

nurses of providence
EXCELLENCE

PROVIDENCE
Little Company of Mary
Medical Center
Torrance



2017 ANNUAL REPORT



A Blessing for Nurses

May you always heal and be healed
May those who come to you find in you
One who cares deeply
Whose knowledge included knowledge
Of the spirits movements.

May you take pride in your gifts and use
them humbly
May the suffering and the vulnerable
Be your teachers
May you see in others the goodness
Of a tender God.

May compassion encircle you
Carry you
Strengthen you
And give you great insight.

May your presence be hope
To those in pain
May your skill ease the way
And instill trust.

May you know the healer of all
May your own heart be held
In the compassion and tenderness
Of our Provident God.

Amen



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Message from our Chief Executive Officer

Mary Kingston

PROVIDENCE LITTLE COMPANY OF MARY
MEDICAL CENTER TORRANCE

There is something about being a good nurse that goes beyond having a nursing license and a job. Being a great IV starter, or knowing all the physicians, is not what it is about. Working 30 years doesn't guarantee that you are a good nurse. It isn't about the letters behind your name, or the professional associations you belong to, or even how high you climb on the clinical ladder.

Listing all of the characteristics that embody a good nurse is really difficult to do, but you know a great nurse when you see one. A good nurse is discerning with an instinct for picking up seemingly insignificant things about a patient. A good nurse knows how to interpret a complex clinical picture and predict an outcome, bring it to the doctor's attention, and literally save a patient's life. You can see the trust in a patient's eyes as a good nurse interacts with them. It's because of that nurse that a family member will finally feel secure enough to go home, take a shower, and catch bit of sleep ... they trust that their loved one is in the best hands.

Good nurses are knowledgeable, not just about clinical issues, but about life. They find the right words to say when they are needed. They listen and calm a frightened parent so that care can be rendered to their child. A good nurse patiently re-explains something the doctor said to a family member because it didn't quite make sense 15 minutes ago. They take the time to make a distraught spouse feel important and cared about. They know when to sit and listen, when to comfort or reassure, and when to conduct a "come to Jesus" conversation. A good nurse knows when listening and comforting with a compassionate heart is the priority and that charting an assessment, or completing a task, will have to wait.

During painful or embarrassing times, a good nurse is the one that patients, family members, and coworkers gravitate to because of the authentic, honest care they give. Good nurses recognize when things are going downhill and know how to take control of a room filled with frantic people. They convey a sense of urgency, not fear. They create a sense of safety and of purpose in chaos, even when someone's life is coming to an end.

In the 2017 Nursing Report we have tried to measure and define what good nursing looks like even though we know that good nursing is difficult to measure. We understand that it is so much more than excellent outcomes, research-based practice, and new programs.

While Maya Angelo was not a nurse, her mother was, and she writes this quote about nursing:

"As a nurse, we have an opportunity to heal the heart, mind, soul, and body ... their families and ourselves. They may forget your name, but they will never forget how you made them feel."

Being a good nurse begins with a humble heart full of compassion and it is with a humble heart that the 2017 Nursing Report has been assembled. This report reminds us that it is important to balance excellent care and compassionate care and to deliver it all with dignity.



Message from our South Bay Chief Operating Officer and Torrance Interim Chief Nursing Officer

Garry Olney, DNP, MBA, RN

It is with gratitude that I introduce the 2017 Nursing Annual Report. While reflecting on our first year of Magnet® designation I recall other significant and honorable nursing events. I recall several years ago when the graduating class of The Medical College of Ohio, where I attended nursing school, asked me to give a speech during their pinning ceremony. Historically, the pinning ceremony goes back to the time Queen Victoria presented a pin to Florence Nightingale for her pioneering work. Today, a pin may be presented to a graduating nurse by a faculty member, a mentor, or a loved one as a symbolic welcome to the profession. My own pinning happened in 1983, I still recall the overwhelming emotion I experienced as I inched ever closer to becoming a professional nurse while my mother presented me with my pin. In early 2017 intentionally each nurse received a Magnet® Nursing Excellence gold pin to honor their role in our achieving Magnet® designation. May that pin be worn with pride and serve as a reminder to be innovative, a pioneer, and continue to strive for professional nursing excellence as we aim for a 2020 re-designation.

With joy I share what my impressions are when patients thank us for excellent care or say "Thank you, nurse." Over the years, I've noticed that the predominant theme of those statements or thank-you cards is one of gratitude for the little things we do for them—answering the call light promptly, speaking compassionately, giving them something to drink, placing the phone by their ear when they're unable to, holding their hand, bringing them a newspaper, and (my personal favorite) trimming their nails and washing their hair. I did so much of that I could have been accused of illegally practicing Podiatry or Cosmetology! What I don't recall is ever hearing a patient say, "Thanks nurse, that foley catheter you just inserted was really fabulous!" Or "thanks nurse, I'll never forget how wonderful it was when you poked that IV in me a few times". The patients do recall, even years later, the time a nurse cared enough to wash their hair and treat them with dignity. In Florence Nightingale's "Notes on Nursing: What It Is, and What It Is Not", she writes about similar little things. She refers to keeping the bedside spotless and doing other things that were housekeeping duties, and she cautioned, "If a nurse declines to do these kinds of things because it is not his or her business, I should say that nursing was not their calling."

Nursing colleagues these little, seemingly basic gestures may not get any of us nominated for the Nobel Peace Prize. But as with peacemakers, what nurses do moves and soothes the human heart and spirit. The fascinating though not entirely mysterious thing is that as we strive to bring about positive changes in our patients, we are transformed ourselves. I certainly am not the same "nurse-person" today that I was at my pinning ceremony over 35 years ago. I encourage each of you, no matter what area of field of nursing you practice, don't forget to do the little things, be compassionate, preserve dignity, and share knowledge with all. Invoke Florence Nightingale, the founder of modern nursing for our modern times.

PROVIDENCE HEALTH AND SERVICES *Mission and Values*

Our Mission

As people of Providence, we reveal God's love for all, especially the poor and vulnerable, through our compassionate service.

Our Vision

Together, we answer the call of every person we serve: Know me, care for me, and ease my way.

RESPECT

All people have been created in the image of God.
Genesis 1:27

COMPASSION

Jesus taught and healed with compassion for all.
Matthew 4:24

EXCELLENCE

Much will be expected of those who are entrusted with much.
Luke 12:48

JUSTICE

This is what the Lord requires of you: act with justice, love with kindness and walk humbly with your God.
Micah 6:8

STEWARDSHIP

The earth is the Lord's and all that is in it.
Psalm 24:1

Grounded In Our Roots



Blessed Emilie Gamelin

Guiding Spirit of the Sisters of Providence



Mother of the Poor, Angel of the Prisons, Providence for the Unfortunate - such were the names given to Blessed Emilie Gamelin, foundress of the Sisters of Providence. Many of the good works carried on by the sisters today have their beginning in the heart of Emilie Gamelin.

Emilie was born in Montreal on February 19, 1800, a time when the industrial revolution breathed hopeful promises of prosperity. But with commercial development came worker exploitation, unemployment, political unrest, mass immigration, and cholera epidemics. This was the conflict that Emilie struggled to reconcile all her life, as a young girl, as a socialite, as a wife, as a widow, as a Sister of Providence.

Although not wealthy, young Emilie and her family generously responded to the needs of people who were poor. She carried this concern into her marriage to Jean-Baptist Gamelin, a successful Montreal businessman. Busy with family and social demands, she still found time to visit the sick and, with her husband, gave freely to the needs of the growing city.

By age 28 Emilie's happy and stable world was completely shattered as, one after the other, her husband and three young sons died. These painful losses were the beginning of her works of organized charity. Spiritually uniting herself with Mary, Mother of Sorrows, Emilie devoted her efforts to improving the condition of elderly widows, using her own resources to open the "House of Providence." The Ladies of Charity, friends who shared her concerns, joined her in visiting people in need and collecting funds to support the elderly. Later, they opened an orphanage and cared for the mentally ill. Emilie earned her title, "Angel of the Prisons" when she and her Ladies of Charity began visits to political prisoners who were imprisoned for rebelling against British rule in Quebec following the insurrection of 1837. Her brother, Francois, was among those French-Canadian patriots to whom she brought food, messages, and gifts from their families.

In 1843, Emilie Gamelin and Ignace Bourget, Bishop of Montreal, established the religious community of the Sisters of Providence to ensure that these good works would continue. But her time in community would not be long. Blessed Emilie Gamelin gave her life caring for the victims of cholera in 1851. "Humility, simplicity, charity..." were her last words - words to guide all who continue her work today.

Emilie was gifted in her ability to bring people together to serve others. But perhaps her greatest gift - and most inspiring legacy to us - was her ability to connect with people one-on-one. Whether it be a visit to the home of an elderly woman sick with cholera, taking food to a family with none, or visiting a prisoner on behalf of his family, Emilie Gamelin cared for people her entire life. Her generosity, her contributions of both time and money, her selflessness, her compassion - all are remembered today by those who walk in her footsteps.

Mother Joseph Pariseau

"First Architect of the Pacific Northwest"

Mother Joseph was born Esther Pariseau on April 16, 1823, in St. Elzear, a village near Montreal, Canada. Esther was the daughter of a coachmaker and his wife, and she learned carpentry at an early age. On December 26, 1843 in Montreal, Joseph Pariseau brought his twenty-year old daughter Esther to Mother Emilie Gamelin saying:

"... she can read and write and figure accurately. She can cook and sew and spin and do all manner of housework as well. She has learned carpentry from me and can handle tools as well as I can. Moreover, she can plan and supervise the work of others, and I assure you Madame, she will some day make a very good superior." Years later these words would be prophetic as on a cold December morning in 1856, five sisters of Providence stepped off a steamer onto the banks of the Columbia River in the Oregon Territory. Led by Mother Joseph of the Sacred Heart, (Esther Pariseau), they came to bring Mother Gamelin's mission of service and caring to the West. The sisters endured the hardships of the frontier to build Oregon's first hospital, St. Vincent, a three-story wooden structure that opened in 1875.

Realizing that local donations would never provide the necessary funds to continue providing care for the poor and vulnerable, Mother Joseph decided to "go for the gold." In the mid-1860's she and a companion sister or two began a series of begging tours, taking their needs to the prospectors, before the prospectors could take their gold to town. The sisters' begging tours were arduous two and three month journeys over rugged terrain. The women would travel by stagecoach, horseback, and occasionally even by canoe. In order to get the miners' attention, Mother Joseph would often crawl into the dark mining tunnels herself. And it paid off. The sisters frequently completed their tour carrying as much as five thousand dollars. It was the kind of money that Mother Joseph and the sisters would need to build and maintain hospitals, schools, and orphanages in the Pacific Northwest.



There were occasions, of course, when the clever sisters had to match wits with disreputable types, highwaymen, and thugs, who would have been more than happy to relieve the sisters of their funds. A stranger once accosted Mother Joseph and her travelling companion after noticing the bulging black bag hanging from Mother Joseph's arm. On this occasion Mother Joseph, through some quick thinking and fast-talking, convinced the man that only a fool would travel with valuables. "Surely you don't think we keep with us the money we are collecting. What are express offices for?" It may have been the black robes, or the tone in her voice, but for whatever reason, the robbers were convinced. The episode was enough of a lesson for the sisters. Funds gathered during subsequent begging tours were immediately deposited at the express office.

Always the perfectionist, Mother Joseph liked to have hands-on experience with the buildings erected for public need. She was attentive to details, a trait undoubtedly passed onto her by her woodcrafting father. It was not uncommon for Mother Joseph to climb the ladders, hammer in hand. In fact, it has been recorded that she was inspecting rafters and bounding on planks well into her late sixties. Once, while supervising the construction of a hospital, she discovered an improperly laid chimney. Immediately, she pointed out the error to workers and asked them to redo the job. The laborers obviously less concerned with the project than she was, left for home without rebricking. They returned the next morning to discover that Mother Joseph had torn down the old work and had neatly rebricked the chimney herself.

