

# Nursing Annual Report 2023



KootenaiHealth



**Kelly Espinoza, CNO**

Nursing at Kootenai Health in 2023 reflected three overarching strategies:

- **Workforce stabilization**
  - Pipeline extension and development,
- **Care optimization**
  - Reducing care variation and re-establishing standards of care
- **Sustainability and growth**
  - Academic collaborations, entry into healthcare, innovation

The most important aspect of this was to establish a solid foundation of **quality, patient safety, employee engagement** to support the strategies.

**Some of our accomplishments in 2023 included but were not limited to:**

- Decreasing our **Left Without Being Seen (LWBS)** down to one percent. This is part of our growth and financial health to make sure our patients are receiving the care they need through our major portal of entry.
- Established effective utilization of Kootenai Outpatient Surgery OR rooms amidst staffing shortages to increase productivity and minimize room closures.
- In collaboration with human resources, **reduced our reliance on traveler staff, which has impacted our labor spend significantly, decreasing the spend from \$70M to approximately \$30M.**
- Reduction of open nursing and clinical positions to pre-pandemic levels.
- **Significantly reduced hospital acquired infections:**
  - CLASBI, 44% reduction (from 0.55 to 0.31),
  - CAUTI, 37% reduction (from 0.70 to 0.44), and
  - C difficile, 49% reduction (from 0.67 to 0.34)
- We have become a **Level II TSE Stroke Center** and a **Level II ACS Trauma Center.**
- Utilization Review Accreditation Commission (URAC) reaccreditation through our pharmacy service line.

- Patient assistance expansion.
- Decrease in premium pay of \$1.7M from July through PP23 as compared to first six months of the year.

As you move through this report, you will see many examples of nursing and clinical services that have grown to serve our expanding community and region. 2023 has been a year of change, resetting, reflection and, rebuilding post-pandemic.

**Effective** organizational change and development require a systems-thinking mindset and an interdisciplinary, holistic approach to tackling complex organizational challenges (Westover, 2020).

Systems thinking for change includes understanding the interdependencies within groups, departments, and stakeholders.

**The following represent some of the changes we made to adjust and thrive in our current environment and to position ourselves for success in the future.**

- Compensation changes in salary and benefits
- Revised our educational policy to include Associate Degree Nurses with experience back into our workforce
- Recruitment of **Licensed Practical Nurses (LPN)** in the acute care setting
- Care model redesigns to enhance our ability to deliver patient care in conjunction with the varying needs of the populations we serve.
- Expanded our residency program and our **Preceptor Resource Nurse (PRN)** program
- Created multiple apprentice and tech-in-training programs in collaboration with our academic partners; this allowed us to bring on employees seeking opportunities in the clinical setting while pursuing their educational endeavors
- New and expanded academic affiliations.

Nursing in 2023/2024 and the landscape ahead...

## Nursing Strategic Plan 2023



### 01 Financial Recovery



#### Sustainability & Growth

- Agency spend reduction
- Premium pay reduction initiative
- Transition from FocusOne to ProLink
- Reduce time-to-hire

### 02 Epic Optimization



#### Care Optimization

### 03 Workforce Stabilization



#### Pipeline

- Inland Northwest Recruitment Roadshow & Sourcer
- Pipeline Expansion – Idaho State University Advanced BSN

Looking forward, the challenges we face include a growing population of patients with complex health needs including behavioral health and substance abuse. Dementia and support of older adults will continue to rise as family caregivers and systems of care for this population are overburdened. Education and training needs as well as proactive approaches to care management and nursing in the ambulatory setting will continue to grow and expand with the need.

Workforce sustainability and the impact of COVID will require ongoing partnerships with academic and community organizations to collaborate on the increasing shortage of nurses in multiple settings.

**Thank you to our incredible nursing and clinical teams throughout Kootenai Health. We are positioning ourselves for the future with an eye towards additional technology, expanded use of telehealth platforms, new partnerships, and expansion of existing ones as we move into 2024!**

**Dr. Kelly Espinoza Ph.D., RN**  
Chief Nursing Officer

## Nursing Workforce Development Pipeline

### Nursing Students

Kootenai Health remains a desired clinical location for schools and students alike. In 2023, the organization eliminated the need for a third-party onboarding company by bringing all the processes internally. This was a cost saving to the students seeking placement here. We also expanded our outreach by initiating a job shadow program. The program allows high school students to complete the immersive requirement of their senior projects and gain exposure to various healthcare fields. Due to the high demand, we have increased the job shadow experience from five hours to two eight-hour shifts. Students from up to 90 schools complete clinical experiences at Kootenai.

