Dedication

To our fellow associates and colleagues on the care team. Every nurse understands that no nurse can do it alone.
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St. John Providence Health System is one of the largest providers of inpatient care in southeast Michigan and one of the largest employers in metro Detroit. We provide comprehensive prevention, primary care and advanced treatment programs in more than 125 office practices and six hospitals spanning five counties.

- Brighton Center for Recovery, Brighton
- Providence-Providence Park Hospital, Novi Campus
- Providence-Providence Park Hospital, Southfield Campus
- St. John Hospital & Medical Center, Detroit
- St. John Macomb-Oakland Hospital, Madison Heights Campus
- St. John Macomb-Oakland Hospital, Warren Campus
- St. John Providence Care Continuum
- St. John River District Hospital, East China Twp.

“I incorporate the art and science of nursing into my nursing practice by focusing solely on the patient at hand, leaving all other responsibilities at the door and giving the patient my undivided attention.”
— Megan Ross, ED; PPPH, Southfield
Our **mission**

St. John Providence, as a Catholic health ministry, is committed to providing spiritually centered holistic care, which sustains and improves the health of individuals in the communities we serve, with special attention to the poor and vulnerable.

Our **vision**

Our passion for healing calls us to cultivate trust, advocate wellness and transform healthcare.

Our **values**

*Service of the poor:*
Generosity of spirit, especially of persons most in need

*Reverence:*
Respect and compassion for the dignity and diversity of life

*Integrity:*
Inspiring trust through personal leadership

*Wisdom:*
Integrating excellence and stewardship

*Creativity:*
Courageous innovation

*Dedication:*
Affirming the hope and joy of our ministry

Our **nursing philosophy**

Rooted in the mission of St. John Providence, we, as compassionate nurses, believe in:

- The importance of self care.
- Committing to uplifting, supporting and caring for one another.
- Collaborating as equal members of the care team to advocate for our patients and society.
- Respecting each other’s knowledge base, experience, and our contributions to the healing environment.
- The commitment to promoting professionalism through leadership, education, coaching, mentoring and authentic communication.
- Creating a culture of safety for patients, families, our team and ourselves through empowerment and accountability.
- Incorporating intuition and anticipation in co-creating an individualized plan of care with the patient and the family.
- A professional, unconditional, therapeutic presence recognizing and cherishing the uniqueness and value of each patient, family member and each other.
- Creating a healing environment integrating the art and science of nursing.
- Setting the standard as a leader in the community by participating in advancement of the profession through contributions to practice, education, research and evidence-based care.

Our **nursing vision**

We are a community of nurses devoted to creating a healing environment through therapeutic presence and relationship-based care.
Looking back at FY 2015

If there were a single word to describe our nursing associates and leaders over the past fiscal year, it would be ‘resilience.’ From new human resource and financial management software programs to thoughtful and emergent response to the Ebola scare, to patient care units opening (and closing) and to record census levels, we were called on to stay grounded in our purpose to provide excellent patient care and to remain flexible as we went about our work.

Here and in the following pages, the 2015 fiscal year annual report highlights a selection of the accomplishments of which our nursing community is most proud:

- Numerous successful surveys by regulatory agencies, such as The Joint Commission and The Center for Medicare Services.
- Effective deployment of new equipment, such as concluding the new heart/breathing monitoring transition; new intravenous, epidural and patient-controlled analgesia pumps.
- Establishing Nursing Research and Quality Councils to complete our health system’s Shared Governance structure.
- A site visit by our nurse theorist, Dr. Jean Watson, to St. John Hospital & Medical Center.
- Nurse Recruitment open houses hosted at each hospital site.
- Transition to a holistic nursing education program internal to SJP.
- Creating a single source of information about our nursing workforce by launching a database to begin collating demographic and professional development data from the more than 5,000 nurses who make up SJP.

Together we overcame challenges and demonstrated our resilience in order to live our mission to provide spiritually centered holistic care.

Please join us in celebration of our amazing community of nurses. We are deeply grateful for their caring practices, for their energy and enthusiasm and for their resilience.
To my fellow nurses,

Every day I take pride in the letters “RN” that I am privileged to place after my name. How well I remember the years devoted to acquiring the knowledge that is the basic requirement of our profession — filling my head with the details of anatomy, physiology, and pharmacology; training my hands in the proper way to draw blood, to start an IV, or to safely move a patient. Learning the science of nursing.

Over the years, I have learned as well that the journey to becoming a nurse never ends, and that some things that make us better nurses cannot be found in a book or taught in a lecture hall.

The art of nursing has its place in the heart. It finds its way from nurse to nurse in daily huddles; at the bedside; and in conversation among competent, caring, compassionate nurses.

This report makes me proud of the innovation and the courage shown by the nurses of St. John Providence. The stories demonstrate that we have developed many wonderful ways to make sure that our nurses continue their education on every level — keeping current not only our heads and our hands, but our hearts as well.

Congratulations on all you do to give our patients the best care that the art and the science of nursing can provide.

Warmest regards,

Jean Meyer, RN
President and Chief Executive Officer
St. John Providence
Collegiality and partnership at work during a crisis.

In the midst of the Ebola epidemic, the potential for an Ebola patient’s presenting to a St. John Providence (SJP) Emergency Room became a possibility. The SJP ED Advisory Committee and ED nursing teams, along with multiple clinical and support department associates, mobilized to insure that patients and associates would be cared for in the safest manner and in accordance with CDC standards.

In a very short time, protocols were developed for patient screening and treatment. Standardized personal protective equipment and additional supplies were procured to create specialized Ebola carts for all sites. Education for nurses, physicians, and support staff, which included live simulation drills — from patient arriving, to triage, through treatment — occurred in all SJP ERs.

In addition, an Ebola preparedness “super user” team was formed at the system level. This super user team received advanced training and agreed to be deployed to any system ED as needed. Teamwork was at its highest level as the EDs worked to insure that each site was ready to handle the immediate crisis and that care was standardized across all SJP sites.

System Preceptor Activities

New and experienced Preceptors were able to participate in the revised and energized 2015 System Preceptor Workshop, which offers the opportunity to collaborate between sites. Preceptors at St. John Hospital & Medical Center hosted the 3rd Annual Preceptor Showcase and participated in the 4th Annual Holistic Nursing Conference with a poster presentation and a contribution to the quilt display.

At Providence-Providence Park Hospital (PPPH), Southfield, Preceptors crafted blankets for donation to the Palliative Care Department, which has become an annual team activity. PPPH, Novi Preceptors took their
“PEP Rallies” pamper participants to enhance education
The Lead Preceptor Group at Providence–Providence Park Hospital, Novi has organized the “PEP Rally” — in the first 45 minutes of the monthly meeting, the group would do an inservice lasting ten minutes for all units. The group brings in sweets and lotions to share. Participants may start the inservice rushed and impatient; but once their colleagues perform a mini hand massage followed by chocolate, the tone of the inservice changes. These PEP Rallies inform and update, but they also build relationships among staff and peers.

Educational PEP Rally to the units — which involves flyers, handouts, posters and other pertinent material — and divided into groups. The Preceptors fan out across the units to give brief inservices. Of course they offer hand massages and candy to capture everyone’s attention!

This is the third year the St. John Macomb–Oakland Preceptors have taken an active role in Annual Competency Validation to assist associates complete their requirements.

An Advanced Preceptor Workshop is in the works to expand opportunities for collegial sharing. A number of preceptors are participating in the Ascension Health Orientation Competency pilot project.

SJP nurses share understanding of holistic nursing
SJP continues to deepen the work of holistic nursing through education and staff development designed to engage more nurses. Cohorts Four (West Region) and Eleven (East Region) were graduated from the Integrative Healing Arts Academy, which prepares nurses to take the national certification exam in holistic nursing. This year, nurses from St. John River District Hospital were participants in Cohort Eleven.

SJP also “graduated” this year — to its own one-day nursing retreat program of remembrance and renewal for holistic nursing practice. After more than nine years of contracting for programming, our own nurse leaders and educators developed and implemented a retreat-style program that included study of holistic nursing theory, self-care practices, and the healing power of laughter. Finding Your Center through the Sacred Practice of Human Caring was introduced in spring of 2015, and the reviews have been stunning! This one-day retreat is available to all nurses of SJP. It is uplifting, educational and renewing as a stand-alone program. It also serves as the introductory program for those nurses who choose to enter into deeper study of the science and art of holistic nursing.

Education prepares nurses for leadership positions
SJP held its second series of classes for nurses identified as having high potential for advancement into nursing leadership positions. Seventeen associates completed the nine-month course, which is designed to expand the leadership ability of nurses through a variety of learning opportunities, including mentorship to enhance skills and professional development.

