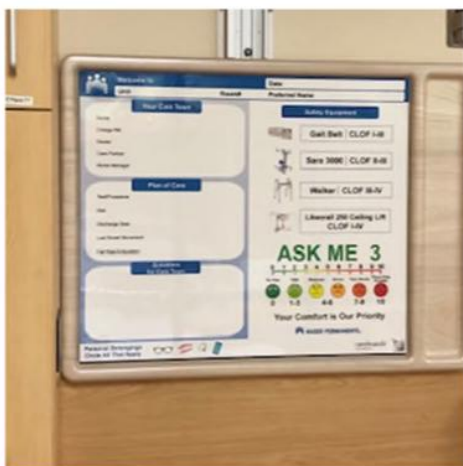
Aromatherapy is the use and application of Essential Oils to promote physical, psychological and emotional balance. Each Essential Oil has a unique effect. Such as easing queasiness, rejuvenation and calming.

Care Experience in San Diego

The principle of “Every Moment Matters” drives Kaiser Permanente San Diego Nursing to connect with patients, peers, and leaders in meaningful ways.

The Connection Bundle is an evidence-based practice which nursing utilizes to make an impactful connection with patients and families during hospitalization. It is comprised of three elements: 1) Warm Welcome, 2) Getting To Know You and 3) Discharge with a WOW.

In 2020 San Diego and Zion Medical Centers elicited patient feedback with “comment cards” and partnered with our Patient Family Care Council to enhance care boards which were used in patient rooms for care coordination. San Diego has progressively enhanced the “Getting to Know You” element increasing; the overall patient care experience as demonstrated by a patient comment below.



I have no words that can truly express the gratitude I have for each and every one of you as you cared for me during my hospital stay. You were there to ease my fears in the middle of the night, motivate me to push forward, take a moment out of your busy schedule to converse and even helped plan my best birthday ever. The devotion to your profession, genuine compassion for your patients, encouraging words and comforting manner will never be forgotten.

You are all my "Angels of Mercy" and I am forever grateful.



Care Experience in San Diego

Kaiser Permanente San Diego’s Care Experience Committee is composed of Frontline Nursing, Nurse Leaders and Hospital Administrative Leadership. Frontline Nursing also sits on Regional Care Experience Sub-councils.

Along with the Connection Bundle initiative, these groups have worked simultaneous in 2020 during unprecedented COVID times to laser focus and create action plans surrounding best practice related to Care Experience Goals.

Focus Areas	Action Plan
Nurse Communication	<ul style="list-style-type: none"> • Leverage NLPR to next level , 1 or 2 RNs patient assignment (CCB, MSE, Quiet at night, Fall Prevention) • Validate NKE Plus at Bedside and CNL hand off per unit weekly • Hardwiring Regional Connection Bundle all Adult IP /MCH Units • DOE educate/train/validate New Hire Orientation (Care Experience imperatives)
Medication Side Effects	<ul style="list-style-type: none"> • Leverage NLPR thru coaching/supporting frontline staff on WHY and HOW • Implement and reinforce MSE ID Badge Card • Hardwire Easy to Read/Understand Medication sheets highlighting Buzz Word: MSE • SDMC Trifold/Medication side effect highlighted, ZION Bright Green Sheet MSE • Ask 3, Teach 3 posted as a visual reminder; name of med, indication, and 2 possible side effects
Quiet at Night	<ul style="list-style-type: none"> • Standardize Eve and Nightshift ANM Nurse Leader Patient Rounding • ANM/CN checklist including lowering device volume, dimming lights, closing patient doors, offering quiet/sleep kit like ear plugs/phones • NKE Plus MUST be performed at bedside
Help at Home (Postpartum)	<ul style="list-style-type: none"> • Implementation of Regional Discharge at home tool Kit (includes Scripting for staff, Resource guidebook - community resources ,Discharge resource in AVS, Members focus information flyer placed in bathroom doors, Family focus Informational Poster place at entrance of unit)

EXEMPLARY PROFESSIONAL PRACTICE

Sammy Totah/COO and Kerry Forde/CNE attended MCH Nurse Leader Care Experience Retreat Led by MCH Director Nancy Sanchez



ZION CNE Senior Leader Rounding /Medication Side Effect



Jane Finley SVP attended SDMC Care Experience Weekly Action Huddle



Lynette Seid CFO joined NLPR
What's working well? Do you have the tools you need..