On one of her many tours, Mother Joseph trekked on foot through the logging and mining camps of the Northwest. Her goal: sell the loggers and miners a year's worth of health care for \$1 - the first vision and version of managed care.

Mother Joseph developed a brain tumor in 1901 and spent a pain-filled last year. Yet even on her deathbed, her chief concern was for others. "Whatever concerns the poor is always our affair." she claimed. She died in 1902 and in 1953 the American Institute of Architects acclaimed Mother Joseph as the Pacific Northwest's first architect. Her legacy is now represented in the National Statuary Hall of Fame in Washington, D.C.

From these simple beginnings grew a complex system of hospitals, clinics health plans, long term care facilities and educational programs that spans the West from Alaska to California.

Transformational Leadership

2017-2020 Nursing Strategic Plan

The Nursing Strategic Plan, developed and evaluated annually by nurse leaders, clinical nursing, shared governance, and interprofessional partners, demonstrates goals, tactics, and defining success indicators under each pillar aligned with the region and system strategic plans.

In 2017 “The South Bay Five Bests Performance Excellence Commitments” rolled out to create a ministry “True North” (below). Each department developed their specific five best tactics to advance the measures. Tactics and status are reported and evaluated quarterly to ensure we are advancing on ministry goals to ensure we are able to serve our community and meet the demands of rapidly changing healthcare.

	Ministry True North	South Bay Ministry Initiatives	Measures
Best Place to Work and Practice	High Caregiver Engagement	<ul style="list-style-type: none"> » Complete full year of onboarding program and use caregiver feedback to improve program (SB) » Further develop core leader and caregiver huddles with standard work and problem identification skills (SB) » Implement dept. action plan for lowest engagement scores (SB) » Cascade 5 Bests to every department with unit identified metrics (SB) 	<ul style="list-style-type: none"> » < 24.49% First Year Turnover » ≥ 75% problems identified in huddle resolved » ≥ 90% engagement action plans completed
Best Customer Experience	Top Patient Experience	<ul style="list-style-type: none"> » Focus improvement on key drivers to patient experience (SB) » Core leader rounds and documentation in real time (SB) » Develop patient guide and physician office guide (SB) 	<ul style="list-style-type: none"> » Overall Rating of Care INPT ≥ 73.3% » ED ≥ 59.3% (T) and 63.5% (SP) » Ambulatory ≥ 89.7% » Compassion ≥ 69%
Best Quality and Safety	Zero Harm	<ul style="list-style-type: none"> » Reinforce and build accountability with HRO tones, behaviors and tools (SB) » Daily huddles cascaded for clinical/safety improvements in every department (SB) » Conduct RCA to identify and address key drivers to HAC: C-Diff (SB) 	<ul style="list-style-type: none"> » 0 CLABSI » 0 CAUTI » 0 SSI-Colo » 0 SSI-Hysterectomy » Reduce by 25% Falls with harm » Reduce by 25% HAC: C Diff
Best Health Outcomes	Value to the Community	<ul style="list-style-type: none"> » Design plan for readmission reduction & implement (SB) » Expand serious conversations & documentation of goals of care (T) » Implement Neuroscience Institute plan for year 1 (T) » Inpatient Surgery improvement in operational and clinical goal (SB) » Implement Crisis Stabilization Center (SP) 	<ul style="list-style-type: none"> » Reduce All-Cause, All Payor Readmission to < .98 O/E » ≥ 60% Goals of Care documented in pilots units (T) » Growth: Increase Neuroscience procedure volume by 50% (T)
Best Use of Resources	Productivity	<ul style="list-style-type: none"> » Use of flex matrix in every department to guide staffing (SB) » Stewardship huddles (SB) » Daily productivity corrections to meet standard by end of pay period (SB) 	<ul style="list-style-type: none"> » Labor Standard met > 80% of the time

Mission

As people of Providence, we reveal God's love for all, especially the poor and vulnerable, through our compassionate service.

Vision

Together, we answer the call of every person we serve: Know me, care for me, ease my way.

Core Value

Justice, Excellence, Respect, Compassion, Stewardship

System Strategy

One Ministry Creating Healthier Communities

Inspire and develop our people

Achieve and maintain Magnet designation

- » Create shared drive Magnet story repository and department folders for units to store exemplars
- » Embed magnet language into everyday culture
- » Create the expectation to participate in shared governance at interview/evals and hold accountable 30-60-90 day and annual evaluation
- » Increase RN certification by offering courses, develop calendars of courses, list resources available then advertise

Best in class nursing recognition

- » Utilize social media to market nursing excellence and raise awareness
- » Increase and optimize internal marketing to all caregivers
- » Develop and identify new recognition opportunities in nursing at all levels
- » Achieve Nurses Improving Care for Health System Elders (NICHE)

Participate in Providence Leadership Formation programs and Regional Nursing Institute on leadership development

- » Help create and participate in future leader development program
- » Identify Management Program participants and create ongoing marketing plan
- » Develop leadership level open forums/support groups

Build enduring relationships with consumers

Optimize the role of nursing practice in the Providence Patient experience

- » Develop concierge service program

Intentional compassion in every aspect of nursing and team-based practice

- » Develop and provide compassionate care training program
- » Develop and provide compassionate care program for caregivers

Nurses are advocates for health promotion, wellness and the vulnerable in our communities

- » Develop nursing advocacy through community partnerships
- » Increase awareness of community, outreach opportunities

Create alignment with clinicians & care teams

Support inter-professional collaboration between colleagues to strengthen care coordination

- » Encourage MD to collaborate with Advance Practice Nurses
- » Unit-level interdisciplinary rounds
- » UBC sharing amongst each other

Nursing Strategic Plan *continued*

Use emerging technology to strengthen connections between consumers and caregivers

- » Outpatient 3-4 question about patient experience at a kiosk at discharge
- » Optimize My Chart platform for patient make available during stay

Professional and workforce support for advanced practice nurses

- » Follow nursing Bill of Rights
- » Develop clinics to utilize Advanced Practice Nurses
- » Invite representatives from one department to understand their role/function in other departments

Develop and thrive under new care delivery and economic models

Support Providence Health & Services Quality Strategic Plan, including regional and local tactics

- » Standardize nurse sensitive indicator dash boards per unit
- » Uniform clinical resources
- » Clinical Nurse Specialists (CNS) support other units, optimize CNS role versus “educator” specific
- » Kronos and shift select (Centralized staffing)
- » Implement Kronos self-correction

Advocate to use existing resources more effectively and efficiently

- » Proactively create a competency tool for out of cluster floating
- » Add locator or Zettler to high expense equipment
- » Enhance charge nurse education

Fully optimize and implement the Epic care management solution

- » Utilizing EPIC to full optimization i.e. having vital signs interfacing on all departments
- » House wide tracker/status board

Deliver expert chronic disease care management

- » Chronic disease navigators
- » Health clinic to expand services for outpatients / and after discharge utilize Health coordinator
- » Implement inpatient diabetic program

Grow by optimizing expert to expert capabilities

- » Support essential expert-to-expert nursing action communities across the region
- » Continuing the preceptor program and having a 30-60-90 day follow up with new hire nurse
- » Collaborate with other service line experts in the community
- » Ministries collaborate on manager and caregiver level

Strengthen expert to expert clinical collaboration related to nursing practice

- » Develop an expanded education plan/council
- » Training Within Industry (TWI) utilization
- » Forum for nurse champions to bring info back the peer

Support identified Service Line growth opportunities for Women’s and Children’s, Orthopedics, Robotic Assisted Surgery, Cardiovascular, and Neurosciences services

- » Visualize strategic plan at the unit level
- » Create/develop fellowship program for specialties
- » Create standard work for new program development (mirror Transcatheter Aortic Valve Replacement program)

Awards and Accolades

*“I can do things you cannot,
 You can do things I cannot;
 Together we can do great things.”*

—MOTHER TERESA



The Magnet® credential is a recognition of a healthcare organization’s attainment of excellence in nursing.

The continuous journey is valuable and rewarding because it allows organizations to focus direction toward excellence in nursing while healthcare rapidly advances. The comprehensive process is thorough, involving widespread participation by applicant organization’s nurses and other interdisciplinary healthcare team members as they improve processes, nursing structure, and ultimately deliver stronger, patient-centered outcomes. It offers revealing self-evaluation, creates opportunities for the entire organization to work collaboratively, enhance individual professional development, growth, and strategically support a work and practice environment that is proactive and deliberate in the delivery of safe high quality patient care (2019 Magnet® Application Manual, 2017).



*As a team we earned exemplar designation,
 As a team we advance toward re-designation.*

—GERI HARMON, MSN, RN, CDE

Awards and Accolades *continued*

AWARDS



"A" Hospital Safety Grade from The Leapfrog Group in 2016



Recertification as a **Palliative Care Center of Excellence** by the Joint Commission



HEART FAILURE
COPD
COLON CANCER SURGERY

Recognized by U.S. News & World Report as a **High Performing Hospital for the treatment of:**

Heart Failure

Chronic Obstructive Pulmonary Disease

Colon Cancer Surgery



Healthgrades Patient Safety Excellence Award 5 years in a row



Magnet designated hospital



TCC/TCU ranked among the **Best Nursing Homes in the Nation** by U.S. News & World Report for the 2nd Consecutive Year



Intensive Care Unit received the **Silver Beacon Award**



Performed the **first Transcatheter Aortic Valve Replacement (TAVR)** case for PHSCA



AWARDS FOR EXCELLENCE AND ACHIEVEMENT

- » Designated as a *Nurse Magnet Hospital* by the American Nurses Credentialing Center
- » Truven Health Analytics *100 Top Hospitals* from 2012-15
- » Healthgrades *Distinguished Hospital for Clinical Excellence* from 2014-15
- » Recipient of the American Association of Critical-Care Nurses *Silver Beacon Award for Excellence*
- » Named in Becker's Hospital Review *List of 100 Great Community Hospitals* in 2015
- » Recognized by The Joint Commission as a *Top Performer on Key Quality Measures*

SPECIALITY AWARDS

Patient Safety Awards

- » Leapfrog Group "A" *Hospital Safety Grade*, Fall 2016 and 2017
- » Healthgrades *Patient Safety Excellence Award* from 2013-17

Cardiac Awards

- » U.S. News & World Report *High Performing Hospital for Heart Failure Treatment* from 2016-18
- » Truven Health Analytics *50 Top Cardiovascular Hospitals*, 2015
- » *STEMI Designation*, named one of Los Angeles County's designated receiving centers for heart attack victims
- » American Heart Association/American Stroke Association *Get with the Guidelines Gold Plus Quality Achievement Award* for Heart Failure
- » Healthgrades *Five-Star Recipient for Treatment of Heart Attack*, 2015-16
- » Healthgrades *Five-Star Recipient for Treatment of Heart Failure*, 2014-17

Stroke & Rehabilitation Awards

- » Gold Seal of Approval from The Joint Commission for certification as a Primary Stroke Center
- » American Heart Association/American Stroke Association *Get with the Guidelines Silver Plus Quality Achievement Award for Stroke*
- » U.S. News & World Report named our Transitional Care Center as one of *America's Best Nursing Homes* from 2015-18

Women & Children's Services Awards

- » First Hospital in the Beach Cities to receive the *Baby-Friendly Hospital Designation*, UNICEF/WHO Baby-Friendly Hospital Initiative in the U.S.
- » California Children's Services (CCS) *Community Neonatal Intensive Care Unit Designation*
- » California Children's Services (CCS) *Pediatric Community Hospital Designation*

Palliative Care Awards

- » *Gold Seal of Approval* from The Joint Commission for advanced certification in Palliative Care

Pulmonary Awards

- » U.S. News & World Report *High Performing Hospital for COPD Treatment* from 2016-18
- » U.S. News & World Report *High Performing Hospital for Pulmonology*, 2017-18
- » Healthgrades *Pulmonary Care Excellence Award*, 2014
- » Healthgrades *Five-Star Recipient for Treatment of Pneumonia*, 2014-15
- » Healthgrades *Five-Star Recipient for Treatment of COPD*, 2017-18