Nurses who completed the course are: Austin Ashton, Fran Burley, Tammy Cass, Kristy Davidson, Tim Deuby, Lori Emrich, Christopher Erfourth, Deborah Gough, Gene Herbert, Deb Kurth, Grace Quiogue, Angela Rawling, Shelly Ressler, Michelle Ricard, Rachel Watkins, Kristin Trybus Wenner, and Takiah Williams. The course is coordinated by Sue Mooney-Smith and Marilyn Cito, with support from Lindsay Thayer from Human Resources.
Evolving over the course of two years, the Nursing Shared Governance Structure for St. John Providence was completed in March 2015. The Councils represent all hospitals, nursing specialties, and nursing positions throughout SJP.

- **Steering Council**
- **Professional Nurse Practice Council**
- **Nursing Professional Development Council**
- **Nursing Quality Council**
- **Nursing Research and Evidence-Based Practice Council**
- **Nursing Leadership Council**
THE STEERING COUNCIL
provides a mechanism for communication, integration and coordination among all Councils. This group deals with global nursing issues that involve multiple councils, and it serves as a referral body and clearinghouse for input and projects from other Councils.

Paul Baareman
Andrea Bowers
Victoria Boyce
Rochelle Conley-Owens
Donna Emch
Kimberly Foster

THE NURSING LEADERSHIP COUNCIL
provides oversight for the strategic plan and direction for nursing across SJP. The Council has a tiered configuration: Chief Nursing Officers and Nursing Director Site Leads meet monthly, and they are joined quarterly by all Nursing Directors and other resource persons. Twice a year, all Clinical Nurse Managers join this group.

Maryann Barnes
Andrea Bowers
Christine Fornal
Joyce Kasperski

THE PROFESSIONAL NURSE PRACTICE COUNCIL
is led by staff nurses. This group is accountable for the approval, recommendation, and maintenance of the standards of clinical nursing practice. They oversee the system nursing policy and procedure process, and promote and maintain open communication by learning best practices from various sites.

Erika Baker
Maryann Barnes
Michelle Brake
Lynn Chiesa
James Cronk
Marc Danielak
Lori Emrich
Debra Kurth
Alison Leitch

THE NURSING PROFESSIONAL DEVELOPMENT COUNCIL
is a collaborative effort involving nurse educators, direct care nurses, and management representatives. This group defines, implements, evaluates, and maintains educational standards — promoting professional growth, ongoing clinical competency, and the retention of nurses.

Justin Behnke
Marilyn Brennan
Marilyn Cito
Hilary Coffman
Kim Gallus
Maureen Kelly-Nichols
Colleen Lada
Nancy Miller

THE NURSING QUALITY COUNCIL
reviews quality data from various sources, identifies and shares best practices, and addresses opportunities for improvement. In collaboration with other Councils, this group works to streamline data reporting, to reduce redundancy, and to disseminate data broadly. The NQC serves as a mechanism for communicating lessons learned from quality activities and peer reviews conducted at each site.

Vicki Boyce
Wendy Cole
Carol Demarti
Eric Enerson
Christine Fornal
Kelly Graichen

THE NURSING RESEARCH AND EVIDENCE-BASED PRACTICE COUNCIL
is charged with mentoring nurses to understand, evaluate, and conduct nursing research. This group also works with other Councils to implement evidence-based practice. The Research Council maintains a record of all nursing research projects ongoing throughout St. John Providence, as it works to increase the visibility of nursing research within the organization, regionally, and nationally.

Vicki Boyce
Janetlynne Erickson
Lynne Froehlich
Carol Fuller
Teresa Harrell
Julie Ishak

Denise McLean
Sandra Parry
Todd Roark
Kimberly Ronnisch
Tammie Steinard

Gayle Novack
Barbara Shoup

Susan Loffreda
Yolanda Robinson
Surita Sieben
Jennifer Smith
Laura Steele
Amy Stergar
Peggy Vandenhemel
Marcie Walker

Audrey Overpeck
Sheryl Quinn
Dona Radcliff
Roseanne Sassin
Jennifer Smith
Peggy Vandenhemel
Yolanda Washington
Kathy Williams

Deborah Horvath
Rosemary Lowry
Kelly Matthews
Denise McLean
Oscar Pilapil
Holly Schmidt

Joan Kajor
Roseanne Mark
Renee Pelton
Deborah Sidor
Surita Sieben
Christine Tomaszewski
“I have always used my own mother as my practice barometer: If it’s not good enough for mama — it is not good enough for any patient.”  
— Lisa Riegel, OR; PPPH, Novi

PNPC supports the Make-A-Wish® Foundation

The Professional Nurse Practice Council (PNPC) at St. John Macomb-Oakland Hospital (SJMOH) displayed the St. John Providence values once again during Nurses’ Week 2015. The PNPC organized a hospital-wide activity to support the Make-A-Wish Foundation for the second year. There has been progressive growth not only in numbers of baskets but also in creativity.

This year the PNPC was able to incorporate baskets from many different departments outside of nursing, and the creativity rose exponentially. Thirty-six baskets were donated, and more than 28 units and departments were represented. The baskets were manned by volunteers from the PNPC. The raffle was held in our Webber Cancer Center, and many patients and their families joined in the fun.

There was noticeable excitement from the PNPC in their service. The teamwork and the camaraderie displayed were awesome! The response and generosity from the entire hospital and even from the community allowed the PNPC to sponsor two wishes for two local children, collecting more than $10,000.00. Generosity of spirit was at an all-time high. Special recognition was given to the PNPC by the Make-A-Wish Foundation. Their success has inspired PNPCs at other sites to sponsor raffles in support of Make-A-Wish.

Providence—Providence Park, Novi nurses donate to two local charities

During Nurses’ Week this past year, nursing units at Providence—Providence Park Hospital (PPPH), Novi assembled nine themed baskets that were submitted for a charity raffle. Their Unit Practice Council chose to donate the winnings to the Novi Fire Department in support of their initiatives: File of Life, and Smoke Detectors for Families in Need. HAVEN was also chosen because of the tragic loss of a PPPH staff member due to domestic violence. At the Professional Nurse Practice Council meeting, the Emergency Department council presented checks to both the Novi Fire Chief and to a representative from HAVEN.
Gratitude Board shows appreciation for associate assistance.

During Nurses’ Week at St. John Hospital & Medical Center, the PNPC invited nursing units to develop Gratitude Boards as a way of expressing appreciation to coworkers. Associates were asked to write things they were thankful for that another associate had done.

On the previous page (top), is a picture of 2-Ell Nurses with their Gratitude Board, which hung behind their nurses’ station every day of Nurses’ Week. It was a great reminder of the unit teamwork we all appreciate, and it was a welcome sight to patients, families, and doctors who came to the desk.

Holistic Caring Council boxes up self-care tips during Nurses’ Week

This year the Holistic Caring Council (HCC) had an opportunity to become involved in Nurses’ Week. It provided each unit at Providence-Providence Park Hospital with a self-care box, containing tips to promote self-care. The boxes reminded staff to take a couple of minutes each day to care for themselves, so that they can be healthier caregivers. Working together with nursing education, the HCC co-chairs were also able to provide a Lunch-and-Learn on Holistic Health Care at both campuses, with CEU credits available.

The Council is making progress with the support of nursing leadership who have completed the Integrative Healing Arts Academy. Its future goal is to continue to work as an interdisciplinary team to provide holistic health care throughout St. John Providence. And it continues to be guided by its mission statement: We are a community of professionals, working as a team for holistic care of ourselves as a healing presence of mind, body, and spirit.

PNDC takes initiative in recognizing nursing jobs well done.

The Professional Nursing Development Council (PNDC) focused on the Rewards and Recognition initiative and identified multiple ways to communicate meaningful appreciation for a job “well done,” in order to convey to associates that they are valued. The Council created a Rewards and Recognition folder, known as the “Touch My Heart” toolkit, and made it available online to provide a resource for leaders to engage in associate recognition.

The Council believes that if we take the time to thank and to recognize our nurses, they will be more satisfied and fulfilled, which will create a positive environment more conducive to teamwork.

Jean Watson’s Human Caring Science is highlight of ICC gathering at SJH&MC

St. John Hospital & Medical Center (SJH&MC) hosted the International Caritas Consortium (ICC) and had the privilege of having Jean Watson, our nurse theorist, visit the campus for the day. Dr. Watson met with groups of direct care nurses and nurse leaders to have dialogue about her Human Caring Science theory and how it relates to their work as nurses and leaders. She saw examples of Caring Science in action through a variety of posters, stories, and a quilt display that were contributed by nurses from SJH&MC.

