

**2021**Sanford Bismarck

# **NURSING REPORT**



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Wendy Kopp,
PhD, MSN, RN
Vice President of Nursing
and Clinical Services

#### **ORGANIZATIONAL OVERVIEW**

# A Message from Your Vice President of Nursing and Clinical Services

As I reflect on this past year and look into the future, I'm filled with hope and promise because of the amazing work of our nurses. Our nurses have been resilient throughout the pandemic and continue to provide high-quality care with compassion to our patients.

Through it all, they've put safety and quality of care to the forefront, helping us keep the momentum going in our SAFE (Sanford Accountability for Excellence) journey toward becoming a high-reliability organization and reaching zero preventable harm.

From the dedication our nurses have shown to our SAFE program and to the strength they've demonstrated throughout the pandemic, our nurses have exemplified their resilience and determination. Together, with the support of their peers, our nurses have exemplified their resilience as a united front to ensure they continue to meet the needs of our patients, their families and the communities we serve. Our nurses are an unstoppable force and true heroes in health care.

Thank you to all who answered the call to be a Sanford Health nurse.

With much gratitude,

Wendy Kopp, PhD, MSN, RN Vice President of Nursing and Clinical Services

#### Our Mission, Vision and Values

#### **OUR MISSION**

Dedicated to sharing God's love through the work of health, healing and comfort.

#### **OUR VISION**

Improving the human condition at every stage of life through exceptional care, spiritual enrichment, innovation and discovery.

#### **OUR NURSING VISION**

The provision of highly reliable, safe, person-centered care fostered by a healthy work environment of skilled teams working collaboratively across all care settings.

#### **OUR VALUES**

**Calling** Demonstrating enthusiasm for those we serve,

our vocation and the organization's mission.

**Courage** Having strength to persevere, innovate,

use our voices and take action.

**Family** Celebrating the connection and commitment

we have to each other through it all.

**Community** Providing care in a diverse range of settings

and environments with a focus on the wellness

of individuals.

**Service** Sharing God's love through actions that reflect

compassion, acceptance, love, humility and sincerity in keeping with the common Lutheran heritage of Sanford Health and the Good Samaritan Society.

**Resolve** Adhering to systems that align actions to

excellence, efficiency and purpose.

**Advancement** The pursuit of individual and organizational

growth and development.



#### **About Sanford Health**

Sanford Health, one of the largest health systems in the United States, is dedicated to the integrated delivery of health care, genomic medicine, senior care and services, global clinics, research, and affordable insurance. Headquartered in Sioux Falls, South Dakota, the organization includes 46 medical centers, 1,525 physicians and more than 200 Good Samaritan Society senior care locations in 24 states and 10 countries.



**46** medical centers



224 clinic locations



233 senior living communities



158 skilled nursing and rehab facilities



**216,000** Sanford Health Plan members



**47,757** employees



**1,525** physicians, **1,214** advanced practice providers and **8,716** registered nurses delivering care in more than **80** specialty areas



**Centers of Excellence:** Cancer, Children's, Heart, Orthopedics & Sports Medicine, Women's

#### Sanford Health Culture

Sanford Health is excited to be on a journey of tremendous growth and momentum. With our vast geography, cutting-edge medicine, sophisticated research, advanced education and our own health insurance plan, we are unique in what we do and how we do it.

Through relationships built on trust and successful performance and a vision to improve the human condition, Sanford seeks to make a significant impact on health and healing. With a commitment to diversity and inclusion, our journey as an organization includes continually building on the diverse talents, experiences and beliefs of our employees, as well as the patients and communities we serve.

We are proud to be from the Midwest and to impact the world.

SANFORD BISMARCK 2021 QUICK FACTS				
Licensed beds including nursery/NICU beds	269	Emergency dept. visits	34,483	
Inpatient admissions	14,698	Deliveries	1,544	
Daily census	201.9	Nursing staff	1,044	
Average length of stay	4.51	Female	92.9%	
Case mix index	1.65	Male	7.1%	
Outpatient visits	230,326	Avg. age	38.8	

SANFORD HEALTH ENTERPRISE ANNUAL PATIENT VOLUMES			
Outpatient and clinic visits	5.2M		
Admissions	82,848		
Surgeries and procedures	127,875		
Births	9,163		
Emergency dept. visits	194,834		



#### **COVID-19 Reflection**

The COVID-19 pandemic continued in 2021 with a Delta variant surge lasting approximately four months beginning in late August and lasting into December. This was a long and difficult surge with high COVID-19 patient acuity in all sectors of our inpatient and ambulatory areas with particular impact on our critical care providers and nursing staff.

