Sharp Memorial Hospital 2021

Nursing Report







"When you believe in what you're doing and use your imagination and initiative, you can make a difference."

Samuel Dasl

Welcome

What does it mean to be a nurse today? Although the pandemic greatly increased the visibility, recognition, and appreciation for nurses' daily work, we also faced significant pressures and challenges. Nurses were often in the center of those tensions.

Despite the struggles, it's been amazing to see nurses respond and adapt to new demands and higher expectations. And, I believe, at the end of the day, most nurses will still describe their profession as often difficult but incredibly rewarding.

Nurses have always been experts at learning and evolving our care and practice. Our nursing process is designed for highly effective problem solving, with a built-in mindset for continual evaluation. With that foundation, it isn't surprising that nurses have responded so admirably to the worst crisis our health care system has faced in over a century.

Regardless of the changing circumstances, the core elements of nursing — compassionate care, attention to detail, commitment to our patients and their families, and critical thinking — remain the same. The pandemic accelerated the pace of change, but we were able to adapt rapidly to new technology, treatment plans, medications, and care delivery practices.

Being a nurse today means providing the highest standard of clinical expertise and professionalism; it also means asking questions and seeking answers. As direct caregivers, who better than a nurse to observe patient needs and identify opportunities to improve care? Nurses are in the ideal position to find new ideas, assess them through rigorous study, and deliver evidence-based refinements to clinical practice. Asking questions is what it means to be a nurse; looking for answers is what it means to be a strong professional nurse.

We are all united in our mission to use specialized knowledge, experience, skills, and humanity to promote good health and well-being, ease pain, and save lives, regardless of where we work or our official job title. I'm proud to share this year's annual report. It highlights just a few of the innovations and research projects initiated and led by nurses — innovators who are asking questions, seeking answers, and redefining the practice of the professional nurse.

I hope you will be inspired by their work.

Par Was

Pam Wells, MSN, MSA, RN, NEA-BC Chief Nursing Officer Vice President, Patient Care Services Sharp Memorial Hospital

COVER: (From left) **Debbie Gravitt**, RN, 5 West, **Sarah Briganti**, BSN, RN, 5 West, and **Amanda Doud**, BSN, RN, 5 West, worked on an innovative admission process to improve teamwork (see page 4).

WELCOME



"The truest superpowers are the ones we all possess: willpower, integrity, and most importantly, courage."

~ Jason Reynolds

Transformational Leadership

identifies and communicates vision and values, and asks the involvement of the work group to achieve that vision.

Nurses Make a Difference through Transformational Leadership

Nursing leaders at all levels must transform the values, beliefs, and behaviors in their various practice environments to make a difference in meeting current and future demands. Transformational leadership involves:

- Strategic planning with relevant goals aligned with the organization's mission
- · Advocacy for resources that support these goals, including mentoring and succession planning
- · Visibility, accessibility, and communication among nurses at all levels to improve patient care and the practice environment

Enhancing Belonging in the Practice Environment

Sharp Memorial Hospital (SMH) encourages diverse, equitable, and inclusive care for its patients and within its practice environment. In 2021, diversity and inclusive care was led by the Sharp Equality Alliance (SEA). SEA is a systemwide, nurse-driven, volunteer group that strives to empower diverse voices with varying perspectives to create a sense of belonging. Several improvements in the practice environment were championed by Jonathan Gurrola, RN, an advanced clinician on 4 West (Trauma). Jonathan co-chairs the SMH SEA chapter, represents SMH on the system team, and serves as coordinator for Sharp's Healthcare Equity Index (HEI) evaluation through the Human Rights Campaign. These improvements included:

- Development of patient care policies for LGBTQ+ patients
- Changes in the electronic medical record to identify patients' preferred names and genders
- · Monthly "Safe Speak" forums on equality and diversity issues in health care and beyond
- · Diversity staff education and awareness through Valuing Diversity Stories and monthly awareness events

Jonathan's leadership within SEA and his contributions to equitable and inclusive care was recognized with an individual 2022 C.O.R.E. Award under the Service Pillar.

Outcome

The Human Rights Campaign awarded Sharp HealthCare a full HEI designation for its dedication and commitment to LGBTQ+ inclusion. Sharp HealthCare is the only HEI-designated health care system in San Diego.

Photo: Emily Pierce, BSN, RN, Emergency Department, Transformational Leadership, Clinical Nurse, Nurse of the Year (see page 2).