Workplace Safety Award Winner

Medical Center 3P earned the 2020 National Workplace Safety Award for *Engaging Frontline*.

The award honors remarkable contributions to preventing workplace injuries and in the spirit of sharing best practices program wide, all finalist and winners for the 2020 National Workplace Safety Award are featured to highlight key programs, initiatives, and safety systems. (KP National Workplace Safety, 2020).

TEAM AWARDS

ENGAGING FRONTLINE

2020 NATIONAL WORKPLACE SAFETY AWARDS

WINNER

Zion "3 Ps" Department (Preop/Postop/PACU)

Zion Medical Center, Southern California

The Zion 3Ps (Preop, Postop and PACU) has deployed a variety of safety initiatives promoting frontline engagement, built on a framework of mutual support, respect, teamwork and communication:

- Recent safety initiatives include:
 - Morale Boosters implementation
 - 3Ps newsletter launch
 - Respect Project implementation
 - Workplace Safety Champion deployment
 - Nurse Knowledge Exchange checklist creation
 - Hands-on safe patient lift equipment training deployment
 - Hand hygiene script development
 - Bedside cart PPE availability and accessibility checklist creation
 - Safety Principles Orientation incorporation into onboarding process for new staff



Keeping the KP mission, Nursing vision and Values, & the Professional Practice Model Alive:

Zion Medical Center Peri-Anesthesia Post Op

ZMC Peri-anesthesia implemented Patient Satisfaction Post Op Calls following surgeries. This nurse-led initiative created a framework for improvement with patient satisfaction by incorporating PDSA, inclusion/exclusion criteria, structure surrounding data review and workflow process.

It was the idea of making “Every Moment Matter” to surgical patients which motivated the unit to dissect and analyze all options and possibilities. Deployment and oversight were initiated as a UBT test of change project. This made it possible to present the idea as one that the group could develop and own. This was when the real work started. The evolution could be described as follows:

- I. Problem Identification
 - a. Patient care Experience scores – analysis, identify specific bundle
 - b. Questionnaire review – identify questions feeding into identified bundle scores
- II. Engage UBT
 - a. Share data gathered from Problem Identification phase
 - b. Develop Action items deployable as test of change projects
 - c. Consider partnership with other Action Items from other PI project/s (I.e., Action OI)
 - d. Identify PostOp Phone Call as vehicle to connect with patient
 - e. Develop (Phone call) scripting framework based on completed Questionnaire review
- III. Consult and develop under the guidance of new Inpatient Care Experience & Service leader
 - a. Staff town hall
 - b. Align Discharge and Communication bundles as identified targets
 - c. Integrate initially developed (scripting) framework to develop one containing the following (Surgical Patient Satisfaction Questionnaire):
 - i. Safety and Quality Care Experience
 - ii. Transition to Care Experience
 - iii. Care Experience (Questionnaire)
 - iv. Employee Recognition
 - v. Closing
 - vi. Service Recovery

OUTCOME: After a positive trend was noted from initiation, the process was permanently adopted.

Maternal Child Health

The Maternal-Child Health Department is committed to providing a culture that is respectful, compassionate, and innovative using evidenced-based research and nursing care practices. Our team fosters a trusting and nurturing environment supporting a speak up culture, interprofessional collaboration and front-line staff engagement and participation in various Maternal-Child Health Committees and Nursing Shared Governance Councils. Developing a successful Labor Management Partnership (LMP) helps us to achieve our mutual goals of optimum staff satisfaction, promoting a safe environment, positive patient satisfaction and excellent quality outcomes. The ability to demonstrate resilience and adaptability by providing Helping Hands to the Adult Service Areas, as we progress through the COVID pandemic, exemplifies passion and commitment of the Maternal-Child Health Nursing Team which supports Kaiser Permanente's Mission of improving health of all of our members and the communities we serve. In 2020 clinical excellence has been demonstrated throughout all the initiatives below.