To accommodate the influx of COVID-19 patients, several nursing units were utilized including 4SE, ICU and the newly renovated 1NW unit. New negative pressure isolation rooms were added to the newly renovated NICU and Family Birth Center units to care for the increased number of COVID-19-positive pregnant patients.

To ensure safety among our workforce and to further protect our patients, employees were required to be fully vaccinated for COVID-19 by Nov. 1, 2021. Educational sessions and leadership-guided meetings were held to allow staff the opportunity to ask questions and voice concerns.



COVID-19 Reflection in Photos





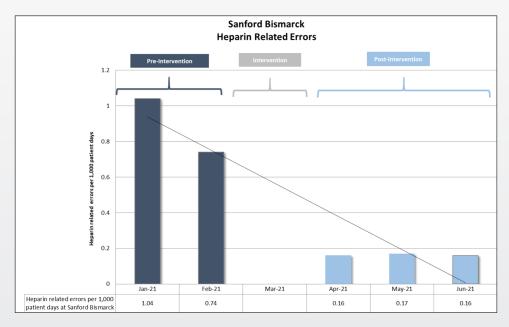
# TRANSFORMATIONAL LEADERSHIP LEADING FOR TODAY AND THE FUTURE

Transformational nurse leaders throughout the organization are leading teams today, influencing change in the organization beyond nursing and leading nursing to where it needs to be for the future.

#### **Strategic Planning**

#### **HEPARIN ORDERS**

According to the Institute for Safe Medication Practices (ISMP), high-alert medications are drugs that bear a heightened risk of causing significant patient harm when they are used in error. Although mistakes may or may not be more common with these drugs, the consequences of an error are more devastating to patients. The need for accurate dosing prompted Sanford Bismarck to change their heparin ordering process from ml/hr to a more accurate weight-based dosing of units/kg/hr. Since the changes were implemented in May 2020, there had been more than 103 heparin-related medication errors. In order to prevent patient harm and align to the Sanford Bismarck Strategic Nursing Plan goal of providing safe and reliable nursing care, a multidisciplinary group was brought together to process map the current state and develop an improved workflow.

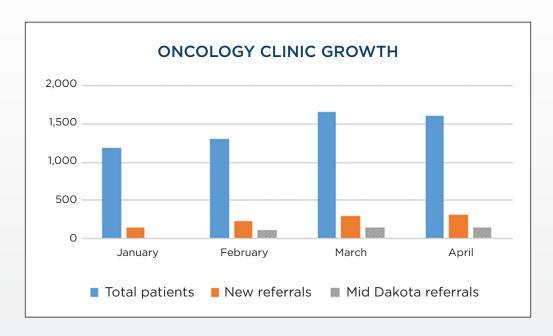


During process mapping, it was identified that errors were found to be most prominent upon initiation of the drip and with the titration based upon the PTT levels. We implemented our SAFE practices of cross-checking, validating and verifying and clear communication to decrease the chances of error. A new workflow was then created and shared at Nursing Senate and Professional Management. Heparin-related errors per 1,000 patient days went from a staggering 1.04 to 0.16 based on implementation of the improved workflow.

#### Advocacy and Influence

#### ADVOCATING FOR ONCOLOGY NURSE/NAVIGATOR

The abrupt closure of a local oncology clinic left hundreds of oncology patients in the area in need of a new place to receive care. The Sanford Cancer Center immediately stepped in to help these displaced oncology patients. As a result, the Sanford Cancer Center was averaging 20 new referrals per day. These new patients were all evaluated through the oncology navigators who began experiencing difficulty managing this increased workload. In addition, the clinic nurses were also feeling the impact. Upon hearing concerns, leaders of the Sanford Cancer Center advocated for additional resources in the form of employees to help in both the nurse navigator and clinic nurse positions. Leadership demonstrated advocacy to not only the clinical nursing staff, but also the oncology patients to whom we provide care.



