All five hospitals of Mission Health are united in achieving Our BIG(GER) Aim. Nursing staff collaborate in system-wide specialty councils to help achieve this vision. Each chief nurse at our four member hospitals has provided a review of nursing accomplishments during 2012 in the following messages. Working toward improving health in western North Carolina, Mission Health nurses throughout the system have joined forces to standardize approaches to patient care based on current evidence, best practices and national standards.

**ANGEL MEDICAL CENTER**  
*Franklin, NC*

Angel Medical Center (AMC) nurses experienced 2012 as a time of great development. Although AMC had been under a management affiliation with Mission Health since 2011, our efforts toward full integration as a member hospital began in earnest in 2012. Some of these developments were a result of the opportunity to join system-wide specialty councils with representation by all of the members. We participated in the Medical-Surgical, Emergency Department, Intensive Care, Perinatal Care, Nursing Education, Nursing Policy and Procedure, System Quality and Chief Nursing Officer (CNO) councils. These councils became a vehicle to identify best practices, prioritize and implement patient care standards, develop common policies and create standards for orientation of nurses.

We took additional steps to enhance patient care:

- Converted to Alaris Smart Pumps to improve patient safety using the benefit of the Guardrail safety system in the administration of intravenous fluids and medications.
- Implemented a system-wide policy for the safe care of patients receiving patient-controlled analgesia.
- Added a certified lactation consultant in the Women’s Health Care Unit, where 70 percent of the staff hold national certifications.
- Certification in Chemotherapy Administration was achieved by 100 percent of the Outpatient Medicine team.
- Implemented a partnership with the pharmacy to improve medication reconciliation and patient education for patients at high risk for readmission.
- Created and implemented a model for nursing shared governance and selected inaugural team members.
- Implemented a post-discharge follow-up call system as part of our readmission reduction program.
- Received CNOR Strong designation for the Surgical Services Department. This award, from the Competency and Credentialing Institute (CCI), recognizes facilities in which at least 50 percent of eligible Operating Room nursing staff are CNOR-certified and that provide recognition and rewards to nurses who become certified or recertified.
- Established educational opportunities for nurses through a generous gift from the Mission Healthcare Foundation. Nurses participated in preparatory education for national certification and attended local or national conferences and workshops related to their specialty area. The nurses returning to their units and sharing information with their peers helped expand knowledge gained from these opportunities.
At Blue Ridge Regional Hospital (BRRH), our nursing staff have taken significant steps in the past year in responding to the dramatic changes occurring in healthcare. With the BIG(GER) Aim always in mind, our hospital’s nursing team is consistently working to get each patient to the desired outcome, first without harm, without waste and with an exceptional experience for each patient and family.

I am proud to say that the nursing staff recognize the tremendous responsibility they have in achieving these goals. They are dedicated to driving greater efficiency throughout our care delivery, while striving to provide excellent quality of care for our patients and their families.

The implementation of four shared-governance councils this past year demonstrated the exceptional work of our nursing staff and further promoted a collaborative environment for patient care. Council work prompted the implementation of multidisciplinary rounds. The rounds enhanced communication among patients, families and all the disciplines while promoting partnerships and better outcomes for their patients. In addition, end-of-shift bedside reporting encouraged patients and families to get involved in the plan of care, fostering trust and open communication.

Many of our nurses participated in several quality teams. One early quality result was the implementation of a nurse-driven urinary catheter removal protocol that reduced the possibility of catheter-associated urinary tract infections. Further, several members of the nursing staff became involved in the Cerner IView redesign project and will serve as super users for our September 2013 implementation.

The Emergency Department (ED) nurses successfully engaged in electronic documentation and medication scanning in 2012. All ED nurses participated in Triage First, and as a result, wait times from check-in to seeing a triage nurse decreased from 9.7 minutes to 4.9 minutes.