Promoting Teamwork with a Care Code

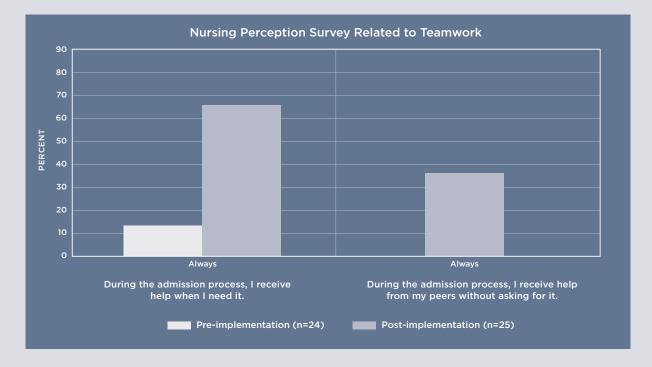
For nursing and ancillary staff, the process of admitting a new patient can be time-consuming and stressful. To reduce staff stress and improve teamwork, the 5 West Unit Practice Council (UPC) created an innovative admission process. The process utilized existing technology to send a "care code" text message to all 5 West staff when a new patient arrived on the unit. Available staff would welcome the patient and offer assistance while settling the patient into their room. UPC members developed and implemented standardized scripting to use during the welcome process, thereby relaying a consistent message about its unit practice and care.

Outcome

5 West saw an improvement in nursing perception related to teamwork. The percentage of nurses who responded "always" to two survey questions about receiving help increased following the implementation of the care code.

Figure 1

Nursing perception related to teamwork increased following the new admit process on 5 West.



Optimizing Care for STEMI Patients

To assist with increasing demand for intensive care beds during the COVID-19 pandemic, leadership on the 6 West progressive care unit evaluated their care delivery process to admit stable low-risk post-percutaneous intervention (PCI) STEMI patients. In collaboration with the hospital's cardiac service line, the team created the STEMI ICU Triage Decision Pathway to safely identify stable post-PCI patients who could be admitted to 6 West instead of the ICU. Criteria for admission included:

- Patient's ability to participate in their care
- Availability of caregiver support
- Absence of complications following procedure
- Absence of persistent arrhythmias post-procedure
- No significant clinical signs of heart failure or neurological deficits

Outcome

In the first three quarters of fiscal year (FY) 2021, ICU bed capacity was optimized with 22 patients admitted to 6 West instead of the ICU. This reflected a 37% increase compared to FY 2020, resulting in savings of \$73,251.

Figure 2 Implementation of the decision pathway for STEMI patients helped increase ICU bed optimization by admitting patients directly to 6 West.



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Ensuring a Safe Practice Environment

Sharp Memorial Hospital implemented the Environment of Care/Life Safety Leader Rounding to proactively ensure a safe practice environment and meet The Joint Commission (TJC) regulatory requirements. As part of this initiative, nursing leadership were educated about TJC regulatory requirements related to the safe environment of care. In addition, nursing leaders:

- · Accepted greater accountability to ensure regulatory compliance in their units
- · Implemented monthly unit rounding to identify high-risk environmental safety issues
- · Reported safety issues about units that needed immediate resolution during daily operation
- · Ensured information related to safety and compliance issues was shared among their staff

On August 3, 2021, SMH successfully passed TJC's hospital accreditation survey with no conditional findings in the Environment of Care or Life Safety. The new leadership rounding process contributed to ongoing survey readiness and a successful survey. The percentage of compliance with environmental and life safety standards increased to 92%.

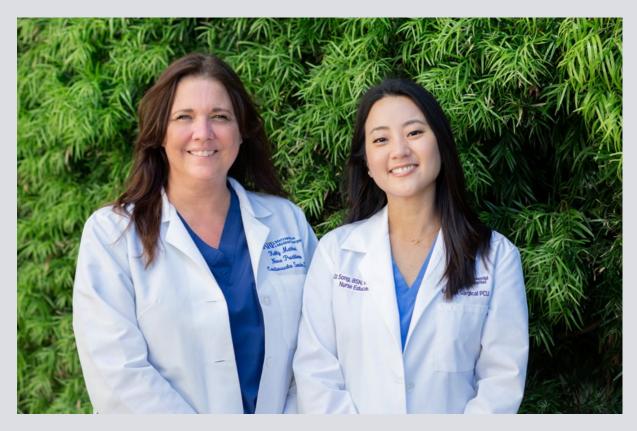


Photo: (from left) Kelly Matthaei, MSN, RN, ACNPC-AG, CCRN, Cardiac Administration and Liz Song, BSN, RN, PCCN, 6 West, optimized the care for STEMI patients resulting in financial savings for Sharp Memorial (see page 5).



"The best way to find yourself is to lose yourself in the service of others."

Structural Empowerment

develops strong partnerships to improve patient outcomes and the health of the communities we serve.

Nurses Make a Difference through Structural Empowerment

Structures and programs support nurses at all levels to make a difference and improve outcomes through professional development and partnerships. Structural empowerment includes:

- Involvement with organizational-level interprofessional decision-making groups and affiliation with or participation in professional organizations
- · Professional development through advancing education and specialty certification
- Teaching and role development, including professional development activities and transition-to-
- Commitment to community involvement at local, regional, and global levels to provide culturally and socially sensitive care
- · Recognition of nurses, especially those addressing organizational strategic priorities and care of patients

Recognizing Error Prevention

The Great Catch Award Program at Sharp Memorial Hospital (SMH) recognizes staff who — because of their questioning attitude - intervene and prevent safety events from occurring. In 2021, the Great Catch program recognized Nick Haluskey, a former clinical nurse on the 5 West progressive care unit, who prevented a medication error not only within SMH but the entire Sharp HealthCare (SHC) system.