The ICC was held at the Dearborn Inn and co-hosted by The Watson Caring Sciences Institute (WCSI) and SJH&MC. This three-day international conference was the result of collaboration between WCSI and a dedicated conference planning committee from SJH&MC, who tended to the details of planning such a complex event.

CNO Maryann Barnes and Nursing Site Lead Gayle Novack opened the conference with a presentation that showcased the SJH&MC journey of holistic nursing. Posters and the quilt display were made available throughout the conference for attendees to review.
Review by Nursing Quality Council identifies best practice for applying moist heat

The Nursing Quality Council (NQC) at Providence-Providence Park Hospital continues to do monthly Nursing Peer Review. The most important reasons for peer review are to maintain standards of quality and safety and to identify opportunities to improve our performance. The process also allows the NQC to determine if there are trends that need to be addressed. Resolution of issues or trends identified during peer review may involve modifying a process or may require the development of educational objectives for learning opportunities. Peer Review is completed after the case is rated and the communication “loop is closed” by sending a letter to the RN and appropriate nurse manager.

A trend in the application of moist heat via warm compress has been problematic for nurses. NQC took a deep dive into addressing this nursing issue. Other resources were explored and benchmarked with SJP hospitals for administering therapeutic moist heat. It was discovered that chemical hot/cold packs were utilized in the East Region. When this availability was communicated to the NQC, the products were fully endorsed! West region then arranged for the same hot/cold packs to be placed on unit supply carts. An education plan was coordinated for nursing staff. The peer review cycle was completed and the “loop closed.”

The Nursing Quality Council peer review process was the platform for improving the quality of our nursing care by identification of a trend, with follow-up and action planning that resulted in a safer and more effective technique for providing therapeutic heat to our patients.

Partnership and teamwork make unit relocation go smoothly

When Providence-Providence Park Hospital, Novi Campus opened a new orthopedic unit, the staff left their former space on 4A and moved to 5C. During the transition, the 4B med/surg team who were expanding into the space expertly cared for 18 orthopedic patients who had been admitted in the days before 5C officially opened. The teamwork and dedication to excellence shown by the med/surg staff allowed their orthopedic counterparts to focus on opening their new unit.

Staffing up: At the same time, the management and staff of 4B worked together to onboard new associates for their own expanding unit. They developed, researched, and organized a 3-hour class for the incoming nurses and patient-care technicians. The team identified many unit-specific competencies that needed to be covered for all the new associates. Some competencies were high risk and uncommon, and some were very specific to the unit’s patient population. The transition team decided to teach everyone as a large group to ensure quality outcomes and patient safety.

Staff volunteered to teach the class and to help. The aid of Nursing Education was enlisted, and the team was given a lot of help in paring and organizing the information for the class, and in presenting the final content. Twelve new RNs attended the class — named “Education and Edibles,” because there was food provided. The group liked it so much that the team decided to develop a class once a year for the existing staff.

Throughout the moves of these two units, there was no disruption in care; and flow in the hospital remained optimal, even during days of high census.

“Nursing is more than a practice, art, or science; it’s love for life in all its forms and a determination to help those without cause or question, using one part science and one part you”
— Marc Danielak; SJMOH, Warren
Letters From Our Patients:

MIRACLE ONE and MIRACLE TWO

“My daughter Erica entered St. John Hospital to be induced with her first child. In the morning, Erica was complaining of not feeling well, and her symptoms rapidly changed from bad to worse within minutes. Her nurse Anne Healy’s professional training and quick judgment recognized that Erica’s and baby’s heart rates dropped fast. Erica lost all color in her face and wasn’t responding. Anne immediately called for an emergent status.

“Erica was rushed into the ER for an emergency C-section and within minutes she had a baby girl. Then the C-section became a major operation as surgeons rapidly looked for the source of massive internal bleeding. They found the splenic artery aneurysm and removed her spleen. Erica lost a large amount of blood, and was given MANY pints of additional blood! Nurse Anne stayed with Erica for the four-hour operation. She was Erica’s guarding angel.”
Caregivers help renovated NICU contribute to healing

According to our first Holistic Nursing theorist, Florence Nightingale, a patient’s comfortable environment is essential to healing and wholeness. Florence considered cleanliness, natural light, color and artwork as vital healing components of a patient’s environment. All of these aspects were incorporated in the renovation and new construction of the 35-bed, private-room Neonatal Intensive Care Unit (NICU) and 8-bed Special Care Nursery (SCN) at St. John Hospital & Medical Center.

This construction was a labor of love for the entire team involved, which consisted of all of the caregivers, a team of architects, St. John Providence’s Planning, Design & Construction team and the construction crews. Throughout all of the trials and tribulations that accompany construction in a hospital, the NICU & SCN staff cared for our tiniest patients — providing safe, holistic care. The NICU was given an award at the conclusion of the construction to recognize the accomplishment of 633 days without a Central Line Associated Blood Stream Infection.

A main focus of the new unit was to provide a comfortable space where family-centered care was encouraged. The color palette is a soft, inviting array of blue, green, orange and yellow. The photographic natural artwork was chosen to complement these colors; and the art gives the space a calming, bright, vibrant atmosphere. A special group of pictures, printed with coordinating, family-centered quotes, travels among patient rooms. Each private patient room has a window that provides plenty of natural daylight. All of these design elements were chosen with purposeful intention, and they come together beautifully in the new NICU & SCN.

The most fulfilling aspect of the renovated NICU & SCN is welcoming the families who come to visit and care for their babies. There is a family waiting room with a kitchenette and a sitting area; each patient room has overnight accommodations to encourage parents to stay with their baby, if they choose. The privacy afforded by the individual rooms allows families to spend quality, lasting time with their infants.

“Nursing is a science. Being able to practice such a science without prejudice is an art. I take my knowledge and experience and deliver it with care and empathy.”
— Jennifer Destross, RN, ED; SJH&MC
For many years to come, families and patients will benefit from the healing, family-centered environment that was created.

**Baby-Friendly Designation**

In 2014-15 the Birthing Center at St. John Hospital & Medical Center (SJH&MC) and Family Birthplace at St. John Macomb–Oakland Hospital (SJMOH), Warren earned the Baby-Friendly designation from Baby-Friendly USA, Inc. — the accrediting body for the Baby-Friendly Hospital Initiative (BFHI) in the United States. The designation recognizes hospitals and birthing centers that offer an optimal level of care for infant feeding and mother/baby bonding. BFHI is a global program launched in 1991 by the World Health Organization and the United Nations Children’s Fund.

St. John Hospital & Medical Center was the first Baby-Friendly hospital in Detroit, and the second in Michigan. SJH&MC was also the second Ascension facility to earn this designation. SJMOH, Warren was the first Baby-Friendly facility in Macomb County, and ninth in Michigan. In the United States, only 13.14% of births occur in Baby-Friendly facilities.

The process of meeting the standards for Baby-Friendly designation began at SJH&MC in 2011, with the formation of a multi-disciplinary task force to develop a plan for change and refinement of nursing practice. Practices included: closing the well-baby nursery to promote the practice of rooming-in, encouraging skin-to-skin contact between mother and baby after every delivery, the elimination of routine use of pacifiers, and delaying the infant bath. Nursing staff all willingly performed 20 hours of education on these best practices, including five hours of skills training with the Lactation Consultants on staff. Multiple Plan Do Study Act (PDSA) cycles were used to ensure that practices were implemented in a meaningful and impactful way.

Both hospitals saw significant increases in breastfeeding outcome measures, and they are now supporting other sites, including both campuses of Providence-Providence Park Hospital and other Ascension locations.

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Code Sepsis

The Emergency Department at St. John Hospital & Medical Center implemented a process improvement team to better care for patients who come to the ED with signs and symptoms of sepsis. Prompt identification of potentially septic patients and treatment according to evidence-based practice and risk-stratification guidelines improves outcomes.

The ED used a multidisciplinary approach and well-defined guidelines, with algorithms to develop a process and an order set for the initial evaluation and treatment of the patient with sepsis. Patients who potentially have sepsis are recognized in triage by the nurse, who uses Systemic Inflammatory Response Syndrome (SIRS) criteria. A Code Sepsis is paged via telephone, the patient is placed in the resuscitation module, and an evidence-based order set is initiated. Concurrently the RN is establishing an intravenous line and obtaining lab specimens. After the results of the lactate and blood pressure are obtained, the pre-built order set of intravenous fluids and antibiotics is initiated.