Nancy Sanchez MS, BSN, RNC, CCRN-K

Perinatal



- 2020 Best Maternity Care Hospital (Newsweek): <https://www.newsweek.com/best-maternity-care-hospitals-2020>
- 2020 Cal-Hospital Maternity Care Honor Roll
- Code OB implemented for emergencies outside of Labor & Delivery
- C-section Early Recovery After Surgery (ERAS), High Reliability Surgical Team (HRST)
- Maternal Sepsis
- Nitrous Oxide for comfort
- Breastfeeding and Boding committee: Collaborative care with outpatient clinic and inpatient lactation consultants
- Quarterly Staff Rewards & Recognition
- 5 Star HCAHPS Care Experience
- Blood Utilization and Management Committee; Cultural Care Interprofessional Outreach Collaboration with San Diego's Jehovah Witness community and inpatient hospital chaplains
- 2020 Pilot site for EBP Maternal Hester Davis fall initiative: Collaboration between L&D and Post-Partum nurse educators as team leads
- Get Well Network Pathways to include flu and discharge readiness
- Participated in Hospital Quality Institute (HQI) Perinatal Mental Health learning collaborative; Implemented Edinburgh Postnatal Depression Scale (EPDS) screening process prior to discharge with a focus on staff and provider empathy and compassionate care.

NICU



- Evidence Based Kangaroo Care (Skin 2 Skin)
- Maintaining Normothermia
- Best Practice Delayed Cord Clamping
- Nurse driven rounds: Keeping families connected and informed with the plan of care.
- Transfusion Reduction among Very Low Birth Weight (VLBW)
- San Diego NICU Team Lead for SCAL: CPOCC Optimizing Antibiotic Stewardship In California NICUs (OASCN)

Pediatrics



- Pediatric Early Recovery After Surgery (ERAS)
- Medication Side Effect Bundle
- Connection Bundle "Getting to know you "
- Collaboration with Staff; Child Life Specialist engagement with unit activities
- Quality and Care experience focus on reducing newborn readmissions
- UBT collaboration with ED focus to improve pediatric patient throughput



New Knowledge,
Innovations &
Improvements

Kaiser Permanente San Diego has conscientiously integrated evidence-based practice and research into clinical and operational processes. We take pride in our sponsorship of nurses in the Evidence-based Practice Institute of San Diego and becoming co-investigators of clinical nursing research studies. We enable our nurses to explore the safest and best practices for their patients, practice environment and to generate new knowledge.

NEW KNOWLEDGE, INNOVATIONS & IMPROVEMENTS

Kaiser Permanente San Diego Partners with The San Diego Evidence Based Practice Institute (EBPI) to Promote Evidence Based Practice

The Evidence Based Practice Institute (EBPI) of San Diego is a collaboration between Health Care organizations and higher Institutions within San Diego aimed at cultivating a passion for improving nursing practice by guiding teams of staff to identify a problem, seek an evidence-based solution, and then incorporate their findings in day-to-day practice. The program utilizes fellows and mentors from participating organizations with oversight provided by designated faculty. The participants attend a total of six days of full day classes that start in March and conclude in November with a graduation ceremony. Due to the pandemic, five out of the six classes for 2020 were held virtually including the graduation ceremony.

Attaining nursing excellence at KPSD necessitates nurses having an essential role in implementing evidence-based practices (EBP) that contribute to positive patient outcomes.