During one of his shifts, Nick noticed that the pill labeled Zyprexa — an antipsychotic medication - looked different than what he was used to seeing in terms of shape and color. Instead of administering the medication, Nick looked up the pill online using the pill number and color. He discovered that the pre-packaged medication was actually Zoloft, an antidepressant. Nick immediately notified the SMH Pharmacy about the discrepancy, and the mislabeled pills were removed from the medication dispensing machine. Further investigation into the event revealed a packaging error at the SHC Central Pharmacy. All mislabeled medication packets previously distributed across the system were collected and returned to Central Pharmacy. Nick's questioning attitude ensured that no patients were harmed by the error.

Outcome

Nick's diligence prevented medication errors across SHC. His action prompted Central Pharmacy to change their processes to prevent a recurrence of this type of error. As a Great Catch Award recipient, Nick was recognized on his unit and during an SMH Quality and Patient Safety Council meeting, where hospital leaders review quality and safety dashboards, trends, action plans, and progress toward achieving a high-reliability organization.

Contributing Time and Talent in the Community

Recognizing their role as stewards of The Sharp Experience, members of the 1 West Oncology Unit Practice Council (UPC) implemented a campaign called "It Takes a Village" to increase volunteerism among its staff. As part of the initiative, several 1 West staff volunteered their time and clinical expertise at local non-profit organizations throughout the year. Their contributions included:

- Camp experiences: Nursing care at a program for grieving children experiencing the loss of a family member
- Operations Doula: Blood donations to support labor and delivery for pregnant teens, low-income, and Spanish speaking women in the San Diego area
- San Diego County vaccine clinics: Support at COVID-19 vaccination clinics for community, patients and staff
- American Heart Association: Participation in fundraising efforts
- Local nursing schools: Providing preceptorships for local nursing students

Outcome

Despite the personal and professional challenges posed by the COVID-19 pandemic, staff at 1 West contributed over 550 volunteer hours in 2021 benefitting the San Diego community.

Maintaining the Pipeline for Future Nurses

Clinical rotations and preceptorships provide nursing students with valuable hands-on learning opportunities within the hospital setting. The unpredictable continuation of the COVID-19 pandemic paused clinical student placements at local hospitals. Despite the constraints of the pandemic, Sharp Memorial Hospital continued to provide nursing students with clinical rotation opportunities in a safe learning environment by:

- Reducing cohort sizes from 10 to a maximum of eight students per semester
- · Limiting the number of students in the Intensive Care Unit and Emergency Department
- Educating students on proper use of personal protective equipment
- Ensuring enhanced supervision and vigilance by nursing preceptors
- Requiring proof of vaccination

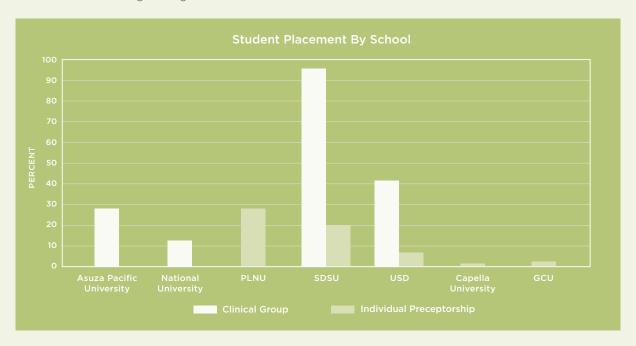
By adapting to the changing COVID-19 pandemic, SMH nurses continued to have a meaningful impact on the education of future nurses in San Diego County.

Outcome

In 2021, SMH provided clinical rotations to 177 nursing students from schools throughout San Diego County. In addition, 47 undergraduate and 12 graduate nursing students received individualized preceptorships from SMH's advanced practice nurses and nursing leaders.

Figure 3

Despite challenges presented by the COVID-19 pandemic, Sharp Memorial Hospital maintained its commitment to training nursing students.



Committing to Professional Certification

Sharp Memorial's 6 North surgical acute care unit is the hospital's designated bariatric and surgical unit. To ensure 6 North nurses demonstrate mastery of skills and knowledge in caring for post-operative patients, the leadership team identified a need to promote professional nursing certifications among its staff. The unit set a goal to improve professional nursing certifications in bariatric and medical surgical nursing from 61.4% in 2019 to 70% in 2021. To achieve this goal, the 6 North team:

- Determined interest for the certification
- Assessed and addressed individual barriers to certification
- Developed course materials
- Partnered with professional organizations for content review materials
- Assisted staff with financial incentives such as exam fees and post-certification bonuses

Outcome

In 2021, 6 North achieved its unit goal with 70.5% of nurses receiving either a Certified Bariatric Nurse or Certified Medical Surgical RN certification.