A multidisciplinary team approach, which included staff commitment and engagement, was successful in improving outcomes for patients with sepsis. Continuous process improvement and data collection will contribute to the development and determination of best practices to share with other facilities.

Nursing associate input is key to success

For the new 5C and 5D inpatient units at Providence-Providence Park Hospital, Novi, input from the nursing associates who would be working in the space was a prime consideration for the architectural design and construction team. Patient safety and satisfaction — including quiet, quicker response times — were key criteria in the layout and choice of equipment for the sites. Attention was also paid to associate safety and preventing fatigue by planning the location of supplies and equipment.

The patient-care team created a wish list early in the planning process, intending for the units to be best suited for a predominantly orthopedic and elderly patient population. To make patient stays safer and more comfortable, the list included taller toilets; larger, barrier-free showers with well positioned assist bars and benches; and quieter beds.

The architectural team visited the existing nursing unit to better understand the ergonomics of transferring patients and the disadvantages of having to plug electrical equipment into outlets located under tables. The support departments planned with the staff to put supplies and equipment where it was readily and easily accessible. As a result, the new units feature electrical outlets at waist level and centrally located freezers for ice treatment.

Nurses and PCTs selected almost all the equipment in the rooms — testing the beds, over-bed tables, and chairs to find those that would be safest, quietest, and most comfortable for patients. Associates even reviewed portfolios of artwork for the walls, with an eye to what would contribute to a healing environment.

As “proof of the pudding,” 5C and 5D opened to patient reports of quiet, comfortable nights, while staff experienced less fatigue — both thanks to careful attention to design, furnishings, and supplies. Organizing input into the design of the units required a lot of time and energy, blood sweat and tears. But, given the results, it was well worth the effort.
New Council promotes nursing research
The Nursing Research and Evidence-Based Practice Council joined the SJP shared governance structure in September of 2014. The purpose of this council is to support nursing research across SJP, to disseminate research findings, to increase the visibility of nursing research, and to establish the link between evidence-based practice, research, and quality patient outcomes.
Nursing research conducted in FY 2015 includes:

**Early Discharge Teaching:** 3 Annex at Providence-Providence Park Hospital, Southfield is an oncology unit investigating the impact of early-discharge teaching to decrease anxiety and increase patient satisfaction. The study is being conducted by Jill Patterson (Principal Investigator), Alyssa Boddy, and Teresa Harrell. They have received IRB approval and will begin data collection shortly.

**Nurse Practitioner Impact on Readmission Rates:** Recent DNP graduates Julia Robinson and Nancy Welke completed a study at St. John Hospital & Medical Center that determined Nurse Practitioner involvement in Heart Failure discharge decreased 30-day hospital readmissions by 17%, increased adherence to daily weight monitoring by 36% and provided positive patient satisfaction.

**Accuracy of Weight Measurement:** Nurses on 4 East at St. John Hospital & Medical Center completed data collection for their study to determine the accuracy of weight measurements using in-bed scales or stand-up scales. Jeannine Johnson is the Principal Investigator for the study. Amanda Sanders, Chris Erfourth, Nada Kinaya, Melanie Cicala, Bethany Carriveau and Katherine Young are members of the study team. Once data analysis is complete the findings will be shared.

**The Use of Lavender Aromatherapy:** The PACU staff at St. John Macomb-Oakland Hospital, Warren Campus is studying the effects of lavender aromatherapy to reduce pain and anxiety in the PACU patient after laparoscopic surgery. Eileen Bain Ostroff is the Principal Investigator along with team members Jan Lassiter, Christa Filbeck, Sharon Mourtos and Sandra Barney. The team has completed more than half of its data collection.

**CIWA Scoring:** The study team of Donya Caster, Jennifer Jandura and Amy Wojtalik is collecting data to determine whether an education program improves assessment of alcohol withdrawal with the CIWA scale, and whether the confidence of the nurse in using the CIWA scale improves after receiving education. Once the team has concluded the study, they plan on making the education materials available for other nurses.

**Professional Presentations:**
In the past year, SJP nurses shared their hard-won knowledge with their fellow clinical professionals throughout the United States.

**From Chaos to Caritas: Using Caring Science Theory to Change Yourself and Your Department.** Justin Carpenter, American Holistic Nurses Association.

**Integrating Aromatherapy: It All Began with Florence.** Mary Natschke (co-presenter). American Holistic Nurses Association.

**Nursing Informatics: Making a Love Connection between the Right and Left Brain.** Deborah Horvath and Maryann Barnes. National Nurse Informatics Conference.

**Accreditation.** Arlene Boelstler. American Association for Clinical Chemistry.

Posters:


*St. John Hospital & Medical Center Preceptors: Building a Resilient Community.* Karen Straetmans, Donna Renaud, Kino Anuddin. 4th Annual Holistic Nursing Conference.

*Developing Resilience through Story-Telling.* Vicki Boyce. 4th Annual Holistic Nursing Conference.

*Catching the ED Patient Before They Fall.* Charles Bayly. Emergency Nurses Association National Conference.

*Let’s Collaborate: Optimizing the Care of the Trauma Patient.* Ashley Voss. Emergency Nurses Association National Conference.

*Implementing Quiet Hour to Promote a Healing Environment.* Melissa Elliott, Jen Hough, Linda Stenman, Carrie Terpay, Arti Upadhyaya, MarieAnne Welgosh, Mary Ann Yarrington. 4th Annual Holistic Nursing Conference.


Conferences:

SJP nurses take every opportunity for growth and enrichment. In FY 2015, members of the staff attended or planned educational conferences for nursing professionals.

5th Annual Neonatal Pediatric Conference.


7th Annual Education on the Road to Chicago.

17th Annual Critical Care Conference. Care of the Patient and the Nurse in ICU.


“While technical in nature, nursing is an art in practice. It has moments of beautiful tenderness when healing connections are made and can deeply affect the patient in a therapeutic manner.”

— James Martin, Endo; PPPH, Southfield
Letters From Our Patients:

SJHE&MC patient thanks 4Ell nursing staff for outstanding care:

“I was in the hospital for five days, and the care I received from the nurses was wonderful. I would like to especially recognize two people who were outstanding. First was the head nurse who works at night, and her name is Theresa Poeschel, RN. Theresa went way beyond the call of duty, because she was very professional and thorough. My intravenous was in the bend of my elbow, and the alarm would go off, so Theresa moved the I.V. to the top of my left hand. Theresa was just very good. Second, I want to commend an aide named Kristi Weider, PCT, because she was fabulous! Kristi was very attentive and was always there for me. Kristi would take me for walks, and she was always smiling. She made me feel very comfortable.”
Exemplary Professional Practice

Relationship-Based Care: a Model of Care

This story illustrates why the model of Relationship-Based Care is a hallmark of St. John Providence. It is through this model that we experience the essence of care by connecting as human beings. The planning, communication/collaboration, commitment, and reverence demonstrated has had a profound impact on many, including the patients, their family, the caregivers, and the associates who participated in this moving experience.

This story as told by a Stepdown Nurse at St. John Macomb-Oakland Hospital, Warren: I was caring for a very sick patient in the stepdown unit. The wife of this patient was also very ill, and she was admitted to the same hospital, on a cardiac unit. I was talking with the nurse who was caring for the wife, and we began developing a way we could bring the two together for a visit. We worked until we were able to get all the services needed to facilitate the visit between the critically ill husband and very ill wife. The family was at the bedside when this arranged meeting took place. We had planned to have Father Dennis at the bedside to provide them the sacrament of the sick. This loving couple had been married for over 50 years. Needless to say, bringing this couple together was a very special, sacred, and beautiful moment full of laughter, tears, and joy.

The family later sent a message to describe their appreciation for this touching reunion: “On behalf of our family we would like to thank you for taking the time for getting our parents together for the last time. Our father passed away in January, and our mother passed today. We will cherish that moment forever. Thank you so much for your thoughtfulness.”

“I am responsible for someone’s ‘most important person in their life’.”
— Danielle Gwyn, 2 West; SJH&MC
These are the moments that nurses live for. Both nurses have expressed the joy they felt in being a part of this very important time in two of our patients’ lives and in the lives of their family!

Nurses and healthcare workers are privileged to be part of our patients’ lives at many moments like these, when they are in such vulnerable states. Our leadership group saw nurses and associates who were busy on a weekend shift going above and beyond — using creativity, compassion, dedication, and collaboration to make a plan and implement it to make this reunion possible. Little did these nurses know their efforts would lead to the last time this couple would see each other.