#### Visibility, Accessibility and Communication

#### **NURSING VOICE**

An additional opportunity for elevating nursing voice was implemented this year. Concerns, areas of opportunity and questions are now being submitted to a Nursing Voice portal and those submissions are sent to the appropriate owners to be addressed and acknowledged by the leadership teams. Nursing Voice submissions are now available through the Bismarck Nursing SharePoint site. Nurses can choose to remain anonymous if they wish, but after they submit an SBAR, they can view the Sanford Health leader assigned to the submission and their response. After the portal became available in the last two months of 2021, eight submissions were addressed and posted to the site. Since then, submissions have continued to grow. The Nursing Voice portal on the SharePoint site enables anyone with similar questions, interests or concerns to become engaged within the process.

# STRUCTURAL EMPOWERMENT SUPPORTING PRACTICE

Structural empowerment gives nurses the ability to have a meaningful say in the design of their nursing practice through Nursing Shared Governance and input on nursing policies and procedures. Structural Empowerment also provides structure to support nurses' professional development.

#### **Nursing Shared Governance**

#### NURSING SHARED GOVERNANCE EVENT

Nursing senators, senior leadership and other leaders came together to strengthen the Nursing Shared Governance structure. The morning of this packed day began with opportunities for growth, including the "State of the Nurse" presented by Sanford Health's enterprise chief nurse, Erica DeBoer. Council chairs presented the council's goals, and Randi Schaeffer, the outgoing interim vice president of nursing and clinical services, gave a personal development presentation called "Let's Blow Bubbles." The afternoon was filled with creative activity breakout sessions followed by closing comments by Vice President of Nursing and Clinical Services Wendy Kopp.



#### **Professional Development**

#### **CERTIFICATION**

Certified Nurses Day honors all certified nurses who contribute to improved patient outcomes through national board certification in their specialty. Based on certified nurses' preferences, recognition was provided at the department level and also in the form of gift options. Certified nurses were allowed to choose a gift from six options including an insulated tumbler, blanket, bathrobe and a computer backpack. The gift options for this year were personalized with the Sanford Health logo and "certified nurse" printed on the item. At the time of Certified Nurses Day 2021, we had 298 certified nurses (including advanced practice registered nurses). We continue to support gaining and maintaining certification by offering review courses free of charge and continuing education via several methods including CE Direct, Elsevier and local offerings. Sanford Health enterprise review courses offered in 2021 included:

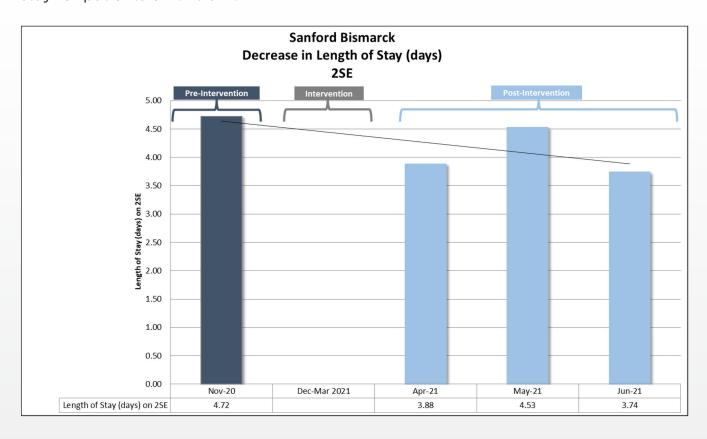
- Dialysis (CDN) Nursing Exam Review: April 20, 2021
- Trauma (TCRN) Exam Review: April 28-29, 2021
- Oncology (ONC) Exam Review: May 12-13, 2021
- Medical-Surgical Nursing Exam Review: Oct. 19–20, 2021
- Orthopedics (OCN) Exam Review: Sept. 15, 2021, or Oct. 6, 2021
- Nurse Manager (CNML, NE-BC) Exam Review: Nov. 30, 2021

#### BACCALAUREATE OR HIGHER DEGREE IN NURSING

Many studies have identified better patient outcomes when hospitals have a higher percentage of RNs with baccalaureate or higher degrees. These outcomes may include lower patient mortality, pressure injuries, failure to rescue and length of stay. We are proud of the fact that we have achieved the Magnet® standard of having >80% of nurses with a baccalaureate or higher degree in nursing. We continue to support nurses by offering tuition support for baccalaureate or higher degrees in nursing.