With the approval of our Chief Nurse Executive Kerry Forde, Kaiser Permanente San Diego (KPSD) sponsored three fellows in 2020 for the inpatient (shown in picture on top):

Sunie McCallen, RN – STRIDE Project

Jeri Jackson, MSN, M.Div, RN-BC- Mentor

Veronica Timple, PhD, RN – Faculty and Mentor

Deanna Harris, RN- STRIDE Project

Cheri Graham-Clark- MSN, RN, PHN, CPHQ, CPHRM, ASQ CSSBB, FNAHQ- Mentor

Sheryn Shahwan-Solorzano, RN –Liquid Mind Music Therapy in Hospice Care

Tracy Abrams, Chief Nursing Officer for KPSD Ambulatory sponsored one fellow from the outpatient department (shown in picture below, right side):

Barbara Robeniol, RN, CAPA, CNAMB- Post-Op Discharge Education via Phone



LUCAS CHEST COMPRESSION DEVICE



Given the challenge of early start of high-quality compressions and survival due to the onset and surge of Covid-19, a mechanical chest compression device (MCCD) was considered to be advantageous in that there would be a decrease in: 1) number of people required to be physically present inside a Covid patient's room, 2) delays in initiation, 3) provider fatigue, and 4) quality inconsistencies that currently plague departments utilizing manual chest compressions. A MCCD, according to the literature, would provide a more consistent rate, depth, and recoil in cases of prolonged in-hospital CPR. By maintaining quality chest compressions, providers would be able to focus their attention on providing other life-saving interventions not only for the arresting patient but potentially other patients within the department or unit that would also have concurrent high resource needs.

In addition to early performance of high-quality CPR and provider fatigue, another concern was an increased delay in CPR response time due to proper donning of PPE. Additionally, not properly donning PPE would pose a risk of exposure for our nurses, physicians and respiratory therapists to aerosol generating procedures required to successfully rescue Covid-19 patients who experience cardiac or cardiopulmonary arrest.

Four Lucas Chest Devices were purchased and are located in the ED and ICU at each hospital: Zion and San Diego Medical Centers.

An interprofessional team (comprised of nurses, physicians, respiratory therapists and pharmacists met to develop a process for location, use, roles and placement of staff during a Code Blue, and guidelines for use and cleaning.

LUCAS CHEST COMPRESSION DEVICE

Roles were identified as follows:

Team Leader—MOD / POD (AT DOORWAY)

Assigns roles to team members, makes treatment decisions, provides feedback to the rest of the team

Recorder—RN (IN WARM ZONE)

Records time of interventions, frequency and duration of interruptions in compressions, communicated this to team leader

Pharmacist— (IN THE HALLWAY)

CODE WHITE: Brings pharmacy emergency drug box to the scene, draw up ordered meds, verifying dosing, uses eDose for neonatal and pediatric patients for weight-based dosing

Airway—Anesthesia physician

Operates airway, intubates, performs bag/mask ventilation (with breathing circuit filter attached)

Compressor— Respiratory Therapist rotates with AED Monitor RN

Assess patient, do 5 cycles of chest compressions, rotates with RN

Brings ventilator and sets up as needed

Applies LUCAS device when becomes available.

AED/Monitor/Defibrillator—RN

Rotates with compressor every 5 cycles while AED is analyzing rhythm, places monitor/defibrillator where team leader and team can see

Medications—CRNA or RN

Administers medications

Runner / Charge Nurse—in hallway

Brings crash cart to scene, hands Defibrillator from crash cart to nurse in room (to position on an overbed table or bedside stand—facing so that team leader can view)