Certifying Pain Resource Nurses

A Pain Resource Nurse (PRN) is an RN who has received additional education, coaching and mentoring to serve as a resource for their unit in better managing patients’ pain. PRNs meet periodically with their site coordinators and engage in special projects on their unit to improve pain management. Projects have included serving as super users for new PCA and epidural pumps; auditing documentation for pain assessment/re-assessment, Pasero Opioid-induced Sedation Scale documentation, and the use of white boards; developing educational posters, new job aids, and quick tips for better pain management; and increasing the use of aromatherapy and other non-pharmacologic approaches to managing pain.

PRNs are encouraged to continue their education in pain management by taking the certification preparation review course and by becoming certified in the specialty of pain management nursing. Currently, over 150 RNs across SJP serve as PRNs; and the course is being offered again in FY 16.

Joint Program Class enhances patient satisfaction

In February 2015, St. John Macomb-Oakland Hospital was notified that the Warren campus Hip & Knee unit was noted to have ranked in the top 1% of the nation for patient satisfaction when compared to similar units.

As in many programs specializing in joint replacements, our patients are provided a “joint camp” experience — to learn how activities progress from surgery through rehabilitation and recovery. But clearly this team has demonstrated outstanding collaboration and attention to each patient’s needs. Associates are listening and making connections with their patients, because they understand the importance of individualizing care.

One event that enhances the surgical experience is the Joint Program Class for patients who have scheduled or who are considering joint-replacement surgery. Days before the patient’s scheduled procedure a relationship is established between the patient and staff, in order to relieve some of the pre-surgical anxiety. Every attempt is made to assign the same nurse to care for a patient from the time they arrive on the unit until they are discharged. This continuity of care helps support patients on their journey through the transitions of care to successful recovery.

Because the class is available on YouTube, consideration is also given to patients whose families or significant others cannot attend the class in person. There has been great feedback from patients who state they have had “movie night” with their family to review and discuss what will be happening during their hospitalization.

Preparing the Next Generation of Operating-Room Nurses

St. John Providence Surgical Services system nurse educators launched the first system-wide American OR Nurses Perioperative 101 core curriculum to prepare new nurses to work in the surgical setting.

The curriculum is comprised of a comprehensive online education program, incorporating the latest evidence-based guidelines for operating-room nursing practice. Academic instruction is enhanced with 20 didactic days and six months of clinical orientation in the operating room. The collaboration across SJP has provided students with a broader spectrum of clinical knowledge, experience, teaching styles and techniques. Participant feedback has been overwhelmingly positive, with all 14 students achieving a 100% pass rate on the final exam.
Handwashing timeouts create healing environment

Seton Cardiac Unit cares for patients with cardiac diagnosis. With 46 beds the pace is fast, and the unit strives to incorporate holistic practices into caring for our patients and for our nursing staff. We started with self-care by encouraging taking our breaks and by setting our intentions at huddle starting each shift. Throughout the day we were challenged with keeping our intentions and positive attitudes when the stresses of the day start piling up.

In response, the Unit Practice Council created “hand-washing timeouts.” The UPC compiled a list of favorite quotes, with colorful pictures that were placed at each handwashing sink. Staff were educated on how to appropriately use the timeouts — purposely pausing, using intentional deep breathing, refocusing the mind to create inner peace. The quotes provided reflection material, which aided in our intentional pauses.

Seton Cardiac team members commented on how the quotes had brightened up and added beauty to their unit. This simple approach enhanced a healing environment for both patients and workers. Our “hand-washing timeout” quotes were first posted at each sink and have expanded into the restrooms. We plan on changing the quotes periodically, in order to keep reflection current and present.

TAKE A MINUTE for Self-Care

A group of Women/Children Services nurses at Providence-Providence Park Hospital tried to find a way to work self-care into the everyday environment and to sustain it for the future. Success would benefit nurses, patients, and their families. RNs would have a moment for clarity and self-care and a minute to recharge and refresh. Patients would benefit, because their RN will be refreshed and better able to provide care to patients. And if the patient is feeling better cared for, then the patient’s family will be more satisfied as well and at peace.

The TAKE A MINUTE program was the result. Staff bathrooms became spa-like, with handmade lavender and peppermint scrubs and lotions provided. Five locations were chosen at both Novi and Southfield for the trial of this project. Staff were asked to record their thoughts on the benefits. The response was overwhelmingly positive.

Signage in each room included breathing techniques to promote a moment of relaxation. All products used were designed to be reproducible and to be able to be continued beyond the life of the project. The air for breathing was free!

A poster presentation outlined the results and conclusion. Many other units and departments have approached the project team on how to set these up in their own areas. Developing and supporting self-care is foundational to holistic nursing practice and to promoting a healthy work environment.

Walking the walk

Nurses and patient-care techs in Oncology, Neuroscience, and Behavioral Health tested their creativity and passion for holistic medicine with an experiment in self-care using aromatherapy. A team of clinical associates at Providence-Providence Park Hospital, Southfield researched the professional...
literature for an aromatherapy that would help relieve the stressors that come with every nursing shift.

The team undertook an improvement process to measure the results of diffusing the sweet orange essential oil during morning safety huddle — a time when day and night shifts come together for 10 minutes. After two weeks of this routine, they conducted a survey of the participants to evaluate the effect of the aromatherapy. The data they collected showed that diffusing sweet orange had a positive impact on the staff. Associates reported a decrease in stress and fatigue, and increases in energy and in the ability to handle stressors at work.

The effort to provide aromatherapy — set up and maintenance of the diffusing equipment, funding the hardware and the essential oils, and overcoming some staff resistance — became worthwhile when an associate would report: “I really love the energy in here,” or “I wish I could enjoy this all throughout my shift.”

Research was shared that identified the benefits and outcomes for unrestricted visitation and our newly adopted definition of “family.” Sharing of knowledge was done, and open conversations were had with the hospital president. Support was obtained from nursing leaders within critical care.

Patients, their families, and other partners in care are respected as essential members of the healthcare team, helping to ensure quality and safety. Family members — as identified by the patient — provide support, comfort, and important information during a patient’s stay in the ICU.

The team was supported to design a set of guidelines that is clear, easy to read, and accompanied by a contract between the nurse and patient/family that is signed at the time of admission to improve consistency and clear understanding. The guidelines were approved, and education was done. The team ensured standardization of visitation practices among all ICUs.

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**Visitor guidelines**

The Unit Practice Council at Providence-Providence Park Hospital, Southfield recognized that there were discrepancies and dissatisfaction from patients and staff from inconsistencies in practice related to the existing visitor policies within the ICUs. It was our goal to create policy that would be patient-centered, supported by administration and staff, consistent with evidence-based practice, and that would improve satisfaction of the staff.

The current evidence supports a view that the unrestricted presence of a family member or support person can decrease anxiety, confusion, agitation, and overall length of stay. Having a Partner in Care (PIC) at the bedside also makes the patient feel more secure, promotes better communication and understanding of the patient, and increases both safety and patient/family/staff satisfaction.
Quiet at Night

The 5 East and 5 West Unit Practice Council at Providence-Providence Park Hospital, Southfield revisited our “Quiet at Night” process. Sleep is an essential element of health, and ultimately it is the responsibility of the nursing staff. Our process had been a shared commitment between the nurses and patient-care techs. A key part of the process was developing a “Quiet at Night” kit that was placed on every nurse’s computer and could be conveniently taken into each patient’s room. New kits included sleep masks, ear plugs, and aromatherapy, along with basic care supplies to facilitate bedtime routines, such as toothpaste, toothbrush, denture cleaner and mouthwash. Taped to the outside of each kit are tips for ensuring a quiet night, such as closing the doors, turning down the lights, and turning off the televisions to facilitate uninterrupted sleep. Nurses bundled use of the kit and the noise-reduction tips with the nursing function of passing medications at 10 p.m.

Auditing revealed improved consistency with the “Quiet at Night” protocol. Nurses on the unit have responded extremely positively and have experienced a positive gratification with their patient interaction when using this process.

Giving Jane Doe her identity

A patient was admitted to 7T at St. John Macomb-Oakland Hospital, Madison Heights as a Jane Doe. The local police had brought her in after reports from the community that there was a lady living on the street. Jane Doe was unable to state who she was, her hair was matted to her head, and she was disheveled in tattered clothing. The nursing staff got together and bought her clothes, cut her hair and took it upon themselves to find out who she was. They were not satisfied to leave her as a Jane Doe. The staff began calling police departments inquiring about missing person reports; had her fingerprinted to run through databases; and called local shelters and the community health services of Macomb, Oakland, and Wayne counties to see if they could identify her.