#### PROGRESSIVE MOBILITY BUNDLE

Early mobilization while in the hospital plays a role in decreasing the risk for patient falls, acquiring a pressure injury and length of hospital stay. A consistent process for assuring patients are moving early in their stay was not in place. The Enterprise Mobility Committee was created and developed a nurse-driven protocol. This protocol was implemented throughout the hospital. Clinical nurses on 2SE facilitated this implementation and provided education to their staff. In addition, they developed visual aids and a resource binder. They followed up with weekly rounding to reinforce strategies to implement. The result of this work contributed to a decreased length of stay for patients on this unit.



#### **Teaching and Role Development**

#### NURSING RESIDENCY PROGRAM

In 2021, 160 graduate nurses were enrolled in a 12-month Nurse Residency Program operating three cohorts that started in January, May and September. By the end of 2021, 89 of those new nurses graduated the program, 31 in April, 40 in August and 18 in December. In April 2021, Sanford Nurse Residency Program received Accreditation with Distinction by the American Nurses Credentialing Center (ANCC). Nurse Residency seminars were held in person at the Bismarck Public Library and the new Sanford Business & Training Center. New graduate nurses have reported that the additional support from fellow residents and mentors has been beneficial during these unprecedented times. Due to the benefits our new graduate nurses received as part of Nurse Residency, our overall retention rate for 2021 nurse residents was 95%.







#### SUMMER INTERNSHIP PROGRAM

We placed 28 nursing students into the summer internship program for 2021. This program helps the nursing students to expand their clinical skills and knowledge under the guidance of an experienced nurse preceptor. Because of the success of this program, we elected to offer the opportunity for those who wished to extend their time in the Student Internship Program beginning in January 2021. We had 10 nursing students extend their internship experience through the end of 2021.

#### **Recognition of Nursing**

#### THE DAISY AWARD

The DAISY Award is an international program that rewards and celebrates the extraordinary clinical skill and compassionate care given by nurses every day. Patients, visitors, families, volunteers and all employees may nominate a deserving nurse. Our 2021 Daisy Award recipients are as follows:



Kalcey Schneider Total Joint



Jo Lynn Kensmoe Cardiology Clinic



Mack Keller Emergency Department



Allison Gartner Emergency Department



Allison Streeter Oncology Clinic



Nicolette Tippett Dickinson West



Jessica Glasser 2SE



FOR EXTRAORDINARY NURSES

HONORING NURSES INTERNATIONALLY IN MEMORY OF J. PATRICK BARNES

#### **2021 SOARING TO EXCELLENCE**

The annual Soaring to Excellence ceremony was held on National Nurses Day, May 6, 2021, at the Radisson Ballroom. This event kicked off the celebration of National Nurses Week. The award winners were recognized on stage and received an inscribed trophy.

#### **2021 AWARD WINNERS**



2021 Florence Nightingale Award Mary Lee Hilt



2021 Florence Nightingale Award Stacy Miller



2021 Star Performance Award Brandi Oerter



2021 New Knowledge, Innovations and Improvements Award Kara Vollrath



2021 Exemplary Professional Practice Award Allison Streeter



2021 Structural Empowerment Award Jessica Aluise



2021 Transformational Leadership Award John Emerson



2021 Distinguished Wisdom Keeper Award Marcy Dawson



2021 Jan Kamphuis Spirit of Nursing Leadership Award Connie Stewart



2021 Friend of Nursing Individual Award Ashley Clausen



2021 Friend of Nursing Individual Award Dr. Michael Luckenbill

2021 Friend of Nursing Department Award Surgical Services Core/Transport

## **EXEMPLARY PROFESSIONAL PRACTICE**ENSURING EXCELLENCE

Exemplary professional practice is the essence of a Magnet organization—it is about providing excellent care and collaborating interprofessionally to achieve high quality patient outcomes. Exemplary professional practice is about the potential of what the practice of professional nursing can achieve.

#### Sanford Professional Practice Model

The professional practice model provides a visual image that speaks to the components which define the essence of nursing practice at Sanford Health. The model serves as a framework for outlining the "how and why" of nursing practice, guiding the vision for nursing within our organization and directing decisions regarding priorities. The model guides every aspect of nursing practice.



Mission: Dedicated to sharing God's love through the work of health, healing and comfort.