Obtains needed supplies

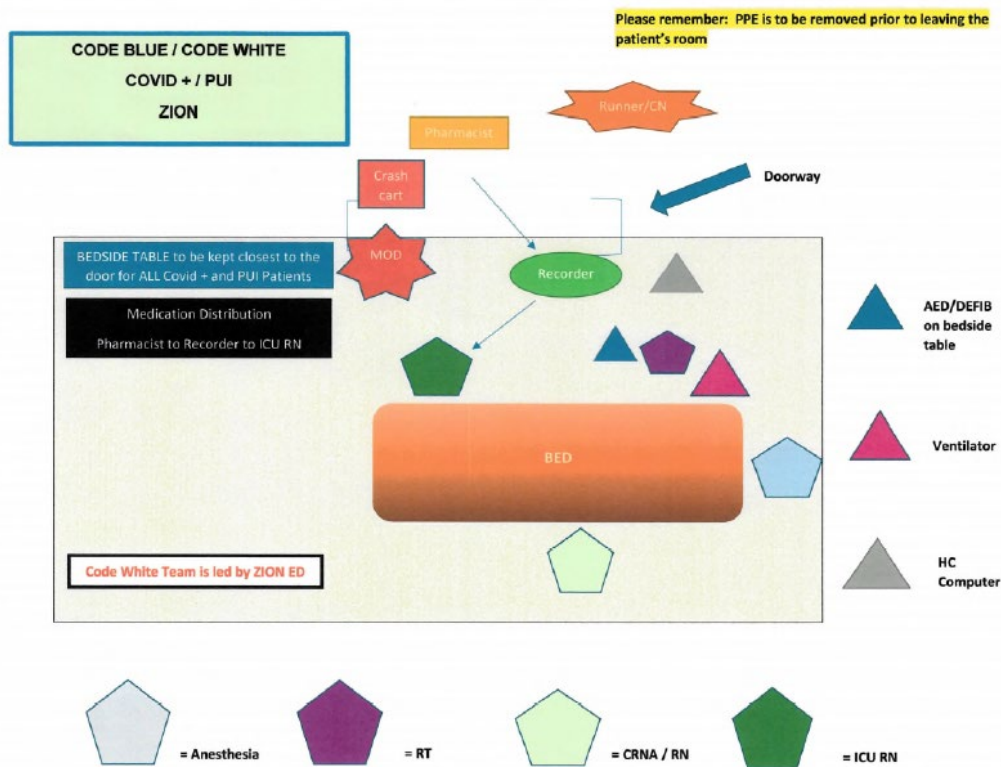
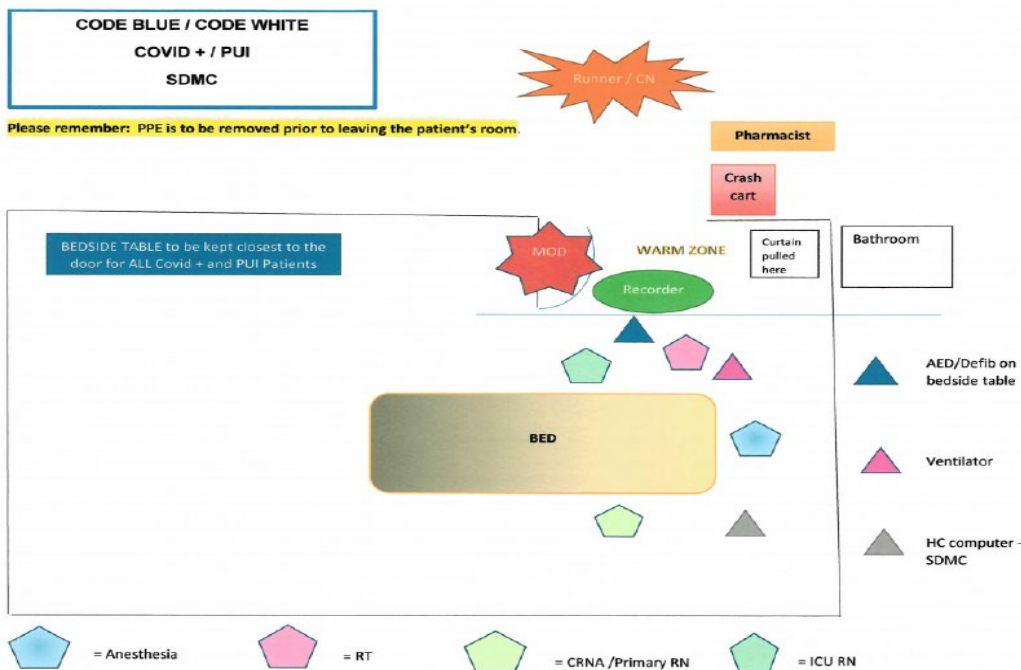
Placement of staff in the patient's room is outlined on the next page.

This innovation in clinical practice demonstrated how interprofessional collaboration could improve care and outcomes across the continuum from Ambulatory (under which the ED is structured) to Inpatient care. By using this team approach, all key stakeholders, including clinical nurses, provided input and feedback which led to their having a sense of ownership, empowerment, and accountability for improvement in code blue patient outcomes with our COVID patients. Another result, in addition to improvement in patient safety, was an improvement in employee safety which was equally as important.