During a 1:1 with staff, she mentioned a doctor’s name. The staff began investigating and found a nurse who had worked for the doctor at one time. She came to the hospital to see if she recognized Jane Doe. The nurse thought she looked familiar, but couldn’t be sure. With the consent of the patient, the nurse used FaceTime to contact the physician, and he recognized her immediately. He reported that she had been missing since January 2015, and she had a brother who was worried about her. It had been last reported to him that she had been discharged from another psychiatric hospital to a homeless shelter and was not heard from again. After 61 days on 7T, she was discharged into the community with her real name and her family by her side.

Process improvement for skin assessment and documentation

At St. John Macomb-Oakland Hospital, opportunities for improvement were identified for documenting skin assessments and for individualizing plans of care related to skin integrity. A team of educators, e-care transformation specialists, wound care nurses and leaders developed a comprehensive education plan, which included multiple methodologies, such as huddles, modules, classroom sessions, and weekly coaching rounds with audits.

A number of recommendations from nurses were submitted to the e-care team to improve documentation. Among the suggestions were modifications to forms and functionality, the creation of new tasks, and the implementation of Wednesday Wound Measurement. As a result of extraordinary teamwork and effort, we were able to improve skin assessment and documentation practices, which will spread across SJP.

“Along with using medical pharmaceutical techniques, nurses have the ability to connect with patients on a deeper level and be their support person during a stressful and vulnerable time. While with patients I am fully present and allow them to trust me with their needs and know they are my priority.”
— Laura Driscoll, 4 West; SJH&MC
Review of data reduces the use of restraints

During the review of NDNQI data, St. John Macomb-Oakland Hospital nursing leaders identified opportunities to reduce the use of restraints. Concerted efforts were initiated, focusing on the ultimate goal of assuring patients’ rights while maintaining safety.

Cases were reviewed with managers and bedside nurses to determine what alternatives had been attempted and what other options should be considered. An increase in the number of behavioral health patients on the inpatient medical-surgical units resulted in greater partnerships with the staff of behavioral health units to assist in defining specific strategies based on a patient’s unique needs. Psychiatrists were asked to round on patients early in the day, so that treatment plans could be modified promptly. Decreasing the use of restraints was also added to the agenda of the daily Hospital Safety Huddle, further identifying the importance of focusing on the effort. Managers presented reasons for the restraints, how long the patient had been in restraints, what actions were being initiated to remove the restraints, and the anticipated time of removal.

These efforts have shown favorable results, and there is strong commitment to further decreasing restraint use. Episodes of restraint use per 1,000 patient-days and the percentage of patients restrained each decreased by more than 30% over a six-month period at both the Warren and Madison Heights campuses.

Infant Fall Bundle

Falls are a nursing-sensitive indicator that nurses across the country work to prevent! In the Obstetrics population, it is hard to hear about and even harder for moms to talk about, especially when they involve infant falls or really ‘infant drops.’ Nurses at Providence-Providence Park Hospital, Novi developed an innovative way to address this national issue. Although a safety ‘contract’ was in use, it talked only briefly about the subject of infant falls/drops. Many of these obstetric nurses had come from the Med/Surg environment, so they drew from what they had learned there and from research done with adults. They developed a ‘bundle’ approach and mirrored the work in place with the adult population.

The bundle centers around a ‘fall bracelet’ that says FOCUS ON BABY, which is provided to mothers, fathers and any family member who wants to hold a baby. Education is given to anyone prior to getting one of these special bracelets. For more detailed education, the nurses borrowed from the adult world and developed a PREVENT BABY FALLS education sheet. Nurses go over with mothers and their significant others the important issues around preventing infant falls/drops and taking steps to prevent them. A wall sign also was developed and placed in each room to be used for education and as a reminder about infant fall/drop prevention — similar to those used in adult rooms, but designed specifically to prevent infant falls/drops.

The Infant Fall Bundle was implemented at the Novi hospital, and two months later at Providence-Providence Park Hospital, Southfield Campus. This bundle resulted in 12 months of zero falls at both sites! Not only was the education received positively by staff and families, but the HCAHPS scores have shown an increase in families’ perception of the overall level of safety.

During the development of the program, work with the Emergency Department (ED) identified the potential this extended education would have on preventing head injuries in the 0-to-6-month population — a common cause of serious injury seen by the emergency room staff. As a result nurses partnered with the ED as a part of SAFE KIDS in beginning this program.

Following its initial success, the Infant Fall Bundle was shared throughout the St. John Providence and at a webinar for Ascension Obstetrics Patient Satisfaction, as part of our Overall Level of Safety Score Improvements. Benchmarking best practices with outstanding outcome metrics creates a safe environment for our patients!
Behavioral Health Services

St. John Providence provides the majority of inpatient behavioral health beds in Southeastern Michigan for the adult patient population we serve. This includes nursing units at St. John Hospital & Medical Center, St. John Macomb-Oakland Hospital, and Providence-Providence Park Hospital, Southfield.

- The consultative behavioral health services on the medical floors at St. John Macomb-Oakland Hospital, Warren has consistently increased this past year, seeing an average of 10 new cases per day, with 40 to 50 patients receiving behavioral health services on any given day on the medical floors.
- At Providence-Providence Park Hospital, Southfield, 4 East provides services for chronically mentally ill residents in Wayne and Oakland counties. This represents a higher than usual involuntary population, which can indicate a higher level of acuity of patients on the Unit.
- Providence-Providence Park Hospital, Southfield has licensure from the State of Michigan to provide substance-abuse treatment for patients with co-occurring diagnoses.
- Both Providence-Providence Park Hospital, Southfield and St. John Macomb-Oakland Hospital, Warren provide a Partial Hospitalization Program (PHP) — an outpatient setting for patients who are appropriate for the lesser intensity of service. The PHP in Warren also provides services for patients who have had a traumatic brain injury (TBI).
- Across the System, we monitor Behavioral Health core measures related to services provided, called Hospital Based In-Patient Services (HBIPS). It is the behavioral health version of HCAHPS. The following areas represent clinical quality improvement in FY 2015:

  - Programmatic improvements in Behavioral Health
    Based on patient feedback obtained from Patient Satisfaction Surveys and input from staff members in multiple disciplines, the following programmatic improvements were implemented during FY 2015:
      • Continued and enhanced the Pet Therapy Program — a definite patient satisfier.
      • Expanded the yoga therapy program.
      • Recruited a certified Music Therapist to provide additional activity therapy services.
      • Awarded a grant from the Flinn Foundation to enhance patient programming. This enabled the implementing of a broad-based cognitive-behavioral treatment, including psychosocial skills training, developed for specific patient populations.
      • Implemented a process improvement team to analyze opportunities to reduce patient falls, resulting in an incremental decrease in the fall rate, YTD.
      • Implemented a process improvement team to focus on patient satisfaction/patient experience.

    These programmatic improvements will be embellished during FY 2016 with continued focus on daily therapeutic programming, including DBT skills training, patient and family education, patient safety and clinical quality.

  - ICUs collaborate to reduce Catheter Associated Urinary Tract Infections (CAUTIs)
    The ICUs at St. John Hospital & Medical Center collaborated across units and disciplines to reduce Catheter Associated Urinary Tract Infections (CAUTIs) in ICU patients, using a rapid cycle improvement process. The use of intensive training or re-training, the introduction of new job aids, an extensive communication plan, real-time audits, and coaching resulted in a decrease of 57% in CAUTIs over a 12-month period.

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<th>CAUTI Trends</th>
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<tr>
<td># expected CAUTIs</td>
<td>26.1</td>
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<tr>
<td># CAUTIs</td>
<td>48</td>
<td>21</td>
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<tr>
<td>SIR (Standardized Infection Ratio)</td>
<td>1.831</td>
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Letters From Our Patients:

First time mom

“With it being nurses’ appreciation week, we thought this would be the perfect time to let you know how thankful we were to have such great nurses to help us through our delivery! Your help and patience through everything was great! Being a first-time mom, I really appreciated all the advice and encouragement.

“Thank you for all you did for us and all you do every day! Enjoy these snacks and coffee to help you get you through your long shifts.

“P. S. A very special thank you to Dawn, Nancy, and Leslie for helping us through the most difficult parts!”

Thank you!
People’s Choice Award
Geraldine McCormick,
Providence-Providence Park Hospital, Southfield

Geraldine McCormick received the prestigious People’s Choice Award at the 2015 Nightingale Awards, sponsored by the Oakland University School of Nursing. When her name was announced, the audience erupted in cheers and a standing ovation. It was a fitting reaction to Geri’s life as a nurse.

Geri graduated from Providence School of Nursing in 1952, and returned to the hospital in 1987 to begin a new 27-year chapter in her nursing career, after a 35-year stint at another hospital. She has been responsible for all clinical areas, and today rounds as House Manager on critical care units.