Orthopedic Surgery Awards

- » U.S. News & World Report *High Performing Hospital for Orthopedics*, 2017-18
- » Named one of *America's 100 Best Orthopedic Surgery* hospitals by Healthgrades, 2014-15
- » Healthgrades *Orthopedic Surgery Excellence Award*, 2014-15
- » Healthgrades *Five-Star Recipient for Treatment of Hip Fractures* from 2012-17
- » Healthgrades *Five-Star Recipient for Treatment of Spinal Fusion Surgery*, 2017-18

Medical/Surgical Awards

- » U.S. News & World Report *High Performing Hospital for Colon Cancer Surgery* from 2016-18
- » U.S. News & World Report *High Performing Hospital for Diabetes and Endocrinology*, 2017-18
- » U.S. News & World Report *High Performing Hospital for Gastroenterology and GI Surgery*, 2017-18
- » U.S. News & World Report *High Performing Hospital for Geriatrics*, 2017-18
- » U.S. News & World Report *High Performing Hospital for Heart Bypass Surgery*, 2017-18
- » U.S. News & World Report *High Performing Hospital for Nephrology*, 2017-18
- » Named one of *America's 100 Best General Surgery* hospitals by Healthgrades, 2015
- » Healthgrades *General Surgery Excellence Award* from 2014-16
- » Named one of *America's 100 Best Gastrointestinal Care* hospitals by Healthgrades, 2014-15
- » Healthgrades *Gastrointestinal Care Excellence Award*, 2014-15
- » Healthgrades *Five-Star Recipient for Prostate Removal Surgery* from 2012-15
- » Healthgrades *Five-Star Recipient for Treatment of Sepsis* from 2011-18

Structural Empowerment

Shared Governance

Evidence Based Practice Quality Improvements

BIG 5 COUNCILS

QUALITY AND SAFETY COUNCIL

Chair: Carolina Diaz
Co Chair: Ruby San Pablo

The purpose of the Quality and Safety Council is to understand, collaborate, and communicate the planning, development and implementation of quality and safety initiatives.

SMART GOALS

- » To improve documentation of pain assessment/ reassessment to 90% or greater by December 2017.
 - > 2016: 51% Improved in 2017: 83%

NURSE RESEARCH COUNCIL

Chair: Trisha Saul
Co Chair: Carole Muenzer

The purpose of the Nursing Research Council is to assess, plan, and facilitate EBP and research activities of nurses.

SMART GOALS

- » To increase the number of Project Idea Forms presented by 20% by December 2017
 - > Data: 2016: 12
Improved in 2017: 14
- » To increase the number of Virtual Journal Club participation by 25% by December 2017
 - > Data: 2016: 30 RN's
Increased 2017: 38 RN's
- » Advocate and increase nursing attendance at Professional conferences
 - > 2016: 81
2017: 64 nurses attended 83 conferences with some RN's presenting at multiple conferences

TECHNOLOGY & INFORMATICS

Chair: Leah Glavan

The purpose of the Technology and Informatics Council is to evaluate and recommend systems and technologies which enable a rich environment to support best practice.

SMART GOALS

- » 80% of Tech Council members will be superusers for the Epic Upgrade in May of 2017
 - > 2017 Achieved 86% members Epic upgrade superusers
- » Tech Council will develop and approve 7 "Epic Reminders..." Tips and Tricks or--charting reminders for staff by December 31st, 2017.
 - > 12 Reminders were created and used to educate nursing
- » Develop "SAND" Epic requests: which are Epic requests suggested by clinical RN's to improve practice. Council advocates for rapid changes to be complete in 6 months after approval by the System by December 31, 2017 using a sample size of 5
 - > Terminology: Sand-a small request that can be done fairly easily and doesn't require multiple system or regional groups, no end user training needed
 - > 2017: 32 optimizations developed, 9 completed by December 31, 2017, 7 completed in 6 months or less



CLINICAL PRACTICE

Chair: Sheryl Herron

Co Chair: Shelly Anderson

The purpose of the Clinical Practice Council is to review, collaborate, and contribute to clinical standards considering national and state regulations and evidence-based practice (EBP) to provide the best care to every patient every time.

SMART GOALS

- » Increase the use of CHG wipes in the bathing of all applicable patients by 25% as evidenced by CHG Bathing documentation by December 2017.
 - > 61% of patients that were bathed received a CHG bath.
 - > Decreased the 2017 CLABSI rate by 25% by standardizing the use of CHG wipes for bathing of all patients.

PROFESSIONAL ADVANCEMENT COUNCIL

Chair: Sandi Martir

Co Chair: Lilia Stephenson

The purpose of the Professional Advancement Council is to define, implement and promote a positive healthcare environment, professional nursing standards and the professional practice model.

SMART GOALS

- » Promote/educate staff regarding funding for advance education and professional development through the Melideo Fund, Centofante Scholarship, Tuition Reimbursement, and Professional Portfolio
- » Organized a successful March Annual Certified Nurses Day Event



Unit Based Councils and Unit Achievements

EMERGENCY DEPARTMENT

**Chairs: Maria Perez
Caroline Diaz**

- » Increased certified nurse's rate to 28%
- » Increased the number of correct Emergency Severity Index assigned to ED pediatric patients from 85% to 95.6%
- » Increased Sepsis blood pressure bundle compliance from 64% to 85.6%
- » Created a Team for Discharge and Room Turnover (TDART) to decrease RTD to left times from previous 2016 26 minutes to 21minutes, hit target in August, 19 minutes.

1ST SURGICAL

Chair: Stephanie Loew

- » Increased certified nurse's rate to 42%
- » Team donated over 40 blankets to homeless shelter
- » Team collected over \$800 for needy family at Christmas
- » Team collected toiletries for battered Women's shelter
- » American Heart Association Walk - 8 participants
- » American Heart Association Comedy and magic Club charity event – 12 attendees
- » Increased inpatient perception of hourly rounding score from 46% to February 56%, May 62%, June 57%
- » Sandi Look completed Leader Mission Day-by- Day, LEAN leader training , achieved Green Belt certification

- » Sheryl Herron, Marc Motio, Damira Bacich, Christine Bolinas, Stephanie Loew and Jenny Frisina attended Managing for Daily Improvement training
- » Jenny Frisina presented poster at Academy of Medical Surgical Nursing
- » Sheryl Herron and Jenny Frisina attended the Annual Magnet Conference in Texas
- » Sandi Look attended the Academy Of Nursing Executives(AONE) annual conference
- » Zero CLABSI, CAUTI or HAPI in 2017
- » 100% participation in NDNQI survey
- » Exceeded Magnet benchmark in 11 or of 11 NDNQI categories
- » Denise Broome NA Mission Spirit Award winner
- » 89 improvements made in the departments as a result of Opportunity Card completion
- » Meghan O'Keefe Daisy Award winner
- » Obtained resources per RN request
 - > *Electric wheel chair for bariatric patients*
 - > *Increased Nursing Assistant support on nightshift*
 - > *Vein finder*
 - > *2nd bladder scanner*
 - > *Walkers in every room*
 - > *4 new bariatric wheel chairs, room chairs and patient chairs*
 - > *2 new stools*
 - > *15 new IV poles*





- » Improved RN knowledge with tracheostomy care as measured by a confidence rating

	Pre-survey	Post survey
Not confident	0	0
Somewhat confident	22	0
Reasonably confident	15	3
Confident	5	18
Highly confident	2	23

Periop

Chair: Jennifer Lastimosa

- » Increased certified nurse's rate to 50%
- » Increased Periop (SDS, OR, PACU) patient satisfaction by updating patients/families every 2 hours.
- » Nurses courtesy toward family increased by 4.4 % to 84.4%
- » Information about delays increased by 1.5% to 64.7%
- » OR team participated in Relay for Life, April 2017
- » Party in Pollywog Park
- » OR staff members walked across the Long Beach Bridge for the American Heart Association
- » Kaizen for turnover team, combining SSTs and EVS in the OR
- » Sheli Hicks attended Lean Leader Development Program
- » This OR is recognized as CNOR Strong from the cc-institute... which means more than 50% of our RNs are board certified in surgery! Great accomplishment!
- » 5S on our Anesthesia supply and equipment rooms

- » RN Kum Cho was recognized with a Nurse Excellence Award for Perioperative Service, May 2017
- » RNFA Arlene Howe, Da Vinci Robot training
- » Implementation of enhanced neurosurgery service line
- » Neurosurgery specialty team created
- » Implementation of Bariatric Service Line
- » 4 RNs participated in the Professional Portfolio Program - Seung Hee Ha, Young Cho, Shadae Johnson-Ball, and Claudette Dorsey, Fall 2017
- » Obtained resources per RN request:
 - > 2 Transition Into Practice nurses into the OR- Cameron Wright and Jennifer Lee
 - > 2 surgical techs new to our team!
 - > Promoted 4 staff RNS to Specialty Charge Nurse for a service Line – Sandra Bae, Neurosurgery; Kum Cho, Orthopedics; Shadae Johnson-Ball, Bariatrics/Plastics; and Arlene Howe, Robotics



ICU

Chair: Lizbeth Fresquez

- » Increased certified nurse's rate to 46%
- » Decreased use of behavior restraint rate by 1.86%
- » Developed and implemented ICU guidelines of care by 2nd quarter

Unit Based Councils and Unit Achievements *continued*

PCU

Chair: Ashley Hardin

CoChair: Anastasia Francisca

- » Increased the number of certified nurses to 9%.
- » Increase inpatient perception of hourly rounding score from 47% to 50%
- » Decreased rate of preventable Hospital Acquired Pressure incidents by 40%
- » Participated in Heart Walk
- » Supported Eric Cabahug to participate in Philippine Mission Work
- » Supported Myra Sepulveda to participate Guatemala Mission
- » Supported Claire Santos to participate Long Beach Rescue Mission
- » PCU training provided to all new hires/new graduate RNs. 100% of RNs capable of caring for step down critical patients
- » Every RN has greater than or equal to 8 hours of neuro education to adjust to the growing volume of neuro patients
- » Initiated TAVR training to prepare PCU to take stable TAVR transfers straight from Cath Lab
- » Supported Nicole Jordan to attend Family Nurse Practitioner Conference
- » 0 CAUTIs
- » Obtained resources per RN request:
 - > *Resource nurse and additional CNA to assist with PCU acuity*
 - > *PCU monitors expanded to 266. Increased PCU capable beds from 9 to 21*
 - > *Updated bladder scanner and new vein finder*
 - > *Dinamaps for all rooms*
 - > *Walkers placed in every room*
 - > *Bed side commode placed in every room*
 - > *Equipment for bariatric patients*

- > *Hovermat*
- > *Additional BAIR hugger for hypothermic patients*
- > *Sally sit-stand assistive device*
- > *System to lock overflow rooms*
- > *Updated bed alarm system*

L&D

Chair: Mary Radinsky

CoChair: Kris Jones

- » Increased certified nurse's rate to 40%
- » The percent of mothers of infants <37 weeks gestation and/or < 2500 grams who start pumping to stimulate breast milk production within 6 hours of birth increased from 26% to 59.1%
- » The percent of delivery patients who have blood loss at delivery recorded as a quantitative blood loss (QBL) measurement goal was to increase from 0% to >30%, 41% achieved
- » Increased national certified nurse rate from 25% to 40%

PEDS

Chair: Kayla Lewis & Billie Houghtaling

- » Researched Pediatric Comfort Promise to initiate more than one comfort measure.
- » Supported 2 RNs to attend EDAP
- » Awarded Most Improved Patient Experience Press Ganey 4th quarter
- » Implemented "Buzzy Bee" as a pediatric pain control measure. This iced bumble bee numbs the venipuncture site for IV start or lab draws to reduce pain. Buzzy Bee is a fun distraction for painful procedures
- » Pediatrics has a new look. Pediatric caregivers collaborated to pick wall decals for themed rooms. The unit was painted fresh with color in each patient room for a fun pediatric atmosphere
- » Best in Zero Harm-no patient falls