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Figure 4
More than 70% of nurses on 6 North have achieved a professional certification.





Photo: (from left) Alyson Connors, BSN, RN, OCN, 1 West, Shannon Hardi, BSN, RN, OCN, 1 West and Dahlia Al Eshaki, BSN, RN, 1 West, implemented a campaign called, "It Takes a Village" to increase volunteerism among its staff (see page 9).

Congratulating Our Scholarship Recipients

Name	Education Level	Scholarship Type
Ann Lawani	PhD	Caster
Arielle Ferber	MSN	Reil
Bryanne Marino	MSN	Caster
Cambria Love	MSN	Caster
Cesilee Finley	MSN	Caster
Christina Seiler	BSN	Caster
Dan Marinelli	MSN	Caster
Elizabeth Song	MSN	Caster
Krystyna Antoine	MSN	Caster
Mary Wisdom	MSN	Caster
Merari Morales	MSN	Reil
Molly Bauer	PhD	Caster
Nicole Rumpf	MSN	Caster
Patty Magdaluyo	PhD	Hubbard
Entry to Practice (ETP)		
Ashlyn Sao	ETP	Jim & Mary J. Wiesler
Brenda Campos	ETP	Daniel L. Gross
Elaine De Jesus	ETP	Jim & Mary J. Wiesler
Hans Hartman	ETP	Jim & Mary J. Wiesler
Jessica Valdez	ETP	Jim & Mary J. Wiesler
Katrina Gozun	ETP	Jim & Mary J. Wiesler
Kristen Phung	ETP	Jim & Mary J. Wiesler
Marga Klages	ETP	Jim & Mary J. Wiesler
Sharlene Reyes	ETP	Daniel L. Gross



Photo: (from left) Kristen Crawford, MSN, RN, 3 North and Yuri Stein, BSN, RN, 1 West, serve as preceptors for nursing students placed at Sharp Memorial (see page 9).

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"Not everything that is faced can be changed, but nothing can be changed until it's faced."

~ James Baldwin

Exemplary Professional Practice

is an overarching conceptual framework for continuous, consistent, efficient and accountable patient care delivery.

Nurses Make a Difference through Exemplary Professional Practice

With a comprehensive understanding of the role of the nurse within the interprofessional team, nurses make a difference by applying their professional role to achieve desired patient care outcomes. Delivering exemplary professional practice includes the following essential components:

- Professional practice model
- Care delivery system(s)
- Interprofessional care
- Staffing, scheduling, and budgeting processes
- Accountability, competence, and autonomy
- Ethics, privacy, security, and confidentiality
- · Culture of safety
- Quality-care monitoring and improvement

Supporting the Care Delivery System

Critical staff shortages during the 2021 winter COVID-19 surge led to the development of the surge tech role at Sharp Memorial Hospital (SMH). Non-licensed senior-level or newly graduated nursing students were hired as surge techs to assist nursing staff with supervised patient care. A task force of SMH clinical nurse specialists and educators led the following:

- Developed responsibilities and scope of practice for the new role
- Created a pathway and skills checklist
- Trained and validated competency (e.g., blood glucose checks and straight catheterization)
- Facilitated orientation with nursing preceptors

Nurses benefited from the additional staffing support while surge techs had an opportunity to enhance their nursing knowledge and experience.

Outcome

The task force trained 64 nursing students and new graduate nurses into the surge tech role. A survey of surge techs related to orientation, training, responsibilities, and scope of practice elicited the following responses:

- 92% of surge techs and 95% of nursing staff strongly agreed that patient care responsibilities and scope of practice were clear
- 95% of surge techs agreed or strongly agreed that the orientation prepared them for the surge tech role

Additionally, most of surge techs were subsequently hired into the nurse residency program.

Standardizing Patient Care Practices

Patient bathing and chlorhexidine (CHG) use play a vital role in preventing hospital-acquired infections (HAIs), particularly surgical site infections (SSI). Sharp Memorial Hospital implemented a project to standardize daily patient bathing products and the use of CHG to prevent HAIs. The project workgroup:

- · Reviewed current state of patient bathing, identified best practices, and created standard work
- Identified patient populations that would benefit from daily CHG bathing
- Collaborated with the Sharp system products team to switch to an easy-to-use, patientpreferred, basin-free bathing product
- Analyzed data related to superficial SSIs in "clean" procedures. Clean procedures have surgical incisions that are sterile, closed, and inflammation free.