In her nomination letter, Maureen Kelly-Nichols, Director of Emergency Services at Providence-Providence Park Hospital, Southfield wrote:

“This nurse is a beloved leader at Providence and has touched the lives of so many people with her ability to make a special connection with everyone she encounters. Geri is an unsung hero to so many, and it is evident to those of us who do not want her to retire, even as she approaches her 84th birthday. The nursing career she has practiced over the past 63 years is truly extraordinary, and Geri continues to live the nursing exemplar created by Florence Nightingale so many years ago.”
2015 Nightingale Nominations

Susan (Kelly) Blaesser, Providence-Providence Park Hospital, Southfield
Lynn Chiesa, Providence-Providence Park Hospital, Southfield
Marilyn Cito, St. John Macomb-Oakland Hospital, Warren
Suzanne Delius, Providence-Providence Park Hospital, Southfield
Jennifer Hough, Providence-Providence Park Hospital, Southfield
Maureen Kelly-Nichols, Providence-Providence Park Hospital, Southfield
Denise McLean, Providence-Providence Park Hospital, Southfield
Megan Middlestaedt, Providence-Providence Park Hospital, Southfield
Catherine Murphy, Providence-Providence Park Hospital, Southfield
Renee Pelton, St. John Macomb-Oakland Hospital, Madison Heights
Maribeth Rasario, St. John Macomb-Oakland Hospital, Madison Heights
Belan Yan, St. John Hospital & Medical Center

Daisy Awards

St. John Hospital & Medical Center
Michael D’Angelo, Michelle Nichols
Lisa Dent, Amy Transue
Stacey Jardine, Elizabeth Valdovinos
Melissa Mitchell, Alissa Vandelinder
Alexandra Nacelewicz, Kim Vitale

St. John Macomb-Oakland Hospital, Madison Heights
Deann Barwick, Michael Rado
Anna DeCaneva, Diana Rudnev
Annette Foreman

St. John Macomb-Oakland Hospital, Warren
Kim Czata, Donna Moran
Kim Foster, Mary Kay Vaitkevicius

St. John River District Hospital
Edna (Edie) Smith

Providence-Providence Park Hospital, Novi
Laura Gerstacker, Jeri Ritter
John Mailey, Sarah Zimmerman

Providence-Providence Park Hospital, Southfield
Luan Cela, Ashley Jacobs
Martha Cullison, Deetra Klesh
Judith Forrest, Lisa Lindeman
Lori Haase, Venetta Porter

Team Awards

Team Daisy Birthing Center

St. John Macomb-Oakland Hospital, Warren: 7 Center

Michael David Rinke Award

Laura Allard
Rebecca Bennett
Nancy Cassisa
Lori Yandura
Sean Zipay
Community Health Awards

In September 2014, Jonnie Hamilton, DNP, PNP, (left) and Lenora Foster, PNP, were honored by the Youth Connection for outstanding service to the program. Jonnie Hamilton was also inducted into the Institute of Excellence by the National Black Nurses Association in August, 2014.

Nutrena Tate, PhD, PNP, received a grant from the National Association of Pediatric Nurse Practitioners for her research on obesity.

Nutrena Tate, PhD, PNP, received a grant from the National Association of Pediatric Nurse Practitioners for her research on obesity.

Jennifer Miller-Allgeier received a scholarship to attend the Moving Towards Solutions Conference. Central High School Staff, (Jennifer Miller-Allgeier, Nikkole Payne, and Darryl Allen) received Certificates of Appreciation from the school in June 2015.

Esther Sikorski, DNP, PNP, received the PNP of the Year Award from the Michigan Chapter of the Pediatric Nurse Practitioner Association in April 2015.

Promotions

St. John Hospital & Medical Center:
Kelly Entrekin, Clinical Nurse Manager, 6 West
Christopher Erfourth, Clinical Nurse Manager, 4 West
Angela Rawlings, Clinical Nurse Manager, 6 North
Alissa Vandelinder, Clinical Nurse Manager, 2 North and NIC
Julie Zablocki, Clinical Nurse Manager, 6 East

St. John Macomb-Oakland Hospital, Madison Heights:
Alexis Kugel, Clinical Nurse Manager, 6 Tower
Katherine Madamba, Clinical Nurse Manager, 5 Tower

St. John River District Hospital:
Kelly Matthews, Manager, Nursing ACS, ICU, ED MCH

Providence-Providence Park Hospital, Novi:
Ashley Thomas, Nurse Manager, Unit 3C

Providence-Providence Park Hospital, Southfield:
Peggy Vandenhemel, Manager, Nursing Education

St. John Providence Community Health:
Jonnie Hamilton, Manager, School Based Health Centers

Retirements (years of service)

Providence-Providence Park Hospital, Southfield
Barbara Barbaza, 32 years
Robert Bates, 33 years
Donna Cannon, 13 years
Maureen Carron, 41 years
Christine Desrosiers, 14 years
Judith Forrest, 25 years
Gail Gualdoni, 36 years
Dana Heads, 38 years
Lois Koning, 45 years
Evelyn Leahy, 35 years
Christine Lyons, 16 years
Linda Makulski, 15 years
Kathleen McCloskey, 17 years
Patricia McGivern, 42 years
Janet Murphy, 40 years
Charlotte Nance, 34 years
Cheryl Semonick, 14 years
Rosalind Stenman, 36 years
Donna Zabowski, 29 years
Anna Zayachkowsky, 29 years
Providence-Providence Park Hospital, Novi
Carl Brenner, 38 years
Janice Crooks, 6 years
Kathleen Dennis-Brenner, 40 years
Gabrielle Dopico, 27 years
Ellen Edwards, 28 years
Louise Fanfalone, 6 years
Kathleen Law, 20 years
Debra Lucas, 28 years
Mylinda Maskell, 20 years
Joanne Onderko, 29 years
Barbara Slavin, 31 years

St. John Hospital & Medical Center
Jacqueline Bright, 8 years
Geraldine Fisher, 34 years
Paula Fishman, 19 years
Margaret Francis, 42 years
Linda Gerbino, 36 years
Nancy Kline, 40 years
Sharon Maceroni, 14 years
Jacqueline Miller, 20 years
Pamela Ann Millsap, 37 years
Patricia Pazgrat, 25 years
Linda Taft, 23 years
Sylvia Vella, 18 years

St. John Macomb-Oakland Hospital, Madison Heights
Margaret Thorne, 21 years
Fe Vargas, 15 years

St. John Macomb-Oakland Hospital, Warren
Mercedes Amarga-Edmonds, 41 years
Teresita Chua, 30 years
Ann Cunningham, 6 years
Mary Dean, 47 years
Michael Fitzpatrick, 12 years
Linda Honeycutt, 22 years
Linda Kosmala, 42 years
Marykutty Mathew, 39 years
Nancy Miller-Pagels, 16 years
Marcelina Sadlowski, 25 years
Sharon Serra, 31 years
Deborah Siemiet, 18 years
Sandra Szydlowski, 9 years
Shirley Wenglikowski, 37 years
Xueli Zhang, 8 years

Letters From Our Patients:

Outstanding Instructor!

“I was a participant in a three-week series workshop to learn how to manage my diabetes. Our instructor did an outstanding job; she helped me understand what I need to know to let me take control of my diabetes. You have an outstanding employee. Thank you so much.”
“Combining the art and science of nursing means taking my formal education, life and career experiences, along with the compassion I feel for my own family, and extending it to every one of my patients who come within my circle of care.”
— Judith Wrobel Thomas, RN, BA, HN-BC, SSU; PPPH, Novi

A Community of Nurses

Providing spiritually centered holistic care is common practice throughout our facilities in St. John Providence. Our nursing philosophy guides us in creating a healing environment through therapeutic presence and relationship-based care, and includes relationships between colleagues as well as with patients and families. The East Region Clinical Decision Units (CDU) joined to conquer an uncommon diagnosis in the emergency observation setting — breast cancer in a coworker. In October 2014, a “Making Strides Against Breast Cancer” team was organized by the CDU staff to honor their CDU family member and to raise funds through a 5K walk in Mt. Clemens.

Watson’s Second Caritas is “Instill faith and hope, and honor others.” This caritas spilled over from the CDU staff and throughout the hospital, via a healing circle and pillow-case cards. These special efforts provided hope, caring, and health to an individual in need, and they engaged fellow coworkers in a much higher level of responsiveness — one that comes only through true caring.