- » Obtained Resources per RN requests:
 - > *New charging stand for Accuvein equipment, to ease storage and charging*
 - > *New adjustable procedure table for procedure room*
 - > *Pediatric floor refresh.*
 - > *Unit was repainted using pediatric friendly, fun colors.*
 - > *New pediatric designed patient curtains and window treatments.*
 - > *Staff selected fun decals to decorate the rooms in themes, replacing older art work*



NICU

Chair: Miho Noda

- » Increased certified nurse's rate to 41%
- » Improved RN/RT interprofessional compliance with oxygen saturation range monitor settings for low birth weight infants in the NICU to reduce severe Retinopathy of Prematurity (ROP) rate from 23% to 0%
- » Advanced NICU disaster planning and safety drills via interprofessional collaboration
- » Jennifer Massimo and Lori Bischoff abstract accepted and poster presented at National Advanced Practice Neonatal Nurse Conference
- » Hosted annual NICU Reunion in Center for Health Education. 261 past NICU patients and their families in a fun themed event with games, prizes, and music. This allows families to reconnect with NICU Interdisciplinary team in a friendly kid atmosphere
- » Reduced Alarm Fatigue with team collaboration and review of current alarm settings, reducing clinically insignificant alarms and technical events to reduce overall alarms to reach the RN
- » Lea Aquino presented poster, "Non-pharmacological Interventions to Reduce Procedural Pain in Preterm Infants" at PSJ Regional Research and Evidence-Based Practice Day

- » Zero CLABSIs for quarter 3 and 4 by decreasing device utilization and reducing SIR (standard infection rate) to zero, below the CDC National Healthcare Safety Network (NHSN) Benchmark
- » Obtained resources per RN request:
 - > *Purchased three scales for pre and post breastfeeding weights for improved accuracy when weighing our tiniest patients to support breast feeding*

Telemetry Oncology

Chairs: Kim Dimaunahan & Lisa Hung

- » Increased certified nurse's rate to 63%
- » Increased the percentage of applicable patients who have a Goals of Care conversation initiated during hospitalization on Telemetry Oncology to 50%
- » Decreased Injury Falls per 1000 patient days from 2016, 0.87 to 0.45 in 2017
- » Held a staff team building gathering
- » American Cancer Society Torrance Relay for Life (department participation in raising funds)
- » American heart Association Heart Walk (department participation in raising funds and walk)
- » Tour De Pier to raise awareness and funds for Pancreatic cancer: (Trisha Saul, Veronica Stahl, Esperanza Cortes, Sameena Adamjee)
- » Medication safety project (lead by Sandy Martir) Safe time zones were created to increase safety of medication administration. Processes put in place to reduce interruptions. Collaboration with the rehab team and pharmacy for a successful project. Reduced interruptions to greater than 50%.
- » Medication safety project accepted at 2 conferences for a poster presentation
- » Increased nationally certified Oncology nurses: Eleanore Bley, Mailene Erdman, Visesh Mohan, Amber Norman, Kim Dimaunahan, Maria Morales, Roseann Devlin, Jamie Sewell



Unit Based Councils and Unit Achievements *continued*

- » Oncology Nursing Congress in Denver May 2017: Luningning Floresca, Christine Canceran, Roseanne Devlin, Mailene Erdman, Maria Morales, Jee Eun Jang
- » 1st Greater Los Angeles Oncology conference September 2017: Amber Norman, Mailene Erdman, Christine Canceran, Eleanore Bley
- » Magnet Conference October 2017: Sandy Martir, Sameena Adamjee
- » Cipher rounding tool used by nurse leaders to round for improving patient experience. Achieved greater than 95% rounding expectations
- » Changed portacath access needles for improved safety for nurses.
- » Seven nurses completed their TIP Oncology Fellowship in 2017: Dianne Batangan, Nill Dizon, Claudia Olvera-Lopez, Tamra Flores, Maria Urena "MJ", Eunice Son, Sepideh Hadian
- » Initiated MD of the quarter award

4 MED/CARD

Chair: John Flynn
CoChair: Roberta Van Dyke

- » Increased certified nurse's rate to 15.5%
- » Unit participate in Heart Walk and earned the Golden Shoe.
- » Focused on Neuro checks to be completed 90% of the time within 15 minutes of the every 4 hour vital signs
- » Complete Interdisciplinary Stroke Rounds
- » Successful Stroke Survey
- » Support Preparation for Comprehensive Stroke

CDOU

Chair: Simone Alves

- » Increased certified nurse's rate to 16%
- » Increase patient understanding of medication side effects to > 65% and achieved 67%
- » Decreased falls with injury per 1,000/ patient days from 1.72% of falls to 0.30
- » Increased caregiver communication with management by holding individual monthly dialogue with staff.

TCC/TCU

Chair: Juan Manuel Guerrero
CoChair: Sohl Chapman

- » Reduced readmission rate per national average nursing home comparison 25% of 19.3 by adding use of urgent care, MD and not always ER, added Pharmacy Checklists verification in Epic.
- » Held team building Annual Christmas Party
- » Supported outreach program in May (Uganda)

ARU

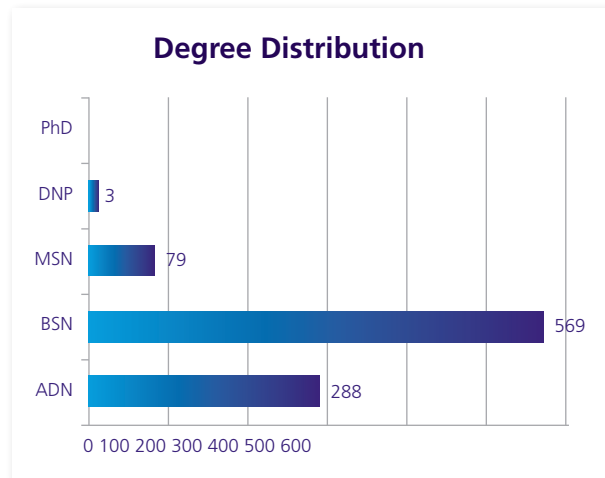
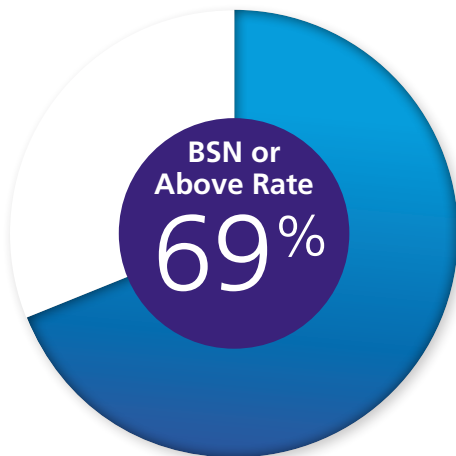
- » Increased certified nurse's rate to 17%
- » Increased perception of degree to which pain was controlled from 2016: 93% to 93.3%
- » Standardized radiology post procedure and discharge orders by the end of July.
- » Eleven nurses attend conference



Excellence Through Certification

Baccalaureate or higher degree in Nursing

Nurses (BSN Degree or Higher): 651



Nationally Certified Nurses: 149

Certification rate per ANCC guidelines including only one certification per full-time or part-time eligible nurse.



Transition into Practice (TIP) RN Resident and Fellow programs

Providence Little Company of Mary Torrance is committed to creating and maintaining an environment in which new clinical nurses entering the nursing workforce (resident) and/or clinical nurses' transitioning to a new area of practice (fellows) are able to realize their maximum potential, and contribute to the practice care environment.

The TIP Nurse Residency and Fellowship programs provide a structured orientation experience that emphasizes interprofessional, collaborative, patient-centered care designed to strengthen assessment, critical thinking, communication, teamwork, and technical skills in a safe learning environment. Activities include:

- » Clinical, strategic coaching in a Preceptor-led environment
- » Developing practice-based clinical skills and professional practice development
- » Competency and skills assessment with validation
- » Facilitated, lively discussion surrounding current evidence based practice
- » Quality and safety group/individual evidence based projects
- » Active learning, professional reflection and collaboration with peers

Congratulations to the 2017 Residents and Fellows who successfully completed the TIP program.

Emma Morton-Smith, Telemetry (PCU)
 Eric Cabus, Telemetry (PCU)
 Michelle Leach, Telemetry (PCU)
 Jennifer Duque, Telemetry (PCU)
 Sierra Hill, Telemetry (PCU)
 Stephanie Olivas, Telemetry (PCU)
 Robert Lontoc, Telemetry
 Vi Burgan, Telemetry
 Kelcie Larkin, Telemetry
 Veronica Vizcaino, Telemetry
 Samina Saleem, Telemetry
 Erica Sanchez, Telemetry
 Amy Carter, Medical Surgical
 Andrea Leao, Medical Surgical
 Edgar Aguirre, Medical Surgical
 Daniel Wintroub, Medical Surgical
 See Chung, OR
 Marie Cielo Garcia, OR
 Bea Angel, PCU
 Schmitz Ashle, Hospice
 Courtney Balyan, Float Pool
 Amy Bustos, Telemetry Oncology
 Nidia Cardona, TCC
 Nkiru Chukwudi, TCC

Fatima Domski, ICU
 Jacquelyn DuVall, Medical Cardiology
 Alexandra Hua, PCU
 Courtney Jelski, Telemetry Oncology
 Jin Lee, Float Pool
 Richelle Maningding, 1st Surgical
 Paige Martin, Emergency
 Xu Mascardo, Telemetry Oncology
 Jessica Mons, ICU
 Lisa Oliver, Telemetry Oncology
 Katherine Rann, ICU
 Rocio Riggio, Telemetry Oncology
 Eva San Miguel, Medical Cardiology
 Jody Soulkis, Float Pool
 Darcie Thomas, Hospice
 Hewett Yohannes, Telemetry Oncology
 Aressa Esguerra, CDOU
 Breana Waddell, CDOU
 Janette Aceituno, Telemetry Oncology
 Ashley Holmes, Telemetry Oncology
 Erik Baez, ICU
 Ross Tamayo, ICU
 Vanessa Matarrese, ICU
 Jillian Marquez, Medical Cardiology

Camila Baez-Smith, Medical Cardiology
 Kirby Cabrera, Medical Cardiology
 Ann Luc, Medical Cardiology
 Rocky, Rojsirivat, Emergency Department
 Diane Ongarato, Emergency Department
 Cesar Saenz, Emergency Department
 Kristin Takemura, Emergency Department
 Karla Castro, Float Pool
 Yvonne Serna, Float Pool
 Ryan Thomas, Float Pool
 Paulette Sanchez, Float Pool
 Minh Villacruz, TCC
 Ryan Albano, TCC



Academic Nursing Partnerships

Providence Little Company of Mary Medical Center Torrance continues to maintain strong affiliate partnerships with both undergraduate and graduate nursing programs. During 2017, our ministry supported clinical and leadership preceptor experiences. We are committed to the success of future registered nurses as they complete their final requirements prior to entering the nursing workforce.

Below is the list of schools that participated in 2017.

- » Cal State University Los Angeles
- » El Camino College
- » Cal State University Dominguez Hills
- » Los Angeles Harbor College
- » Mt St Mary's College
- » St Mary Academy (High School students in a Health Career Options Course)
- » J Serra (High School students in a Health Career Option Course)
- » Walden University
- » Western Governors
- » Cal State University Long Beach
- » UCLA
- » American University of Health Science



29th Annual Celebration of Professional Excellence in Nursing



Providence Little Company of Mary Medical Center Torrance, Division of Nursing, is committed to providing an environment in which evidence-based practice, innovation, collaboration and clinical practice thrives.

Guided by this mission, our program is dedicated to recognizing excellence in nursing practice.