#### Staffing, Scheduling and Budgeting Processes

### PROVIDING COVID-19 VACCINES TO OUR PATIENTS, COMMUNITY AND STAFF

Sanford Bismarck worked closely with the North Dakota Department of Health Immunization Program for a successful COVID-19 vaccine kickoff that began officially on Dec. 14, 2020. The COVID-19 vaccine clinic successfully began immunizations at our main Bismarck campus with additional offerings at Bismarck State College (BSC). Initial vaccinations were offered to staff caring for patients, followed by high-risk patients.

On July 1, 2021, primary care clinics began administrating the COVID-19 vaccine at all primary care clinics. This quickly expanded into specialty care clinics.

For our community events and Drive-Thru Flu/COVID-19 Vaccine events, Sanford Bismarck Nursing saw success in partnering with local academic partners as community events were hosted at BSC in addition to United Tribes Technical College (UTTC) and many community events throughout the Bismarck region. Nursing students signed up to assist with all vaccine blitzes throughout the community in addition to multicultural events such as the annual UTTC International Powwow. Nursing also partnered with the community in offering vaccines at the annual Bismarck Street Fair in Sept. 2021.



#### **Culture of Safety**

#### **NET BED (POSEY BED) IMPLEMENTATION**

The 4NE neurology nurses sought to seek more restful sleep and healing for their traumatic brain injury population of patients. Often, these patients are restrained, given sedating medications or placed on 1:1 sitter precautions for their safety and well-being, to prevent unexpected bed exits with a high risk for falls. Nursing was familiar with the net bed (Posey bed) and brought this product to their director,

who worked with nursing executive leadership to implement this product at Sanford Bismarck. This product was a joint effort and true interdisciplinary approach with accreditation, maintenance, infection prevention, nursing education and sterile processing to launch this product at Sanford Bismarck. Sanford Bismarck implemented two net beds in Oct. 2021. The intent of this bed was to keep patients safe, reduce falls, reduce falls with injury and allow restful sleep and healing without wrist restraints or sedating medication. With the implementation of the



net bed, there was a goal to reduce 1:1 hours which in turn reduces staffing burden while maintaining appropriate staffing ratios. Data was analyzed two months after implementing the net bed. These beds were utilized approximately 862 hours, 36 total days and had no falls post-intervention of the net bed. Overall, nursing staff reported satisfaction with the net bed, with remarks to utilizing the net bed in place of another restraint, agreement in allowing the patient uninterrupted rest and healing, and overall agreement with increasing patient safety.

#### LINE/CATHETER CHECKLIST TO KEEP PATIENTS SAFE

In early 2018, infection prevention shared a strategy with all nursing units to decrease central line-associated bloodstream infections (CLABSI). The 4NW nursing leadership partnered with their nursing staff and infection prevention to use a checklist to determine if central lines and urinary catheters were necessary. The staff nurses began by documenting their determination of necessity followed by manager/unit leadership review. Although after 12 months, infection prevention suggested the use of the form could be voluntary, 4NW opted to continue with this practice and has had zero reported CLABSI for over three years and zero reported catheter-associated urinary tract infections (CAUTI) for over four years.

# NEW KNOWLEDGE, INNOVATIONS AND IMPROVEMENTS LEARN, INNOVATE AND IMPROVE

This component of Magnet centers on nursing research, evidence-based practice and innovation. This is an opportunity for nurses to lead change that is grounded in evidence and redesign our current healthcare systems. These exemplars highlight Sanford Bismarck's empowerment of nurses to recognize their ethical and professional responsibility to contribute new findings to patient care and to the science of nursing.

#### Research

#### **COVID-19 STUDY**

"The Lived Experience of Frontline Nurses: COVID-19 in Rural America" study was a multi-site qualitative research study. Introduced to the world in late 2019, COVID-19 surged in the upper Midwest. Hospitals experienced capacity strain requiring rapid adjustments and practice changes. Capacity strain interfered with patient care needs and affected the clinical nurses. The research study aimed to explore the effect COVID-19 had on the lived experiences of the frontline nurses and how this information could inform preparation for similar, future events. Coreen McClellan, BSN, clinical RN, assisted as the site project investigator for Sanford Bismarck along with enterprise project investigators Gwen Jensen, PhD, RN, and Karen Robinson, PhD, RN. One-to-one semi-structured interviews were conducted with 19 clinical nurses across the Sanford Health enterprise. From the data, four themes were identified:

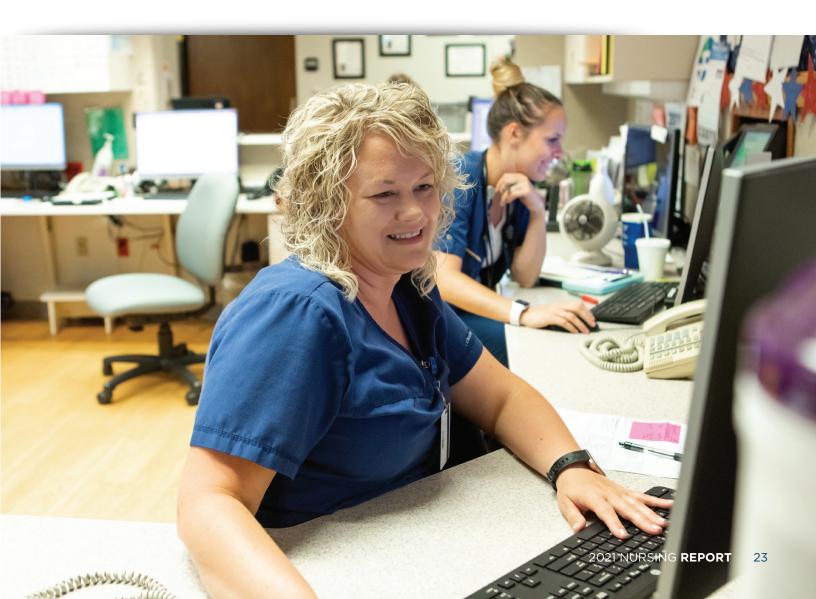
Overwhelmed	Frontline nurses caring for patients with COVID-19 were overwhelmed by the intensity of patient illness, suffering and death.
Frustration	The participants were frustrated by rapid changes in the practice environment, the risk to patient safety and unmet standards of care.
Abandonment	Some nurses felt abandoned by their leaders, families and communities.
Sense of Perseverance/ Resilience	In spite of the situation, rural frontline nurses still demonstrated personal and professional perseverance and resilience.

Results were disseminated to all Sanford Health regions during Fall 2021. In addition, Coreen McClellan along with the research team presented their findings at the International Sigma Theta Tau conference in Washington, DC, in April 2022.

#### **Evidence-based Practice**

#### **ONCOLOGY JOURNAL CLUB**

The 2021 Nursing Educational Needs Assessment identified evidence-based practice (EBP) as the number two education need at Sanford Bismarck. Nurses expressed their desire for opportunities to review, translate and apply evidence-based articles to their practice. Literature supported the concept of journal clubs but a gap in the literature was identified with the impact of a specialty-based journal. A specialtybased journal club includes inpatient and ambulatory nurses who share a common interest in a specific specialty of health care. In September 2021, the EBP/research council approved a plan to implement the oncology journal club. The oncology journal club is held once a month from noon to 1 p.m. via Webex. Inpatient and ambulatory nurses who specialize in oncology are encouraged to attend the monthly journal club. Each month, the topic is selected by a nurse who volunteers to host the journal club along with leadership support. ANCC credits are attached to each journal club session to promote attendance and professional development. In addition, surveys are sent out to all journal club participants every three months to evaluate their conviction, confidence and competence with EBP. Sanford Bismarck has plans to implement additional journal clubs in 2022 in radiology, cardiology and medical/surgical.



# **EMPIRICAL QUALITY RESULTS**WHAT DIFFERENCE HAVE WE MADE?

As we look at how professional nursing contributes to better outcomes, we measure these outcomes and work to improve processes. Some of our data is related to nurse-sensitive indicators (these measure the quality of care given to patients by nurses) as well as patient satisfaction. Many improvement projects contribute to how nursing staff makes a difference.

#### **Examples of How Nursing Has Made a Difference**

### ADDING APRN TO IMPROVE PATIENT EXPERIENCE FOR ONCOLOGY PATIENTS

The oncology infusion center saw a significant growth in volume in 2021 (increase of >50%) after a local oncology service ceased operations. The oncology service line identified an opportunity to improve workflow/throughput and ultimately improve the patient experience by having an APRN see the patients in the hospital on daily

morning rounding at a more consistent time (early a.m.) and additionally as needed. The early morning round would allow immediate follow-up for patient needs. In addition, adding an APRN to see patients in the Infusion Center to address patient and nursing needs and respond to calls would serve the oncology patients well. The proposal was presented to administration and approved with an APRN hired in May 2021.