The strongest patient-nurse connection

More than two weeks after fracturing her femur and losing a lot of blood during surgery, a patient at Providence-Providence Park Hospital, Novi had received multiple transfusions. But one was really special. A nurse at the hospital, who donates blood regularly, had a Red Cross app on her phone that alerts her when her blood is being used in her area. After receiving a Red Cross alert, the nurse was asked by a fellow nurse to check on a patient who was about to be given blood. When she did, the nurse recognized the unit number and realized that the patient she’d been asked to check was receiving the nurse’s own blood. The patient was surprised as well, and wanted everyone to know what an example to the community the nurse had been for donating regularly.
Taking a healthy interest in keeping students healthy

St. John Providence Community Health has 18 school-based health centers in Detroit, Oak Park, and Clinton Township schools, located in facilities that serve students from pre-school to high school. The centers provide comprehensive physical and mental health services and medical and social programs.

Sites in our full-service model of care are staffed by a certified nurse practitioner, a licensed mental health clinician, and a registered medical assistant. Two other models are staffed by a registered nurse or a licensed mental health clinician. The nurses support a variety of programs:

- Annual Asthma Camp: we take 80 to 100 students with asthma on a weekend camping trip and provide them with a full schedule of education and activities that most have never experienced, including canoeing, horseback riding, archery, and a campfire.
- Annual KidsMile: tailored for children with weight problems, the KidsMile program includes education and exercise and culminates with participation in the Free Press 5K Walk during the annual marathon.
- Health Center nurses and nurse practitioners provide physical exams for the Youth Connection and for schools in the metro Detroit area. Many also participate in Metro Youth Day and other health fairs.

SJP teamwork results in quality outcomes. For the past seven years in our high schools, we have conducted school-wide STI education and screenings, recording a significant decrease in the number of positives at our sites. It takes the effort of all our staff to coordinate the education and screening of more than 200 students a day at five sites.

Partners give longer reach to SJP Community Outreach

In March, SJP Community Health was a sponsor of the 20th annual CARE of Southeastern Michigan Annual Parenting Conference. Community Health nurses hosted a vendor table with education materials and a display headlined “Re-Think Your Drink.” This popular and successful conference provided the attendees with lots of tools and tips to help create a physically, mentally and emotionally healthier lifestyle for their families.

SJP Community Health partnered with Neiman’s Market in St. Clair to help improve the health of the community. From March through June, SJP nurses helped facilitate Neiman’s Biggest Loser program, by motivating participants to adopt healthy habits and change their lifestyles to reduce their weight. Before-and-after BMI screening was provided, as well as education classes on healthy eating and one-on-one counseling. All participants were successful in reducing their individual weight and BMI scores! Overall, this group lost a total of 145.2 pounds and 97.25 inches, with a 23.4% reduction in BMI for 20 participants.

At the Annual Fall Support Meeting for our faith community partners, Community Health nurses shared the availability of evidenced-based workshops for people with ongoing health concerns. The workshops could be held in the faith community setting, and they include Personal Action for Health (PATH), PATH Diabetes, and A Matter of Balance.
The PATH program is for those with ongoing health conditions such as heart disease, arthritis, high blood pressure, depression, bronchitis, emphysema and other physical and mental health conditions. PATH Diabetes is specifically for those dealing with diabetes. These workshops provide tools people can use to improve self-management of health conditions: eating right, exercising more, communicating more effectively, dealing with difficult emotions, and more. A Matter of Balance helps address fears and concerns about falling; provides ways to reduce the risk of falls; and teaches exercises to improve balance, flexibility and strength.

Response to these workshops has been positive, and Community Health will continue to provide them in community settings, such as senior centers and recreation centers, as well as in faith community settings.

**SJRDH helps expectant mothers start and stay on a healthy track**

St. John River District Hospital (SJRDH) has a long-standing tradition of active participation in the St. Clair County Community Baby Shower. The free community event just celebrated its 25th year of aiding expectant mothers and their support persons by providing education and helping them gain access to vendors and agencies from our county. The yearly event allows community members to hear presentations on issues and concerns in the community. The relaxed format of the shower promotes effective education on infant care, home and fire safety, family and child nutrition, and selecting an appropriate childcare center. Participants can collect resources and speak directly with agencies and organizations that help with family and childcare needs. The event is funded by community grants and donations, and it features food for all participants and provides gifts to each expectant mother.

**SJPDCH reaches out to children and families**

St. John Providence Children’s Hospital (NICU, SCN, Pediatrics, PICU, PASU, Birthing Center, Children’s Center, and Peds Emergency Center) serves more than 40,000 infants and children each year. Our in- and outpatient facilities focus on the holistic care of the entire family — mind, body, and spirit. This year, the hospital’s nursing units chose to focus on promoting health and well-being in the communities served by SJPCH, through a variety of service projects:

- Created a number of “Special Celebrations” within the hospital, such as Tigers Opening Fun-Day, Christmas and Easter parties and gifts, and the annual Halloween Parade.
- Participated in the Christmas Store at St. John Hospital & Medical Center, collecting money, clothing, and toys to support more than 16 children and their families.
- During Safe Surgery Week, SAM (Safety Always Matters) bears were given out to more than 100 children, to ease their surgery/procedure experiences.
- Eight boxes of books and 5 bags of stuffed animals were collected during a Literacy Book Drive and Stuffed Animal Drive, both benefitting local schools and churches.
- Associates at St. John Providence Children’s Hospital participated in Arts, Beats and Eats, in the Concerts in the Park, and in several school health fair events at Marvyn Winans Academy and in the Detroit Public Schools.
- When floods hit southeastern Michigan during the summer of 2014, the Infant Mortality Project and the Open Arms Grief Program were both affected. SJPCH pulled together donations, collecting and delivering more than 23 boxes and bags of clothing, toys, books and supplies to support these two precious programs.
Letters From Our Patients:

Everyone Was Incredible!

“... It was a gall bladder attack and it was painful. My nine-day journey at Providence-Novi would start; my room was No. 336. The staff never once made me feel like a number. I was treated with respect and professional courtesy daily. I saw firsthand a group of people working with team goals ... making their patients healthier with speedy recoveries.

“From security at emergency to the daily doctors and nurses, everyone was incredible.

“I truly saw the light at Providence-Providence Park Hospital, Novi. Seeing this special team of people firsthand made me realize how fortunate Novi and the surrounding communities are to have such a thorough group of diverse people with all one goal in mind, making us all better. Thank you Providence!”
SJRDH nurse brings personal touches to Honor Guard service

St. John River District Hospital (SJRDH) created a Nursing Honor Guard to respectfully commemorate the passing of our nursing associates. Chris Basney offered to make the uniform for our honor guard and created a beautiful cape for our honor guard nurse to wear.

SJRDH lost two nurses this last year. Chris has graciously given of her time to represent our Nursing Community on these difficult occasions. Each time Chris has graciously given of her time to represent our Nursing Community on the difficult occasions when we have lost a nurse. Each time Chris has been approached, she has given thought to modifying the traditional memorial poem so that it reflects the individuality of that special Nurse being honored. Through this beautiful dedication, Chris has shared the “Light” of service both nurses brought to their roles at SJRDH. Families, associates and the Community of Nurses are appreciative and touched by this caring gesture.

PPPH, Novi teams up to support unit through loss of one of its own

The nurses of 4D at Providence-Providence Park Hospital (PPPH), Novi experienced the loss of one of their own to domestic violence. They were helped through the personal and professional tragedy by overwhelming support from throughout the hospital. Their sister floor 4C sent cards and provided staff to cover so the whole unit could attend the funeral. Nursing Administration joined them at the services, and made rounds daily to check on their emotional progress. Hospital Chaplains and the Oncology Social Worker also made daily rounds. The gestures were needed and embraced by the 4D staff, helping to bring them together and allowing them to grieve. During this time members of the unit felt cared for on many levels, and were grateful to be part of the hospital’s family.

“It is not enough to know the science behind nursing practice. You must understand how to apply science to a real, living human who needs the care of a nurse. That is the true art of nursing.”
— Amy Stergar, 6W; PPPH, Southfield
Living Our Values — Honoring Our Own
Whenever and wherever the SJP nursing staff loses a fellow nurse, their response is in keeping with the values they hold in common as clinical professionals. This past year the regard our nurses have for one another was displayed on too many occasions. But always with honor.

In Memoriam
Camille Daniels,
Providence-Providence Park Hospital
Pamela Heintz,
St. John River District Hospital
Lilian Mangulabnan,
Providence-Providence Park Hospital

FY 2015 Nursing Annual Report Committee:
Cathy Barwick
Karen Beger
Andrea Bowers
Vicki Boyce
Denise McLean
Gayle Novack
Surita Sieben
Linda Zagacki