The Lucas Chest Compression Device is now deployed to any unit for use with the code blue patient.

NEW KNOWLEDGE, INNOVATIONS & IMPROVEMENTS

LUCAS CHEST COMPRESSION DEVICE PROCESS



RECOGNITIONS

The Hester Davis (HD) Falls Program™ is a comprehensive, *individualized* falls management program, comprised of all the evidence-based tools and services needed to reduce patient falls and falls with injury across the continuum of care. KP San Diego has been recognized in three categories for excellence in Patient Safety.

1. Organizational Excellence
2. Outstanding Leadership: Kerry Forde, Chief Nurse Executive
3. Excellence in Education: Jeraldine Jackson, Director of Education and Professional Development

HD Nursing
Putting Science & Technology to Work

Awards for Excellence in Patient Safety

Organizational Excellence

The award for Organizational Excellence is chosen based on demonstration of the following: Organization demonstrates a strong culture of safety. Key leadership populated with servant leaders. Organization embraces the science of the HD Nursing Program. Fall or injury rates demonstrate a 25% improvement from baseline evidencing a commitment to the Predict/Prevent/Sustain phases of the HD Nursing Falls Program. Organization develops new leaders and supports individual nursing growth through HD Nursing's programs.

2020 Organizational Excellence Award Winners

Kaiser Permanente San Diego Medical Center

Outstanding Leadership

The award for Outstanding Leadership is given to a person who (1) demonstrates strong leadership in the face of change and adversity (2) propels evidence based patient care and clinical quality regardless of current barriers (3) demonstrates an ability to facilitate collaboration between stakeholders; particularly IT and clinical operations (4) maintains strong communication between HD Nursing and core stakeholders.

2020 Outstanding Leadership Award Winners:

Kaiser Permanente -San Diego- Kerry Forde

Excellence in Education

The award for Excellence in Education is given to nurse educators who (1) facilitate transfer of knowledge to staff in a complex and dynamic environment (2) continuously scan the organizational environment for gaps in understanding (3) close gaps by offering educational interventions and defining new processes to ensure the HD Nursing programs are woven into the culture of the facility (4) ensure staff have the educational tools needed to succeed at every level (staff RN, PRN, float, across units, onboarding, annual competency, program changes) (5) create inventive ways to motivate/incentivize staff to reach their greatest educational potential as a contributor to the culture of safety.

2020 Excellence in Education Award Winners:

Kaiser Permanente San Diego/ Zion- Jeraldine Jackson

RECOGNITIONS

At Kaiser Permanente San Diego, we pursue meaningful recognition in the strong belief that such recognition of our nurses contributes to a healthy work environment and improved patient outcomes. *Meaningful recognition results in “job satisfaction, organizational and career commitment, cohesion and collaboration, and perceived organization support (American Association of Critical Care 2005). We reward extraordinary nurses for extraordinary care with every patient every time. Following are a few of the awards presented in 2019.*



The **DAISY Award** is a nationwide program that rewards and celebrates the extraordinary clinical skill and compassionate care given by **nurses** every day. **DAISY** is an acronym for *Diseases Attacking the Immune System*.

We are proud to be a **DAISY Award** hospital partner, recognizing **nurses** throughout the Kaiser Permanente San Diego Service Area.

Honoree	Month	Year	Unit
Lindsay Krosby, RN	January	2020	Postpartum SDMC
Stephanie Jacobson, RN, CNM	April	2020	L&D SDMC
Kelly Allison, RN	September	2020	PICC Team ZMC
Victoria Jensen, RN	October	2020	Med/Tele SDMC
Matthew Tedeschi, RN	October	2020	Med/Tele SDMC
Racquel Ballinger, MSN, RN-BC, PHN	September	2020	Nurse Leader Award: Ambulatory Practice Services

“Sepsis STAR” recognizes staff who demonstrate Exemplary Performance with the Sepsis Guidelines

- S:** SEP-1 met (3-hr Severe Sepsis bundle & 6-hr Septic Shock bundle met)
- T:** Treatment was Excellent! (role model, exemplary nursing practice)
- A:** Alert was completed (Code Sepsis Process followed, early recognition of Sepsis)
- R:** Responded with Teamwork (swarming was timely, effective team player)
- S:** Saved a life! (Sepsis patient identified early and treatment was timely)

2020
“SEPSIS STARS”

For Exemplary Performance with the Sepsis Guidelines.