The Professional Development Council developed a Clinical Ladder program to be introduced to the staff in August 2013. The Nursing Standards Council reviewed and revised policies and procedures to assure evidence-based practices are in place to improve care and achieve excellent outcomes. In 2012, BRRH initiated the recognition of exceptional RNs through the Daisy Award program and celebrated two outstanding nurses. I am proud of our highly skilled and compassionate nursing staff. They are dedicated to providing an excellent and safe experience for our patients.
I continue to be amazed and impressed by the excellent clinical and compassionate care, as well as the exceptional teamwork, demonstrated each day at McDowell Hospital (TMH). Change occurs on a daily basis in healthcare and McDowell nursing embraced the changes, recognizing change provides necessary steps on our journey to provide excellent patient care and to reach our BIG(ER) Aim.

We have been very fortunate to expand our education and expertise by participating in classes offered at Mission Hospital. In 2012, six nurses became Diabetic Resource Nurses and five became Geriatric Resource Nurses. These nurses, in turn, shared their expertise with our patients and our care team. Several of our nurses also took an active role in teaching classes so that we assure our patients receive the education they need for prevention and safe care.

One of our directors was invited to speak at the North Carolina Hospital Association meeting in October 2012. She reported on McDowell Hospital’s Hard Stop Program for all elective deliveries less than 39 weeks. The program resulted in a zero percent rate!

We were privileged to celebrate with two of our outstanding nurses who received the DAISY Award for the excellent care they give to our patients.

We began the shared governance journey in 2012. We have nurses involved in Nursing Quality, Nursing Retention, Recruitment and Recognition, Professional Development and Nursing Policy councils. I look forward to seeing our nurses grow and develop as they take on new projects.

McDowell’s team went live with Cerner at the end of 2011. Our nurses embraced this new technology and were key players in the IView redesign during 2012. Participating in system nursing teams has allowed us to get to know our colleagues, standardize care, assure best practice standards are followed, and collaborate with and learn from each other.

It is a pleasure to read the many wonderful compliments we receive from our patients about the care they receive. The nursing team at McDowell Hospital demonstrates exceptional teamwork and goes the extra mile to provide excellent patient care.
Leadership in professional nursing practice grew in 2012 at Transylvania Regional Hospital (TRH). I will highlight the year by sharing just a few of the accomplishments of our nurses.

The Clinical Ladder program was fully implemented as nurses achieved advancement beyond RN2 level. Ten percent of the nurses on staff at TRH advanced to RN3. Each of those nurses completed a project designed to improve patient care. The quality of work involved in the projects was impressive.

For example, one nurse facilitated a project to improve response to pediatric emergencies in the Emergency Department. This project included implementation of TeamSTEPPS, an evidence-based system to improve communication and teamwork skills.

Another nurse pursuing the Clinical Ladder led her department in preparation for The Joint Commission survey. She educated herself on the standards and created engaging educational activities and mock survey activities for her unit.

One Clinical Ladder candidate created educational materials for patients receiving chemotherapy. The contributions of the RN3 nurses will continue to improve the quality of care provided to patients for years to come.

The Cardiopulmonary Nursing Team implemented a care-management program for improving the lives of patients with chronic lung disease. The patients who participated in the program had far fewer Emergency Department visits and hospital admissions than the same group in the prior year. This project became a sustainable program, because the team reorganized their workflow to maintain the program without adding staff.

Nursing leaders at TRH were invited to give a presentation on the results of the Zero Harm Patient Safety initiative at the National Rural Hospital Association annual meeting. The plan contributed to a 33 percent reduction in incidents of eight specific patient safety events. Falls with harm, hospital-acquired infections and Code Blue resuscitation events were among the events that were dramatically reduced.

The TRH nursing team’s commitment to quality patient care is surpassed only by the tenderness with which they provide that care. Whether the care is provided in the hospital, in an outpatient service or in the patient’s home, TRH nurses consistently exceed the expectations of our patients and their families.