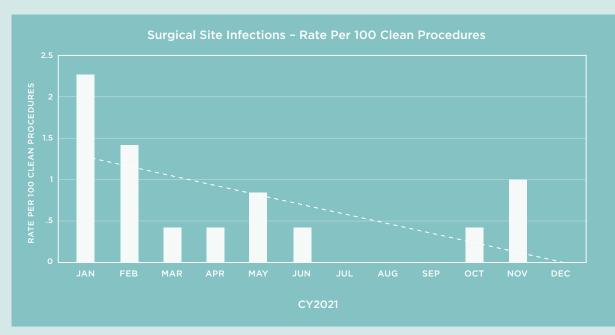
In May 2021, a pilot group implemented the new CHG bathing process on 4 West (Trauma), 6 North (surgical acute care), and the Medical Intensive Care Unit. In July 2021, the new practice was rolled out to all SMH units and eventually to the rest of Sharp. The new CHG bathing practice is now the established practice and standard work in our system Nursing Guidelines of Care.

Outcome

The rate of superficial SSIs for clean procedures decreased from 2.3 in January 2021 to zero in December 2021.

Figure 5

The new CHG bathing resulted in a reduction in surgical site infections for clean procedures.



Improving Interprofessional Care of High-Risk Patients

Following a serious patient safety event related to an external defibrillator vest (LifeVest™), a team of nurses from Sharp Memorial Hospital performed a Failure Mode Effect Analysis (FMEA) to improve care of patients with external defibrillator vests as well as those considered at high risk for sudden cardiac death. The team reviewed gaps in the current process and implemented the following evidence-based interventions:

- Developed a hospital policy for the management of patients admitted with a LifeVest™
- Created a standard order set for cardiac monitoring of high-risk patients
- Provided targeted education for nursing and hospitalist groups to stress the importance of continuous cardiac monitoring for this patient population and utilization of the standard order set

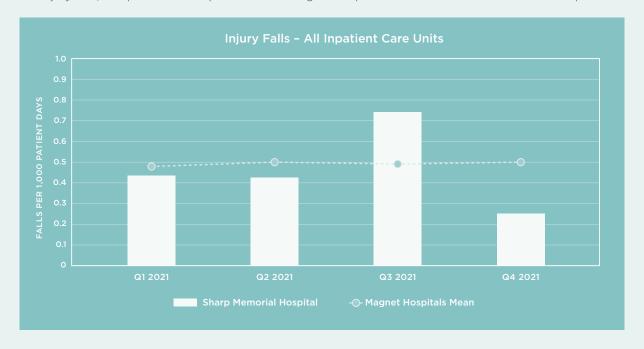
Outcome

With improved monitoring practices of patients considered at high risk for sudden cardiac death, there were no serious safety events reported among this patient population in 2021. Following implementation of nursing standard work and order-set implementation, the outcome severity score for patients admitted with risk for sudden cardiac death decreased by 87% using the FMEA.

Tracking What Matters: The Big Three - Clinical Indicators, Nursing Satisfaction, and Patient Satisfaction

Clinical Indicator: Injury Falls - All Inpatient Units

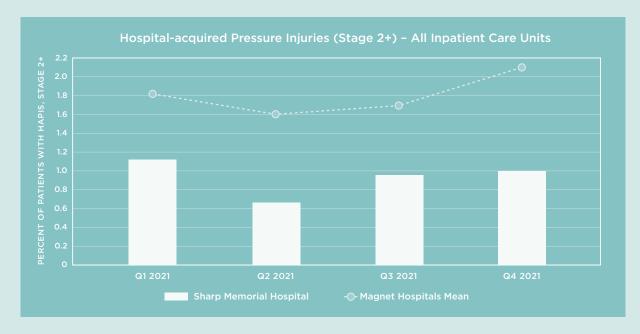
Figure 6
For injury falls, Sharp Memorial outperformed the Magnet Hospital Mean benchmark three out of four quarters.



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Clinical Indicator: Hospital-Acquired Pressure Injuries, Stage 2 and Above – All Inpatient Units

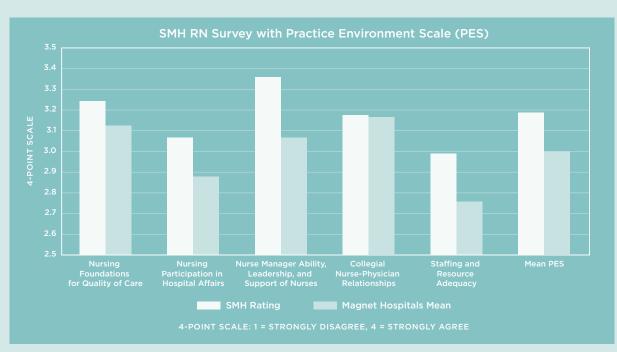
Figure 7
For HAPI stage 2 and above, Sharp Memorial outperformed the Magnet Hospital Mean benchmarks for all four quarters.



Nursing Satisfaction - All Nursing Units

Figure 8

The average nurse satisfaction scores for all nursing units outperformed the national mean in all six categories.



Patient Satisfaction - All Inpatient Units

Figure 9
Sharp Memorial consistently strives to remain in the top 10th percentile for patient satisfaction compared with all large hospitals. Scores for the past two years have been impacted by the pandemic.