The 29th Annual Celebration was titled "It's all About the Journey honoring the Magnet Journey. The theme attire celebrated the journey of time, culture, and adventures of worldly travel resembling the classic novel and film "Around the World in Eighty days". The entertainment included a nursing rendition of "La La Land" featuring song, dance, and short movie starring our very own nurses. Watch the youTube video "Nurse Excellence-Magnet-PLCMMCT," sorry you missed the live version <https://www.youtube.com/watch?v=t2f15Hszupk>

Nurse Excellence Winners



- PROGRESSIVE AND CRITICAL CARE**
Jinsook Lee- ICU
- WOMEN'S & CHILDREN'S HEALTH**
Jennifer Massimo-NICU

PERI-OPERATIVE NURSING

Kum Cho-OR

MEDICAL SURGICAL NURSING

Amber Ciampi

AMBULATORY CARE OR DISTINCTION SUBSPECIALTY

Ceceile Chantrapornlet- TCC/TCU Infection Prevention

ASSISTANT NURSE MANAGER

Sheryl Herron-1st Surgical

NURSE MANAGER

Lisa Yauchzee-Gac- NICU/PEDS

NURSE DIRECTOR

Fe Mendez- TCC/TCU



Palliative Team



CATEGORY NOMINEES

PROGRESSIVE, CRITICAL AND EMERGENCY NURSING

Kathrina Lagman – Emergency Services
 Jinsook Lee – ICU
 Alyssa Mooney – PCU

WOMEN AND CHILDREN'S HEALTH NURSING

Karla Gomez – Labor & Delivery
 Jennifer Massimo – NICU
 Ketty Scaroni – Mother/Baby Care
 Marjorie Joy Tan – Pediatrics

PERI-OPERATIVE NURSING

Kum Cho – OR
 Rowena Samson – PACU

MEDICAL/SURGICAL NURSING

Cynthia Casillas – 4 Med. Cardiology
 Amber Ciampi – 4 Tele./Onc.
 Juan Guerrero – TCC/TCU
 Luz Menjivar – 1st Surgical

AMBULATORY CARE/DISTINCT SUB-SPECIALTY NURSING

Eilleen Carpo – Risk Mgmt & Safety
 Cecile Chantrapornlert – Inf. Prevention
 Thomas Doyle – Hospice
 Arlene Kidakarn – CDOU
 Elizabeth Placek – Cath Lab
 Venessa Williams – Angio Recovery
 Christy Wolff – Home Health



NURSE LEADER NOMINEES

Assistant Nurse Manager/Clinical Supervisor

Tara Abbott – Angio Recovery
 Kathleen Fogo – Emergency Services
 Cielito (Beth) Franco – TCC/TCU
 Mary T. Hall – NICU
 Sheryl Herron – 1st Surgical
 Jillian Nichols – ICU

Manager

Dina McGee – 4 Med. Cardiology
 Corinna McNamara – ICU
 Ashley Stryker – Cath Lab
 Lisa Yauchzee – NICU

Director

Fe Mendez – TCC/TCU
 Carmel Nicholls – ICU
 Lori Nolan – Women & Children's Health

ROOKIES OF THE YEAR

Destenie Adams – 4 Med. Cardiology
 Zackary Brannon – Cath Lab
 Candace Catbagan – PCU
 Melinda Davis – Mother/Baby Care Charles Eschrich – ICU
 Daryl Esguerra – PCU
 Adhirely Frietze – NICU
 Lisa Hung – 4 Tele./Onc.
 Jaqueline Jankaew – 1st Surgical
 Chelsea Jankovich – CDOU
 Yu (Judy) Kasuga – TCC/TCU
 Michael Ly – 1st Surgical
 Sandy Martir – 4 Tele./Onc.
 Kathryn Meyer – Pediatrics
 Carolina Muralles – CDOU
 Corinna Miller – OR
 Christina Rallo – Endoscopy
 Sylvia Villegas – Labor & Delivery
 Lisa Williams – Emergency Services

A Special thanks to the Planning and Selection Committee. This event would not happen without the dedication, creativity, planning, and support of these individuals.

PLANNING COMMITTEE

Sameena Adamjee
 Eleanor Bley
 Christine Canceran
 Rebecca Clarkson
 Carolina Diaz
 Cindy Fisher
 Jennie Franck
 Joan Gahan

Geri Harmon
 Tom Harney
 Sheli Hicks
 Michael Jongsma
 Jennifer Massimo
 Chris Nowell
 Gem Oca
 Mary Olivas
 Richard Partyka

Mary Radinsky
 Sue Revero
 Nick Scott
 Myra Sepulveda
 Kirsten So
 Lilia Stephenson
 Kathy Welch
 Andrew Werts

SELECTION COMMITTEE

Christine Canceran
 Joan Gahan
 Geri Harmon
 Sandi Look
 Mary Radinsky
 Sue Revero
 Lilia Stephenson

Community Outreach

Annually nurses and caregivers across the organization are committed and supported to participate in individual, team, and ministry community outreach.

Supporting initiatives that advance Healthy People 2020, Healthy People 2030 and our community assessment data so that we are able to develop our nation and those we serve. We are fortunate to partner with our culturally diverse community to improve population health.

2017 Long Beach Heart & Stroke Walk

Most of us know someone affected by heart disease or stroke, Los Angeles County's #1 and #2 killers. The American Heart Association works to save lives by raising critical dollars for heart disease and stroke research. In support of this valuable cause, October 21st. Providence Little Company of Mary raised \$28,282.76 and Heartwalked at the 2017 Long Beach Heart & Stroke Walk at Shoreline Aquatic Park. An amazing 19 teams formed, participating in fundraising efforts such as Comedy Club events and the Cardiovascular Team taco and burger events, where Nutrition and Foods Services donated food and all caregiver donations went into the fundraising efforts

The Providence Little Company of Mary teams included:

4MC Hearty to Party	PJ Building	Random Hearts	Team Jenny- 1st Surg/Ortho
Cath Lab	Plant Ops	Respiratory Hearthrobs	Team Regina- Respiratory
Food Services	PLCM- ED	TCC	
Marching for Manny	PLCM- ICU	Team HIM	
PCU Heart Throbs	Rad Walkers	Team Jackie- 1st Surg/Ortho	



Relay-for-Life

Providence Little Company of Mary Medical Center "Healers" generously support and join survivors and caregivers in Relay for Life Annual South Bay event. Honoring the strength and courage of those affected by cancer, caregivers walk for 24 hours and with every step they take they demonstrate hope while supporting those who grieve. Together they cheer you on and take a stand against the disease. Ann Corr RN, Breast Center Manager shared, "the hospital supports fundraising efforts including an event at California Pizza Kitchen, Calcom Federal Credit Union, caregiver made jewelry sales, and collection of recycled bottles

and cans across the organization allowing the team to raise \$9,329.78 for the American Cancer Society efforts." Additionally, Tele Oncology's Relay-for Life team is always successful with fundraising and team building for Relay-for-Life and Walk for Hope. The hospital furnishes team shirts, stethoscopes for caregivers to wear, booths with give-a-ways that support preventative health such as hand gel, sunscreen, sunglasses, and screening information.



SkinSational Team

The Skin Team leads and performs the organization's CalNoc Prevalence study quarterly. This helps us measure and identify opportunities to improve Hospital Acquired Pressure Incidence, a nurse sensitive indicator.

Providence Little Company of Mary Medical Center has the most attendance at the 3rd Annual Skin Symposium. The SkinSational Team champions provide unit based support and serve as internal experts on the units by being a resource. Collaboratively the team created a checklist that is now included in the New Hire Orientation packet focusing on standard work and expectations regarding wound/pressure injury.



Exemplary Professional Practice

Nursing Professional Practice Model

Our **PROFESSIONAL PRACTICE MODEL (PPM)** is grounded in two complementary nursing theories, “Jean Watson’s Philosophy of Nursing,” based on her theory of human caring, and Patricia Benner’s novice-to-expert theory. The PPM depicts how nurses grow into nursing practice and how they communicate and relate to patients, families, communities and the interdisciplinary team.



The Five Components of Our Professional Practice Model

Shared Leadership and Empowerment

We see leadership as a shared endeavor between our leadership teams and clinical nurses. It is designed to maximize professionalism in nursing practice.

Quality, Safety and Excellence in Nursing Care

Nurses promote quality and safety in nursing care. They take accountability for high-quality outcomes.

Professional Development Advancement

We promote opportunities for nurses to grow into the professional nursing role with collaboration and competence. We encourage and reward their participation in academic progression, national certification and ongoing continuing education programs.

Interprofessional Collaboration

Within this context, collaboration is a necessary component to professional growth. Team members bring valuable expert resources to the care of patients and families.

Evidence-Based Practice

By using the systematic study of actions and phenomenon relative to the practice of nursing, we can greatly enhance nursing practice and patient care outcomes.

Patient- and Family-Centered Care

The Institute for Patient- and Family-Centered Care defines this type of care as “an approach to the planning, delivery, and evaluation of health care that is grounded in mutually beneficial partnerships among health care providers, patients, and families” (n.d.). At Providence, we recognize that when we care for a patient, our care extends to and must be sensitive to the patient’s family.

Journey to Becoming a High Reliability Organization

Our journey to becoming a **HIGH RELIABILITY ORGANIZATION (HRO)** continues as we reinforce and build accountability to the use of the caring reliably tones, behaviors, and tools. Our Patient Safety Good Catch Award Program is a way for caregivers to share their success with HRO by recognizing themselves or others for preventing error or harm.

The following nurses demonstrated their commitment to keeping patients safe by Caring Reliably and received a good catch award in 2017:

- » Petcha Dupree, PCU
- » Roseann Devlin, Tele/Onc
- » Insook Kimlee, 4MC
- » Martin Kane, Tele/Onc
- » Luz Menjivar, 1SO
- » Jeni Varghese, Tele/Onc
- » Lorena Rutanajuntra, CDOU
- » Linda Vu, ICU
- » Rosemarie Navarro, ICU
- » Melissa Alvarado, PARR
- » Andrea Taylor, ICU
- » Marisol Barraza, PCU
- » Sheena Pascual, PCU
- » Jennifer Massimo, NICU
- » Alyssa Mooney, PCU
- » Charo Perez, Tele/Onc
- » Mai Menes, 1SO
- » Rocio Riggio, Tele/Onc
- » Karen Allen, 1SO
- » Courtney Kelly, 1SO

PROVIDENCE
Health & Services

Toolbox for everyone
With our collective commitment to safety and reliability, we serve our mission and achieve our vision.

Our Mission
As people of Providence, we reveal God's love for all, especially the poor and vulnerable, through our compassionate service.

Our Promise
Together, we answer the call of every person we serve: know me, care for me, ease my way.

Our Vision
Simply Health for everyone.

Core Values
Respect, Compassion, Justice, Excellence, Stewardship.

CARING RELIABLY
Be Compassionate. Be Safe. Be Reliable.

Tones for respect of others at all times

- Smile and greet others; say "hello"
- Introduce using preferred names and explain roles
- Listen with empathy and intent to understand
- Communicate positive intent of our actions
- Provide opportunities for others to ask questions

Universal behaviors and tools

- PAY ATTENTION TO DETAIL**
 - Self-check using SBAR (Stop, Think, Act, Review)
 - Peer check
- HAVE A QUESTIONING ATTITUDE**
 - Validate and verify
 - Know why and comply
- OPERATE AS A TEAM**
 - Brief, execute and debrief
- COMMUNICATE CLEARLY**
 - SBAR (Situation, Background, Assessment, Recommendation)
 - Three-way repeat-back and read-back
 - Phonetic and numeric clarification
 - Clarifying questions
- SPEAK UP FOR SAFETY**
 - Escalation using CUS (Concerned, Uncomfortable, Stop) and chain of command
 - Event reporting systems (UOR)

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2016 DAISY Award for Extraordinary Nurses Honorees



The DAISY Foundation, was established in 1999 by members of the family of Patrick Barnes.

He was 33 years old and died of complications of the auto-immune disease Idiopathic Thrombocytopenic Purpura (ITP). Like many families that suffer a horrific loss, the Barnes family wanted to do something positive to honor the very special man Patrick was. They came up with DAISY – an acronym for Diseases Attacking the Immune System. As

they brainstormed what The DAISY Foundation would actually do, they kept coming back to the one positive thing they held on to during Pat's 8-week illness: the extraordinary care he and they received from Pat's nurses. The family was very impressed by compassionate and sensitive nursing care, so they developed the DAISY Award® for Extraordinary Nurses. The Daisy recognition program is embraced by healthcare organizations around the world. We are very proud to partner with DAISY to honor extraordinary nurses here at Providence Little Company of Mary Medical Center Torrance.