Month	Medical Center	Unit	RN Name	Credentials
January	Zion	ED	Anton Lemen	RN
January	Zion	ED	Elizabeth Martinez	RN
January	Zion	ED	Indira Archer-Marrero	RN
January	Zion	ED	Ivanka Spiegel	BSN, RN
January	Zion	ED	Michael Garcia	RN
January	Zion	ED	Nicole Gemelos	RN
January	Zion	ED	Bethany Parker	BSN, RN
January	Zion	ED	Maricel Lutz	RN
January	Zion	ED	Zinnia Agcaroo	BSN, RN
January	SDMC	ED	Jennifer Gonzalez	RN
January	SDMC	ED	Alex Medina	RN
January	SDMC	ED	John Neely	RN
February	Zion	ED	Corrine Binter	RN
February	Zion	ED	David Maddy	RN
February	Zion	ED	Karl Fortin	RN
February	Zion	ED	Summer Sherman	RN
March	SDMC	ED	Luis Lopez-Serrano	BSN, RN, CEN
August	SDMC	ED	Melody Yturralde	BSN, RN
September	Zion	ED	Yenken Dorah Kamara	RN
September	SDMC	ED	David Westenberger	BSN, RN
September	Zion	DOU	Joanette St. Cyr	BSN, RN
September	Zion	ICU	Alicia Duarte-Duron	BSN, RN
October	SDMC	ED	Anthony Rivera	RN
November	Zion	ED	Curtis Wevodau	BSN, RN
November	Zion	ED	Lauren Terzyk	BSN, RN
December	Zion	ED	Tim Laterreur	RN
December	SDMC	ED	David Sanchez	BSN, RN

Kaiser Permanente San Diego Service Area



2020 Good Catch Award: Nursing Recipients

Goals of the Great Catch Program

To reduce the overall incidence of harm through:

- + Identifying potential system errors or problems before they cause patient harm
- + Recognizing staff and physicians for speaking up about concerns
 - + Sharing key learnings across the organization
 - + Strengthening the culture of quality and safety

Selection Criteria

- Submissions are reviewed and selected based on the following:
 - Impact on patient safety
 - Impact on quality of patient care
 - Impact on service (timeliness, efficiency, effectiveness)
 - Opportunity to spread and increase positive impact across the service area and organization
 - Focused on TeamSTEPPS categories of Communication, Leadership, Situational Awareness and Mutual Support

Month	Medical Center	Unit	RN Name/Credentials
January	Zion	SNS	Elizabeth Cronin, RN
February	SDMC	Peri-op	Jessica Rubic, RN
February	Zion	Emergency	Stephanie Gonzalez, RN
February	SDMC	Periop	Ryan Witt, RN
February	San Marcos ASU	OR	Elizabeth Avila, RN
March	Zion	Anesthesia	Minrong Li, CRNA
March	Zion	OR	Kelly Solomon, RN
March	Zion	OR	Angela Christensen, RN
March	Zion	OR	Leah Koepnick, RN
July	SDMC	DOU	Meghan Meyer, RN
July	SDMC	DOU	Allison Alagar, RN
July	SDMC	DOU	Becca Schult, RN
July	SDMC	DOU	Amy Casillas, RN
July	SDMC	ICU	Rhona Sisco, RN
August	Zion	Emergency	Nicole Gemelos, RN
August	Garfield ASU	OR	Rachel Martinez, RN
September	SDMC	6S	Sarah Fiedler, RN
October	ZMC	OR	Ilethia Bentley, RN
November	Garfield ASU	Anesthesia	Kristine Waterlander, NP

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