Photo: (from left) Mary Wisdom, BSN, RN, CCRN, Telemetry, Kristi Ortiz, MSN, RN, ANP-BC, Cardiac Administration and Lisa Kelley, MSN, RN, OCN, Quality Assurance, improved cardiac monitoring practices for the safety of high-risk patients (see page 16).

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"An arrow can only be launched by pulling it backward. So, when life is dragging you back with difficulties, it means it's going to launch you into something great."

~ Paulo Coelho

New Knowledge, Innovations and Improvements

are the integration of evidence-based practice and research into clinical and operational processes.

Nurses Make a Difference through New Knowledge, Innovations and Improvements

It is a professional responsibility for nurses to make a difference by contributing and applying the latest evidence to improve patient, workforce, and organizational outcomes. New knowledge, innovations, and improvements are accomplished through:

- Research studies and dissemination of findings
- Evidence-based practice to introduce or revise practices
- Innovation, including adoption of technology and design/redesign of workflows or environment

Innovating Care of the ECMO Patient

In 2021, the Surgical Intensive Care Unit (SICU) at Sharp Memorial Hospital cared for several COVID-19 patients who were mechanically ventilated, sedated and required ECMO (extracorporeal membrane oxygenation). To prepare these patients for early weaning from mechanical ventilators and improve mobilization, SICU used a specialty bed to provide "verticalization therapy" - a process whereby critically ill patients are gradually but safely positioned upright to improve respiratory function and muscle strength. Stable, but ventilated, patients on ECMO were placed on these beds and the vertical degree gradually increased. Eventually, these patients were weaned off mechanical ventilation and sedation, allowing SICU caregivers and physical, occupational and respiratory therapy staff to safely mobilize these patients.

Outcome

- Seven of the 19 COVID patients requiring ECMO received verticalization therapy.
- This therapy facilitated a shorter length of stay and greater likelihood of being discharged
- In April 2021, SICU discharged its first "awake" ECMO patient who did not require rehabilitation services.

Photo: Sarah Jones, BSN, RN, CCRN, CNRN, SICU, New Knowledge, Innovations, and Improvements, Clinical Nurse, Nurse of the Year (see page 20).



Photo: (from left) Topaze Rawlinson, BSN, RN, CCRN, SICU and Jon Goldstone, MSN, RN, SICU, innovated ECMO care to help patients return home (see page 16).

Fostering Resilience Among Staff

Recognizing the stress and challenges experienced by staff during the COVID-19 pandemic, Night Shift Practice Council (NSPC) members established a goal to decrease staff stress and promote resilience through an evidence-based practice project. The PICO (patient/population, intervention, comparison and outcome) question asked was, "For direct-care hospital staff, will the use of a resilience cart activity, as compared to current practice, decrease subjective reports of stress following the activity?"

After reviewing current evidence on stress and resilience in the workplace, project members developed on-the-job activities for four themes related to resilience: connection, optimism, purpose, and self-care. Sharp Marketing designed kits that were assembled by NSPC members and housed in 20 portable carts deployed to inpatient units. All resilience kits included a QR code/web URL for voluntary completion of a web-based, 24-item survey, which included five demographic questions, four Subjective Stress Score items, six Brief Resilience Scale items, and four self-developed items.

Outcome

Of the 135 participants who completed the survey, most were frontline (86%) nurses (82%) on night shift (65%). There was a statistically significant decrease in subjective stress scores following completion of a resilience cart activity (z = -8.794, p < 0.001). Common activities included connection – sending card (40%); optimism – aromatherapy (37%); purpose – finger labyrinth (54%); and self-care – coloring (68%). Thirty-seven percent of respondents participated in more than one resilience kit. A statistically significant association was found between participants' Brief Resilience Scale score and satisfaction with available hospital/organizational resources in managing workplace stress (r = 0.295, p = 0.001). This project provided on-the-job activities that decreased subjective stress levels and promoted, built, and/or sustained staff resilience.

Featured Study: COVID-19 and Nurse Resilience Background/Significance

The pandemic resulted in numerous stressors on the nursing workforce. Personal resilience may help nurses effectively endure these stressors and inform leadership about support strategies.

Aim

To determine the prevalence of resilience among nurses at one Southern California hospital during the COVID-19 pandemic and examine the relationship between the pandemic and the nurses' behavioral and mental health.

Methods

A non-randomized, non-experimental concurrent convenience sample using three instruments: the Patient Health Questionnaire, General Anxiety Disorder, and Brief Resilience Scale.

Results

Participants (278) included clinical nurses (71.9%), advanced clinicians (11.5%), lead clinical nurses (10.4%), supervisors or managers (2.5%), and other roles (3.6%). Most reported as Millennials (59.9%), followed by Generation Z (14%). Work settings were progressive care (30.2%), acute care (23%), and intensive care (15.5%). Potential stressors included assignment to a new unit (17.9%) and a housing disruption (17.9%). Resilience was categorized as high (15.6%), moderate (65.2%), and low (19.1%). Depression and anxiety measures were similar: low to mild (62.2% and 62.6%, respectively) and moderate to severe (37.8% and 37.4%, respectively).