The Daisy Award honors highly valued qualities and attributes such as:

- » Goes above and beyond
- » Provides a vision of hope
- » Provides compassionate care
- » Has significantly "made a difference" in the life of a patient
- » Makes a special connection with the patient and family
- » Does an excellent job educating patients and families
- » Provides consistent focus on meeting patient and family goals and needs



Daisy Honorees are recognized in a public ceremony on his/her unit and receive:

- » Leather bound Certificate
- » DAISY Award Pin
- » Healer's Touch Sculpture: representing the nurse and patient bond, hand-carved by artists in Zimbabwe
- » Daisy banner hung on their unit with the honoree photo
- » American Nurses Credentialing Center (ANCC) provides special certification and re-certification rates
- » College of Nursing offers reduced tuition for advancing nursing education
- » Plus more benefits detailed on DAISYfoundation.org.

Providence 2017 Daisy Winners include:



FEBRUARY: Lisa Hung BSN, PCCN, RN, Telemetry Oncology

A patient had been coming to receive outpatient chemo for months. Lisa and other chemo nurse's took turns caring for him. To prepare for his last day of chemo, Lisa brought in a King's Hawaiian Paradise Cake, arranged for all the staff to be waiting in the break room after his last dose of chemo. Lisa escorted the patient into the room where 20 people congratulated him and provided a Certificate of Completion. Thanks to Lisa's kind, generous heart, our patient had a memorable and fun moment with the team.

APRIL: Kezia Ayad BSN, RN, Telemetry Oncology

Kezia is honored for the compassionate comfort care she provided throughout a patient's final days. She made a difference in the patient's life and went above and beyond to help the patient die with dignity. Kezia made an impression on the family that will last a lifetime by providing consistent love and support. Kezia went above and beyond, providing a vision of hope, compassionate care and made a difference in the life of this patient and their family.



MAY: Diana Higashi BSN, RN, 4th Medical Cardiology

Diana went to great lengths to ease our loved one's way through the end-of-life. Her spirit, and compassion extended to the family throughout the hospital stay and they felt it beyond the days she was their nurse. She checked on them whenever she was working to make them comfortable and offer support. Diana inspired a family member to go back to school to become a nurse."

JUNE: Meghan O'Keefe, RN-BC, 1st Surgical

Meghan's is compassionate and mission driven whom demonstrated this by spending quality time with a scared patient. Specifically noted was the appreciation that Meghan prayed with the patient revealing God's love during a vulnerable time.



SEPTEMBER: Kremena Dimitrova, BSN, RN, Progressive Care Unit

Kremena provided a vision of hope, comfort, and compassion as she connected to our family.



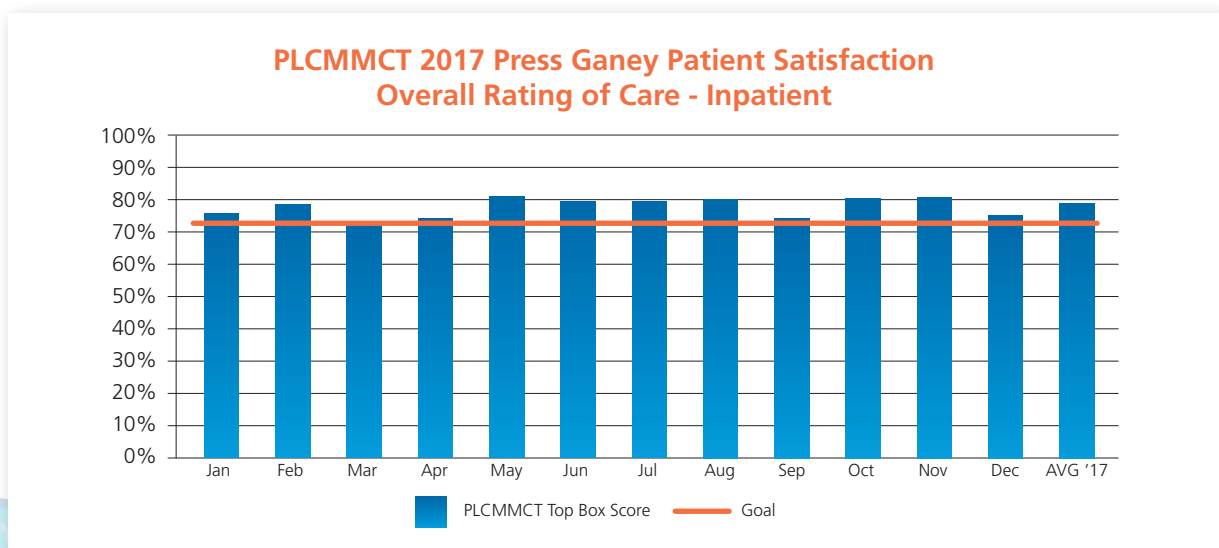
Patient Experience - Inpatient

Providence Little Company of Mary Medical Center Torrance is proud of many successful patient experience initiatives and we strive to hard wire opportunities.

In 2017, the Service Excellence team used their second annual Patient Experience Strategic Plan, in coordination with an A3, to design deliberate, actionable, and sustainable patient experience initiatives. A Patient Experience Subcommittee of the Board developed to lead and provide feedback on patient experience initiatives. CipherHealth Orchid Rounding Tool was sustained and used to determine proactive rounding on patients, and for use during nurse rounding offering real time collection of patient feedback via an iPad. Alerts are sent real-time to pharmacy, environmental, food services, and facilities allowing immediate action. In 2017, caregivers rounded on 24,528 individual patients and completed 87,410 individual rounds. These new approaches and our mission driven compassionate care are making a difference in the lives of our patients as demonstrated by these patient comments and patient satisfaction overall rating of care scores.

Patient comments:

- » I never used the call button. The nurses just kept checking on me.
- » Every nurse who took care of me especially the first one I came in contact with. I went to thank them all. I was amazed.
- » My nurses were the best people I'll ever meet.
- » I was very happy with my nurses, they respond to my need right away. Thank you.
- » Thank you Michelle, Maria and Tamara - For your kindness, care, and attention!!
- » Nurses were always courteous and informed me of all tests and labs beforehand.
- » I loved all of my nurses but especially my night nurse (in ICU), *Kristy! Her kindness and thoughtfulness was exceptional!
- » Every nurse in ICU & the regular room did an outstanding job. I can't thank them enough.
- » I was astounded to see how professional, friendly and helpful each of her nurses were in performing their duties. A+ ALL AROUND.
- » I had the best nurses. I felt like I was the only person on that floor. Thank you Lori - Jenny and all I was there!
- » I wish I could remember all names of nursing staff. They were all very friendly & upmost professional including the therapist.
- » Christina on night shift first floor is a "10," very fast at getting Zofran when I became nauseated & continued to check on me.
- » I have spent a lot of time in hospitals lately with family members. This was THE most enjoyed, compassionate group of nurses I have ever come in contact with. It was like I was their own mother!
- » LCMH's nurses, assistants and aides are the BEST! Professional, compassionate and never made me feel like they were too busy for my needs.



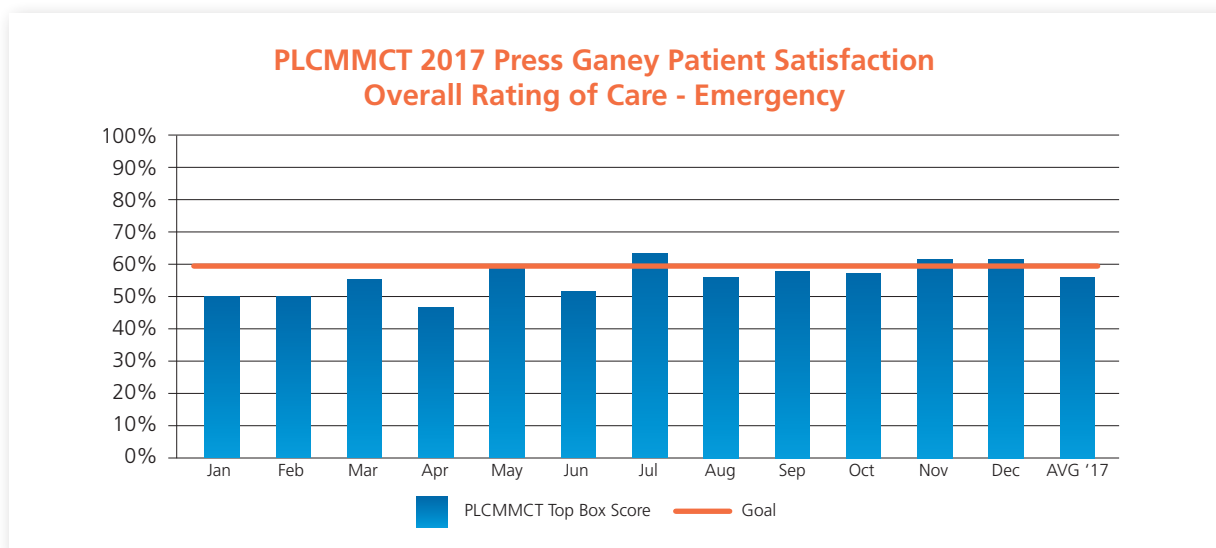
Patient Experience – Emergency Department

Providence Little Company of Mary Medical Center Torrance is proud of many successful patient experience initiatives and we strive to hard wire opportunities.

In 2017, the Service Excellence team partnered with nursing of the Emergency Department to promote many changes. A brochure was developed to keep patients informed, based on patient feedback charging stations were added to the lobby, overhead paging by nursing was implemented, and nursing helped drive job delineation roles to ensure patient needs were consistently met. CipherHealth Orchid Rounding Tool was sustained and used to determine proactive rounding on patients, and for use during nurse rounding offering real time collection of patient feedback via an iPad. Alerts are sent real-time to pharmacy, environmental, food services, and facilities allowing immediate action. In 2017, caregivers rounded on 7,879 individual patients, completing 8,076 individual rounds. These new approaches and our mission driven compassionate care are making a difference in the lives of our patients as demonstrated by these patient comments and patient satisfaction overall rating of care scores.

Patient comments:

- » Overall impression: discipline, organized, kindness. Excellence.
- » They did everything they can do keep me calm and my daughter while they do their precious job.
- » My nurses (both shifts) were helpful & attentive. Always checking on me & even getting me and helping set up a breast pump so I could attempt to pump.
- » Very good. I needed constant care, and that's what I received.
- » Thank you very much for all the nursing personnel, very kind & attentive they were with us nurses, doctors, receptionist department. Thank you very much for all your help & generosity.
- » All of the nurses were great. I had Nurse Marvin, with Nurse Jessica at the end. That is in addition to the nurses (or nurse practitioners) in the triage area who did good work and explained what they were doing.
- » Took time to know my family situation, was helpful to all of us.
- » The nurses were all very polite and helpful. They also communicated very clearly with me throughout my time there.
- » The nurses were absolutely wonderful with my son & made sure he was well taken care of & monitored him very closely from beginning to end. They were so friendly, caring, & sensitive to his needs.
- » Nurse came in to my room to explain in detail about all the procedures.
- » He was helpful, comforting, and was great with my child. He also took the time to answer questions & keep us safe from other patient's germs since I had a newborn with us as well.
- » April was Awesome!
- » Very professional staff. I was impressed, considering the high volume of patients they were dealing with.
- » Kind nurses throughout my experience.