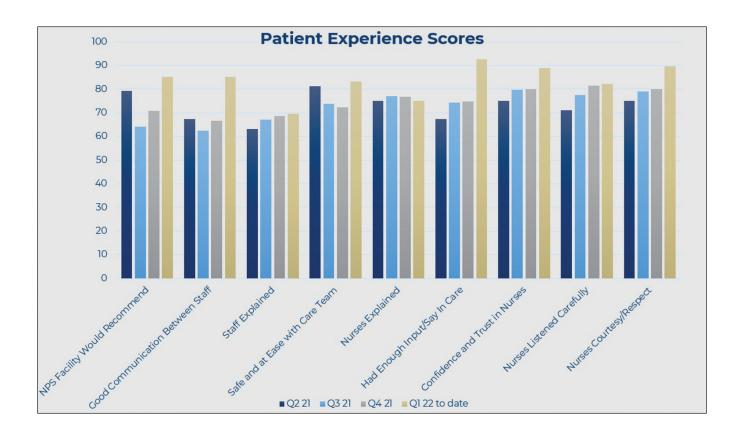
In her role, the APRN initially began rounding on hospitalized patients and within a few months, expanded her services to the infusion center. These changes impacted patient experience almost immediately as there was a decrease in wait time for patients. In addition, the APRN was able to review patients' orders and charts for lab results to confirm if chemotherapy orders were



Erin Bales, MSN, FNP-C

accurate and signed by the provider. By doing this, clarification calls from infusion center RNs to the physicians were decreased along with reducing patient wait times and allowing early intervention with treatment.

These changes not only improved the patient satisfaction scores, but also improved patient throughput.



#### DECENTRALIZING THE CERTIFIED DIABETES EDUCATORS

To better serve patients with diabetes, the certified diabetes educators (CDEs) were moved from their centralized location in a diabetes center and were integrated within the primary care and endocrinology clinics. This move facilitated discussion between primary care providers and the CDEs and often allowed easier access to the CDEs for the patient. While this change was initially difficult for staff, it has proven to be very successful. When comparing data from pre- and post-clinic integration, it is noted that 346 new diabetic patients are now being monitored and seen, overall patient encounters have increased by almost 50%, and patient A1C scores remain well-controlled. Patient satisfaction scores have also drastically improved as seen in the table below. It is important to note that this also occurred mid-pandemic when patients weren't seeking out care as readily.

#### PATIENT EXPERIENCE

	2020		2021	
Question	n-size	2020 score	n-size	2021 score
Confidence and trust in nurses	19	63.2	134	74.6
Good communication b/w staff	19	57.9	134	73.9
Nurses courtesy/respect	20	65.0	138	76.8
Nurses explained things	19	63.2	134	76.1
Nurses listened carefully	19	68.4	137	75.9
Safe and at ease w/care team	19	57.9	134	84.3

#### CARE MANAGEMENT WORK WITH HIGH-RISK INDIVIDUALS

Our ambulatory care management team, consisting of RN care managers and licensed social workers, continues to support high-risk individuals within our primary care clinics in a variety of ways. By coordinating care, providing referrals and addressing social determinants of health, the care management team saw a significant reduction in emergency department (ED) visits and inpatient encounters. When comparing the six months pre-enrollment to the six months post-enrollment, patients enrolled in care management saw a 58.7% reduction in ED visits in that time. Additionally, a 62.5% reduction in inpatient admissions was observed over that same timeframe.

A recent example was a patient with 10 ED/hospital visits over a six-month span. The patient had a history of CHF, COPD and chronic oxygen dependence. With the help of the transitional care manager and community paramedic, the care management team determined the patient was non-compliant with medication regimen due to cost and complexity. The care management team was able to help with prescription assistance and facilitated an admission to skilled nursing facility (SNF) for strengthening. Following the discharge from the SNF, the care management team continued collaboration with the community paramedic and home health care, and the patient had no ED visits or hospital admissions for more than six months.