Conclusions and Implications for Practice

The majority of nurses were moderately resilient with low to mild depressive symptoms and anxiety. However, leadership noted reports of low resilience and moderate to severe depression and anxiety. Supportive resources were shared, including COVID-specific support group sessions for caregivers; mindfulness and resilience classes; a self-care webinar series; weekly resilience topics led by a mental health physician expert; and implementation of a Stress First Aid kit.



Photo: Whitney Topping, BSN, RN, CCRN, CSC, SICU, Sharp Memorial Overall Clinical Nurse of the Year.

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Adopting Technology to Improve Oncology Care

Nurses and leadership on the 1 West oncology unit at Sharp Memorial collaborated on a technology project with an interprofessional team of Sharp HealthCare staff (pharmacists, nurses, physicians and informaticists) to improve the quality of care provided to oncology patients. Cerner Oncology enabled computerized physician order entry for chemotherapy regimens.

The project's focus was transitioning previously handwritten physician orders for chemotherapy regimens into the electronic health record. The project was later expanded to include:

- Standardizing computer systems onto one platform for inpatient and outpatient treatments improving standard work, communication, and patient safety
- · Adding supportive therapies and patient specific care to chemotherapy regimens as "PowerPlans"
- Including links to the evidence-based National Comprehensive Cancer Network to support regimens and treatment types
- · Improving care coordination and access to patient information between the inpatient and outpatient providers
- · Streamlining various processes related to the approval for new chemotherapy regimens

Outcome

A key performance outcome resulting from the use of technology to enhance the care of oncology patients was zero denials for chemotherapy infusion in FY21. Sharp Memorial realized a 97% cost savings for denied claims compared to FY 2019 baseline denials - amounting to \$916,289 saved.



Photo: (from left) Verna Sitzer, PhD, RN, CNS, Nursing Administration, Tracy Nanthavong, BSN, RN, 1 West, and Annie Thao, BSN, RN, 7 West, developed resilience kits to support team members and help decrease stress (see page 21).



Photo: Heather Bongiovanni, MS, RN, ACCNS-AG, AGPCNP-BC, CBN, CMSRN, 6 North, received her Master of Science in nursing.

Dissemination And Degrees

*Names in bold indicate Sharp Memorial nurses.

Internal Presentations - Poster

Nanthavong, T., Sitzer, V., Thao, A., & Togami, M. Effect of a resilience cart activity on subjective stress levels in hospital staff during the COVID-19 pandemic. Night Shift Practice Council, San Diego, CA. November 11, 2021.

Internal Presentations - Podium

Carr, T., Nanthavong, T., & Sitzer, V. Collaborative governance: Interprofessional understanding, commitment, and perceptions. Collaborative Governance Steering Council, Sharp Memorial Hospital, San Diego, CA, June 10, 2021.

Carroll, E. Healthy Aging Team. Sharp Memorial Hospital Directors Meeting, June 6, 2021.

Dasinger, D. TeamSTEPPS 2021. Acute Care and PCU Advanced Clinicians and Above, Sharp Memorial Hospital, San Diego, CA, March 25, 30 & 31, 2021.

Humphries, D. That Was Close: Improving Reports in Patient Safety Events and/or Near Misses. 7th Annual Interprofessional Research & Innovations Conference, San Diego, CA, September 29, 2021.

Nanthavong, T., Carr, T., & Sitzer, V. Collaborative governance: Interprofessional understanding, commitment, and perceptions. Night Shift Practice Council, Sharp Memorial Hospital, San Diego, CA, June 30, 2021.

Wells, P., & Crawford, J. Joy in Work. Sharp Memorial Hospital Inspired Leader Session, July 28, 2021.

Internal Presentations - Webinar or Other

Dasinger, D. Crucial Accountability. Sharp Memorial Hospital, San Diego, CA, May 12, 19, & 26, and November 10, 17, & 24, 2021.

Granados, E., & Tran, K. Lean Six Sigma Yellow Belt Workshop. Sharp Memorial Hospital Nurse Residency Program, San Diego, CA, September 14, and November 3, 2021.

Hudnet, C., & Morton, N. Cardiogenic Shock. Cath Lab Journal Club, September 9, 2021.

Rosenberg, L., Healy, M. & Choi, A. San Diego EMA - New Mobile Intensive Care Nursing Certification - 32 Hour Course. Sharp Memorial Hospital, San Diego, CA, November 1-18, 2021.

Thomason, T. Lean Six Sigma Yellow Belt Virtual Workshop. Sharp Memorial Hospital Nurse Residency Program, San Diego, CA, March 3, 2021.

Wells, P. Microsystems. Sharp Memorial Hospital Directors Meeting, September 15, 2021.

External Presentations - Poster

Nanthavong, T., Sitzer, V., Thao, A., & Togami, M. Effect of a Resilience Cart Activity on Subjective Stress Levels in Hospital Staff During the COVID-19 Pandemic. 7th Annual Sharp Interprofessional Research & Innovations Virtual Conference, San Diego, CA, September 29, 2021.