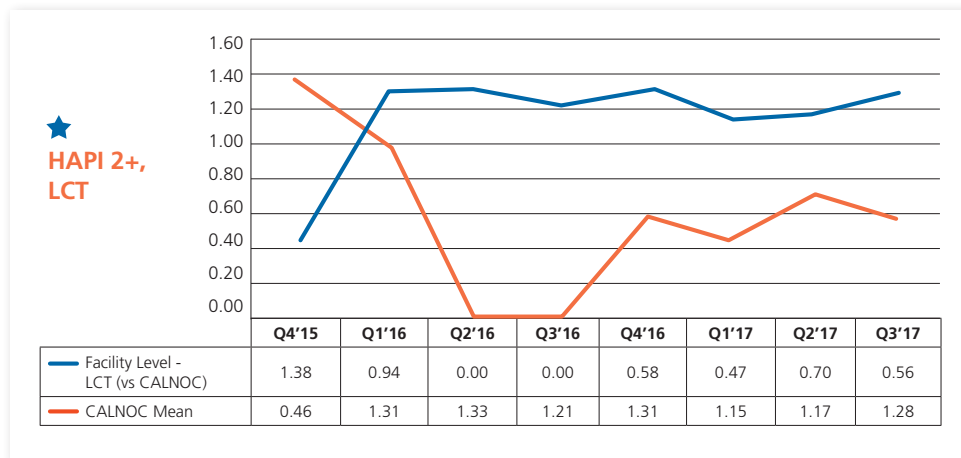


Quality Outcomes

To meet Magnet® Standards requires reporting 8 consecutive quarters of unit- or clinical-level nurse sensitive clinical indicators of data to demonstrate outperformance of the mean, median, or central tendency (benchmark provided by the vendor's national database).

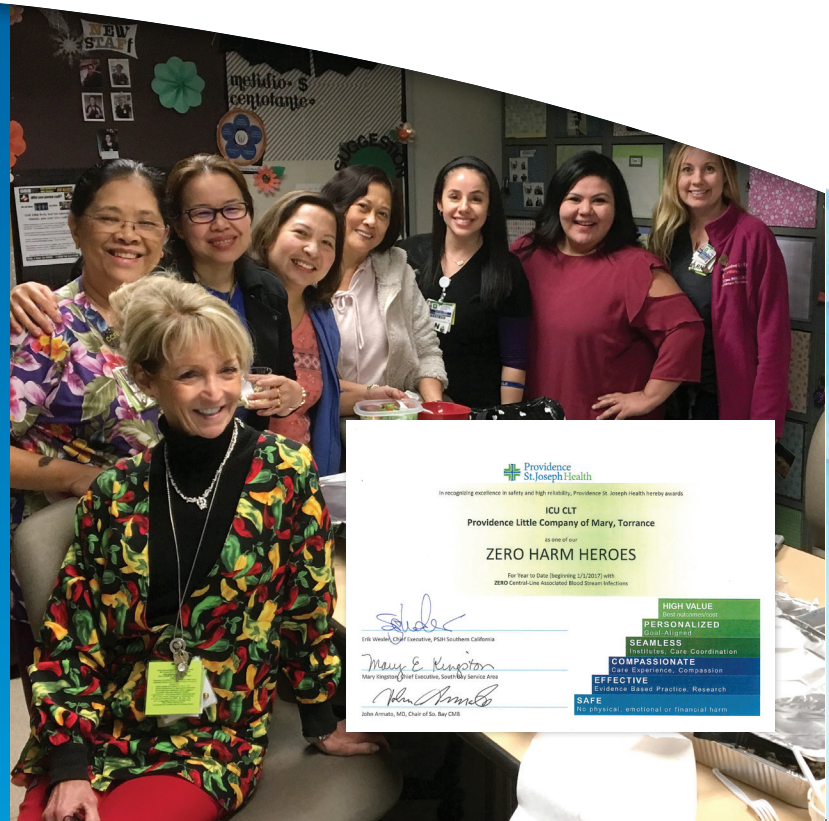
Required patient indicators for all inpatient care organizations include falls with injury, hospital-acquired pressure injuries stage 2 and above and two others from a provided list. For purposes of the annual report we are reporting at the organizational level) Magnet requires reporting at each unit level under these guidelines with the majority of units outperforming the national benchmarks the majority of quarters. New ambulatory measures are added for the 2019 Magnet® Manual.

★ = Meets Magnet Standards

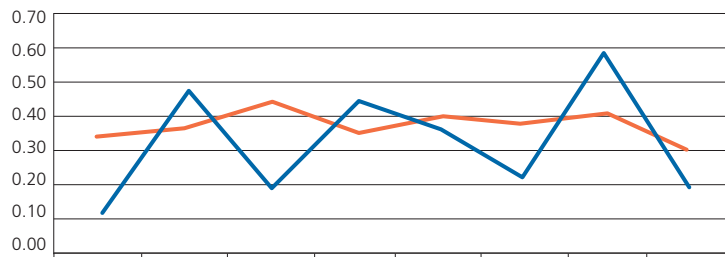


Zero Harm Heroes *Intensive Care Unit*

The ICU was recognized by Providence St. Joseph Health System with the “Zero Harm Heroes Award” for being Central-Line Associated Blood Stream Infections (CLABSI) free for almost two years. The unit celebrated January 26th with food and non-alcoholic beverages sponsored by Michael Jongsma, former Chief Nursing Officer.

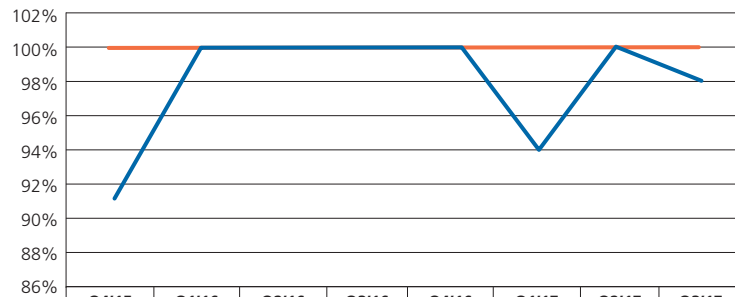


★ ALL INJURY FALLS, LCT



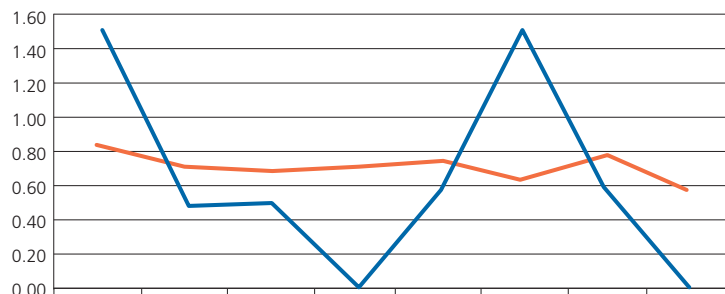
	Q4'15	Q1'16	Q2'16	Q3'16	Q4'16	Q1'17	Q2'17	Q3'17
Facility Level - LCT (vs CALNOC)	0.12	0.47	0.19	0.44	0.38	0.23	0.58	0.19
CALNOC Mean	0.34	0.37	0.43	0.35	0.40	0.38	0.41	0.30

★ OP-4C (Aspirin at arrival CP), LCT



	Q4'15	Q1'16	Q2'16	Q3'16	Q4'16	Q1'17	Q2'17	Q3'17
Facility Level - LCT (vs TJC)	91%	100%	100%	100%	100%	94%	100%	98%
TJC TARGET	100%	100%	100%	100%	100%	100%	100%	100%

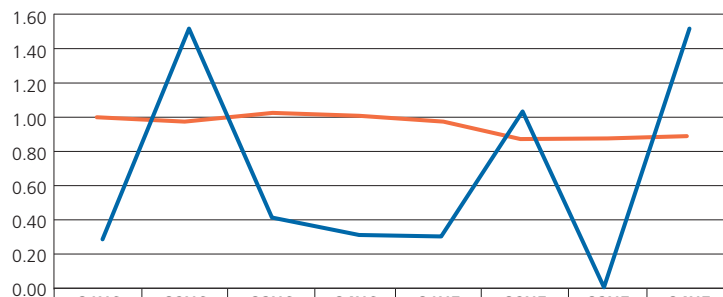
★ CLABSI Measure



	Q1'16	Q2'16	Q3'16	Q4'16	Q1'17	Q2'17	Q3'17	Q4'17
Facility Level - LCT (vs CALNOC)	1.540	0.484	0.527	0.00	0.594	1.529	0.596	0.00
CALNOC Mean	0.849	0.724	0.701	0.730	0.749	0.612	0.785	0.593

Demonstrating Magnet® 8Q expectation and majority of quarters above national benchmark.

★ CAUTI Measure



	Q1'16	Q2'16	Q3'16	Q4'16	Q1'17	Q2'17	Q3'17	Q4'17
Facility Level - LCT (vs CALNOC)	0.297	1.562	0.406	0.364	0.326	1.092	0.00	1.359
CALNOC Mean	0.999	0.994	1.053	1.004	0.988	0.896	0.886	0.900

New Knowledge, Innovations and Improvements

Research & Evidence Based Practice

Providence Little Company of Mary Medical Center Torrance (PLCMMCT) utilizes and develops the knowledge, skills, and gifts of each nurse.

Nurses at all levels pursue knowledge and evaluate specialty guidelines enabling them to review, revise, or implement improvements that enhance the delivery of care and patient care environment. Furthermore, the innovative research and evidence-based practices discovered at PLCMMCT are disseminated across the organization and nation to advance nursing and healthcare.

The following nurses attended national and state conferences.

Unit	Name	Conference
4MC	Courtney Herron	Magnet Conference
Cath lab/ARU/ Cardiac Rehab	Ashley Carnes	ACNL
Cath Lab	Nikki Yerelian	Magnet Conference (Poster Presentation)
Cardiac Rehab	Carol Sukimoto	American Association of Cardiovascular and Pulmonary Rehabilitation
Cardiac Rehab	Yvonne Hashimoto	California Society for Cardiac Rehabilitation 32nd Annual Conference 10th Cardiovascular Symposium
Cardiac Rehab	Kathy Krogstad	California Society for Cardiac Rehabilitation 32nd Annual Conference 10th Cardiovascular Symposium
Cardiac Rehab	Joni Toyooka	California Society for Cardiac Rehabilitation 32nd Annual Conference 10th Cardiovascular Symposium
Cardiac Rehab	Cynthia Rohrer	California Society for Cardiac Rehabilitation 32nd Annual Conference 10th Cardiovascular Symposium
Cardiac Rehab	Patti Strange	California Society for Cardiac Rehabilitation 32nd Annual Conference 10th Cardiovascular Symposium
ICU	Natalie Remacle	Association of California Nurse Leaders; Magnet Conference (Podium Presentation) Lean Summit (Presentation) The National Teaching Institute & Critical Care Exposition
ICU	Jillian Nichols	The National Teaching Institute & Critical Care Exposition
ICU	Charles Eschrich	The National Teaching Institute & Critical Care Exposition
ICU	Elirose Tamargo	The National Teaching Institute & Critical Care Exposition
ICU	Mila Glodoveza	The National Teaching Institute & Critical Care Exposition
ICU	Carmel Nicholls	American Organization of Nurse Executives
ICU	Corinna McNamara	Magnet Conference
ICU	Lizbeth Fresquez	Magnet Conference
1SO	Jenny Frisina	Association of California Nurse Leaders Medical Surgical Conference (Poster Presentation)

Unit	Name	Conference
1SO	Sheryl Herron	Association of California Nurse Leaders
1SO	Sandi Look	Association of California Nurse Leaders
Peds/NICU	Jennifer Massimo	National Advanced Practice Neonatal Nurses Conference
Peds/NICU	Loreli Bischoff	National Advanced Practice Neonatal Nurses Conference
Peds/NICU	Miho Noda	The Fetus and Newborn by Contemporary Forums
Peds/NICU	Adhiresly Fietze	Newborn Developmental Symposium
Peds/NICU	Melissa Myers	The Fetus and Newborn by Contemporary Forums
Peds/NICU	Nicha Panich	The Fetus and Newborn by Contemporary Forums
Peds/NICU	Trisha Loftis	The Fetus and Newborn by Contemporary Forums
Peds/NICU	Lea Aquino	PSJ Regional Research and Evidence-Based Practice Day
Peds/NICU	Charlene Gidanian	Emergency Department Approved for Pediatrics
Peds/NICU	Dawn Harlow	Emergency Department Approved for Pediatrics
Peds/NICU	Lillian McClure	Emergency Department Approved for Pediatrics
Tele Onc	Sameena Adamjee	Association of California Nurse Leaders Nurses Improving Care for Health System Elders Collaborative Alliance for Nursing Outcomes Annual Cardiac Symposium Magnet
Tele Onc	Christine Canceran	Association of California Nurse Leaders Oncology Nursing Society Congress Greater Los Angeles Nursing Society Oncology Care Summit
Tele Onc	Ning Floresca	Oncology Nursing Society Congress
Tele Onc	Mailene Erdmann	Oncology Nursing Society Congress Greater Los Angeles Nursing Society Oncology Care Summit Annual Skin Symposium Annual Cardiac Symposium
Tele Onc	Eleanore Bley	Greater Los Angeles Nursing Society Oncology Care Summit Annual Skin Symposium
Tele Onc	Maria Vazquez	Annual Skin Symposium; Annual Cardiac Symposium Protecting the right to care
Tele Onc	Sharon Aaron	Annual Cardiac Symposium Protecting the right to care