External Presentations - Podium

Baggs, W. & Humphries, D. Assign Right: A RN Assignment Making Process. 2021 ANCC National Magnet and ANCC National Pathway to Excellence Conference, Atlanta, GA, November 11, 2021.

Carr, T., Nanthavong, T., & Sitzer, V. Collaborative Governance: Interprofessional Understanding, Commitment, and Perceptions. 7th Annual Sharp Interprofessional Research & Innovations Virtual Conference, San Diego, CA, September 29, 2021.

Humphries, D. That Was Close: Improving Reports in Patient Safety Events and/or Near Misses. 7th Annual Sharp Interprofessional Research & Innovations Virtual Conference, San Diego, CA, September 29, 2021.

Lhamu, T. Doctor of Nursing Practice Degree - What's Next? Improving Health Outcomes through Translational Scholarship Symposium, Johns Hopkins University, Baltimore, MD, May 24, 2021.

Lhamu, T., & Ramos, A. Score the Snore: Proactive Nursing Identification of Obstructive Sleep Apnea in Surgical Patients. 14th Annual Collaborative Evidence-Based Practice Institute Virtual Conference and Graduation, San Diego, CA, November 9, 2021.

McDougall, L. Developing COVID-19 Patient Care Guidelines. National Association of Clinical Nurse Specialists 2021 Online Annual Conference, March 10, 2021.

McDougall, L., & Saenz, T. Agitation Management in Traumatic Brain Injured Patients Utilizing the Agitated Behavior Scale. 14th Annual Collaborative San Diego Evidence-Based Practice Institute Virtual Conference and Graduation, San Diego, CA, November 9, 2021.

Nilsen, S., King, C., Mangiduyos, K., Training Acute Care Medical-Surgical Nurses in Caring for Patients with Psychiatric Comorbidities. 14th Annual Collaborative Evidence-Based Practice Institute Virtual Conference and Graduation, San Diego, CA, November 9, 2021.



Photo: Heather Rodrigues, MSN, RN, CNS, CEN, Emergency Department, Structural Empowerment, Nurse Leader, Nurse of the Year.

Sanderson, S. Staffing Innovations, a New Way to Approach an Age-Old Problem: The T-12 Model of Care. American Association of Critical Care Nurses 2021 National Teaching Institute & Critical Care Exposition (Virtual), May 24-27, 2021.

Thomason, T. Change Theories and Evidence-Based Practice. San Diego Evidence-Based Practice Institute, San Diego, CA, September 14, 2021.

Thomason, T. Sustaining & Spreading Your EBP Project. San Diego Evidence-Based Practice Institute, San Diego, CA, October 12, 2021.

Thomason, T. Incorporating Your Professional Role into your New Graduate Interview. Point Loma Nazarene University, San Diego, CA, October 25, 2021.

External Presentations - Webinar or Other

Binda, K., Ostenson, K., & Tran, K. Lean Six Sigma Yellow Belt Virtual Workshop. Sharp HealthCare, San Diego, CA, May 12, 2021.

Publications

Kelly, C., Sitzer, V., Neumann, K., Williams, J., & Ecoff, L. Implementation and evaluation of a healthcare system's approach to surge staffing and training. Journal for Nurses in Professional Development, June 11, 2021 - Volume - Issue - doi: 10.1097/NND.0000000000000760.

Munsey, M., Juarez-Alvarado, S., Wells, P., & Sitzer, V. Maintaining person-centered care in hospitals during restrictions on family presence. Nursing Management (Harrow). Published online November 30, 2021. doi:10.7748/nm.2021.e2011

Yogo, N., Greenwood, K.L., Thompson, L., Wells, P.J., Munday, S., Smith, T.C., Smith, B., & Bakhtar, O.R. Point prevalence survey to evaluate the seropositivity for coronavirus disease 2019 (COVID-19) among high-risk healthcare workers. Infection Control & Hospital Epidemiology. 42(10):1260-1265; 2021. doi:10.1017/ice.2020.1370.

Earned/Advanced Nursing Degrees in 2021

Amber Hamilton-Dula, Master of Science in Nursing, University of Cincinnati, December 2021

Donna Dasinger, Master of Science in Nursing, Western Governor's University, October 2021

Doris Nwosu, Master of Science in Nursing: Family Nurse Practitioner, Azusa Pacific University, December 2021

Victoria Dayrit, Master of Science in Nursing: Family Nurse Practitioner, Azusa Pacific, May 2021

Heather Bongiovanni, Master of Science in Nursing: Adult Gerontology Clinical Nurse Specialist & Primary Care Nurse Practitioner, San Diego State University, May 2021

Kevin Piscopo, Master of Science in Nursing Leadership, Grand Canyon University, October 2021

Ashlee Smith, Doctor of Nursing Practice: Family Nurse Practitioner, University of San Diego, May 2021

Special Thanks

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