Research & Evidence Based Practice *continued*

Unit	Name	Conference
Tele Onc	Maria Morales	Oncology Nursing Society Congress
Tele Onc	Jee-eun Jang	Oncology Nursing Society Congress
Tele Onc	Roseann Devlin	Oncology Nursing Society Congress Greater Los Angeles Nursing Society Oncology Care Summit
Tele Onc	Amber Norman	Greater Los Angeles Nursing Society Oncology Care Summit
Tele Onc	Eunice Yoo	Annual Skin Symposium
Tele Onc	Kristin Blackshear	Annual Skin Symposium
Tele Onc	Elma Canilang	Annual Skin Symposium
Tele Onc	Isabel Guzman Garibay	Annual Skin Symposium
Tele Onc	Celena Green	Annual Skin Symposium
Tele Onc	Judelyn Rosetes	Symposium on Advanced Wound Care
Tele Onc	Sandy Martir	Magnet
WHS	Raeann Colburn	UCSF antepartum and intrapartum management conference
WHS	Alisha Razo	Advanced fetal monitoring conference with Lisa Miller
WHS	Marilyn Steinberg	PHS research /EBP conference
WHS	Hillary Gray	California breastfeeding coalition Summit
WHS	Karla Gomez	High Risk Obstetrics; current trends treatments and issues.
WHS	Mary Radinsky	California breastfeeding coalition summit National mother baby nurses conference
WHS	Joan Gahan	Antepartum-Intrapartum Management at UCSF
WHS	Lori Lee	Antepartum-Intrapartum Management at UCSF
WHS	Evelyn Recenos	High Risk Obstetrics; current trends treatments and issues. management
WHS	Stacy Decario	High R High Risk Obstetrics; current trends treatments and issues.
WHS	Karen Navarro	High Risk Obstetrics; current trends treatments and issues.
WHS	Lorena Bantug	High Risk Obstetrics; current trends treatments and issues.
WHS	Sataporn Anankunupakahn	Fetal Demise Conference
Magnet	Trisha Saul	American Society for Pain Management Nursing PSHJ Research Video Symposium Series Providence Regional Research Day
Magnet	Geri Harmon	Magnet Conference Association of California Nurse Leader
PeriOp	Sheli Hicks	Lean Construction Institute

Strategic and Organizational Transformation

Lean Transformation Activities Summary

	MONTH	ACTIVITY	OBJECTIVES / ACHIEVEMENTS
SOUTH BAY	February	Rolled out South Bay Five Bests	Align regional goals with South Bay goals and to frontline caregivers with department goals
	February	Lean Transformation assessed and evaluated by Catalysis	Assessment demonstrated a deepened understanding of lean principles and commitment to creating a culture of problem solvers
	March	Mislabeled Specimens project in ED at both ministries	Resulted in 64% reduction of mislabeled and unlabeled lab specimens at Torrance and 13% reduction at San Pedro
	April	Launched cohort 1 of Lean Leader Development with 6 leaders.	100% of lean leaders in cohort 1 advanced by at least 1 level in focus behaviors on behavioral rating scale
	May	Standardized performance board and dialogue at strategic level at both ministries	Ensure consistency in performance reporting and problem solving methodology
	May	Held Innovation workshop	Explore methodology behind tapping into unmet needs of customers
	May	Presented at South Bay Leadership Development Institute	Deepened core leaders' understanding of Transformational Leadership Model and provided forum for practice of principle-based behaviors
	June	Presented at annual Catalysis Lean Healthcare Transformation Summit (Training Within Industry CLABSI and CAUTI, 2P use in design)	1. 75 min learning session topic focused on training methods as a vehicle to reducing CLABSI 2. 15 min experiment presentation focused on the use of lean methods in the design of the AACC
	July	Vertical Value Stream PLCMMC and City of Hope Affiliation	Developed project plan to execute COH affiliation and implementation of plan
	October	First South Bay 'Managing for Daily Improvement' (MDI) session incorporating both ministries in like hospital areas: ED and ICU	Development of leadership behaviors in the context of problem solving, caregiver engagement, goal alignment, and coaching. Established forum for future collaboration.
October	Hosted Shingo workshop for Construction industry, including gemba visit	Offer learning environment for construction industry practitioners to learn and observe lean in practice.	



Strategic and Organizational Transformation *continued*

Lean Transformation Activities Summary

	MONTH	ACTIVITY	OBJECTIVES / ACHIEVEMENTS
TORRANCE	January - December	New Performance Boards / Huddles 1. CDOU 2. Case Management 3. EVS 4. Lab 5. PCU 6. Medical Cardiology 7. Radiation Therapy 8. Telemetry Oncology	Engage caregivers in problem-solving directly affecting their work and alignment of goals
	January	Comprehensive Stroke Certification – Vertical Value Stream Project Plan (Phase II)	Develop design of workflows and program structure
	February	ED Discharge Kaizen	Streamline ED discharge process for discharged patients from time of ED MD disposition to patient departure
	April	Code White kaizen	Develop standard work for an efficient Code White process
	April	Primary Stroke Certification to Comprehensive Stroke Certification Workflows	A more robust, streamlined stroke care process with algorithmic, standardized workflows
	May	Interfacility Transfers from Primary Stroke Certified Centers to PLCMMCT Comprehensive Stroke Certified	Establish relationships with basic and PSC hospitals in the SB community and an agreed upon transfer protocol and criteria
	July	Designed and implemented Multiscale functionality and interventions within the Emergency Department	Allows for real-time monitoring of throughput throughout the ED and between inpatient and ancillary departments, while exposing opportunities for real-time interventions
	July – November	ED Front End Experience Project Caregiver Role Delineation in ER Waiting Room Handout to Explain ED Process Standardized overhead Lobby Paging Face Mask Distribution	Aimed to improve patient experience within the ED lobby based on top complaints from patients and family
	August	OR Turnover Team Kaizen	Ensure timely patient transport, first case set up and case turnover for to-follow cases
August	Women and Children’s Visioning/Strategic Planning	Set strategic direction for Women and Children’s service line.	



Translational Research & Innovations in Nursing (TRAIN) Fellowship

Translating research in nursing is vital to improving healthcare and advancing nursing science. The TRAIN fellowship prepares nurses to facilitate change in nursing practice.

This change occurs through identifying a relevant nursing practice question or problem, developing and implementing a way to solve it, evaluating and monitoring outcomes, and then determining whether to incorporate the new knowledge into practice, followed by dissemination of the findings.

In 2017 we successfully initiated the third TRAIN fellowship program. Research and evidence-based practice projects are extensive and require at least a yearlong commitment. The past two fellowships supported a single nurse project approach. After reevaluating opportunities, successes, and evaluating fellows feedback the fellowship was revised to attempt a small team approach. Teams heighten the research experience by allowing collaboration during the research process and distribution of work between team members. The 2017-2018 fellowship includes two teams: Intensive Care Unit and Telemetry Oncology. Years of nursing experience ranged from 2-12 with both day and night shift participation, adding knowledge and perception at multiple levels. Both studies received approval from the IRB and are currently underway. The study aims are below:

Intensive Care Unit

Blanca Zepeda BSN, RN, CCRN, Natalie Remacle MSN, RN, CCRN, Sarah Czerniejewski BSN, RN & Lak Tuong BSN, RN

Study Aim

We aim to show the feasibility of routinely implementing pulse contour technology, providing hemodynamic monitoring during an ICU admission with sepsis, and to evaluate its effects in terms of sepsis fluid management, outcomes, and additional procedures.

Telemetry Oncology

Amber Norman BSN, RN, PCCN, Sandy Martir BSN, RN & Kim Dimaunahan BSN, RN, PCCN

Study Aim

The purpose of our study is to determine the knowledge and attitudes regarding complementary and alternative medicine (CAM) of nursing staff at Providence Little Company of Mary Torrance.



Journey To Magnet Excellence®



The Magnet Recognition Program® recognizes healthcare organizations for high quality patient care, nursing excellence, and innovations in professional nursing practice.

The Magnet Model components provide the framework for nursing practice and research aimed to improve care and meet the challenges of global health care. The five model components for nursing excellence are:

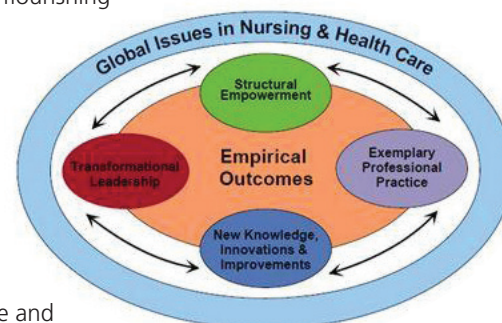
Transformational Leadership: Visionary leadership that transforms the organization to meet changing healthcare needs.

Structural Empowerment: Solid structures and processes developed by influential leadership and empowered nurses that are engaged to face the challenges of healthcare delivery through flourishing professional practice.

Exemplary Professional Practice: Dedicated nurses who apply their knowledge and evidence-based research to their role with patients, families, and interdisciplinary teams to achieve their professional best.

New Knowledge, Innovation, and Improvements: Nurses contributing to quality care through research, evidence-based practice and innovation allowing systems and practices to be redefined and redesigned.

Empirical Quality Results: Outcome driven changes that provide quantitative and qualitative evidence to demonstrate the impact of structure and process changes.



Providence Little Company of Mary's journey began in 2005.

The journey offered periods of assessment and reflection as we worked together establishing structures and processes to enrich a culture that promotes lifelong learning, innovation, recognition, and advancements in nursing professional practice. On August 22, 2016, the Magnet Champions proudly welcomed American Nurses Credentialing Center appraisers for a three-day visit in which they verified and validated the structures, processes, and outcomes shared in our Magnet Application, seeking further to feel our nursing culture. All caregivers shined as they shared countless examples of the exceptional collaborative, patient-centered care they provide daily. The enthusiasm across the organization was palpable!

October 26, 2016, the Commission on Magnet Recognition placed a call during the weekly leader Flash meeting to announce PLCMMCT had deservedly achieved Magnet designation.

Upon honorably accepting this distinction, we also accepted the challenge to continually improve all that we do for our community and nursing practice. In the spirit of our mission, "Know me, care for me, ease my way," we realize consumers rely on Magnet-designated organizations because they understand it is the ultimate credential for high quality nursing. Our caregivers agree, and so together we aim for re-designation and submitting our application October 2020.

The 2019 standards continue to raise the bar as the gold standard for nursing care delivery, new nursing knowledge, and evidence-based clinical quality in healthcare organizations around the world. To maintain exemplar status to meet our next application we continue a journey to support nurses to advance their professional practice and seek national specialty certification and commit to life-long learning by obtaining a BSN or higher which evidence demonstrates improves the quality of care. We must continually review all we do to improve structure, processes, and outcomes which mean we will identify methods of measuring improvement in the eyes of our patients as nurse sensitive indicators, patient satisfaction, improving throughput, and decreasing length of stay. We work together to improve caregiver satisfaction by working with peers to promote professional practice environments, collaboration, and communication. Together we will know for, care for, and ease the way of our patients and each other.





providence.org/torrance

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