### Nurse Apprentice Program

Kootenai Health hires nursing students into departments who have completed their fundamentals in nursing but who may not have their certification as a nursing assistant. This allows the nursing students the opportunity to learn alongside their nursing team members and increase their exposure to different patient populations and clinical environments. In 2023 we were excited to hire 13 nurse apprentices to multiple care areas as nurse residents upon graduation from their programs.

### 2023 Contingent Labor Spend



- Reduced Total Traveler Spend by \$10.2M less than 2023 budget target, with a total spend of \$30.7M
- Reduced Total Traveler Spend by approx. \$39.8M less than total 2022 spend

### RN Residency

The Kootenai Health Nurse Residency program is accredited with distinction as a Practice Transition Program by the American Nurses Credentialing Center. The residency program provides support, education, and mentorship to new graduate nurses in their transition to professional practice. The Nurse Residency Program offers five cohorts per year. In 2023, 55 new nurses have completed the program and the retention rate year to date is above 90 percent for these nurses.



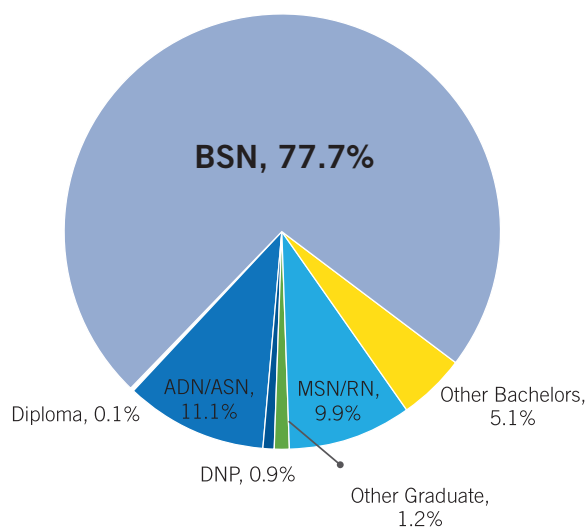
### Nursing Fellowship Program

Kootenai Health's fellowship program provides support to experienced nurses transitioning into a new practice setting by ensuring nurses are offered an expanded clinical learning experience to ensure competence and confidence in their practice. This year, in alignment with the goal of reducing reliance on travelers, Kootenai Health welcomed 30 nurse fellows into the Critical Care and Operating Room.

## Professional Development

Kootenai Health continues to advocate and financially support nurses' professional development and continued education through specialty certification and academic degrees. Based on empirical evidence from the **Institute of Medicine (IOM)**, Kootenai Health strives to meet the call for 80 percent of our nurses to hold a BSN degree or higher. In 2023, 88.5 percent of our nurses met this challenge, well surpassing the IOM's recommended goal.

### Nursing Workforce Educated at a BSN Level or Higher data as of 12/31/2023



In addition, Idaho State University and Kootenai Health are pleased to offer the **Accelerated Bachelor of Nursing (ABSN)**



undergraduate program. The new cohort offers: ten seats for the 12-month program beginning in summer 2024. Following completion of prerequisite courses, students with a bachelor's degree in another discipline are eligible to enter the program, receiving accelerated education and training to become a nurse.

This ABSN program expansion to northern Idaho addresses a growing demand across the state, and the nation, for nurses graduating with a baccalaureate degree.

## Growing our Nursing Team through Effective Organizational Change and Development



- Reduced Total Open Positions by 68%, from 599 to 193

## RN Specialty Certification

Through the ANCC Success Pays program, nurses have the opportunity to advance their nursing career and demonstrate their commitment to excellence by obtaining specialty certification (with free test retake if needed) paid for by Kootenai Health. Professional certifications that are not supported by ANCC are also available for reimbursement through the Center for Nursing Excellence Specialty Certification Reimbursement Policy. Once certified, nurses may also be eligible for specialty certification differential pay. Our goal is for 50 percent of our eligible nurses to be certified. Due to the challenges that the pandemic brought to nursing, we are well below our goal. Reach out to the Center for Nursing Excellence at KH-NursingExcellence@KH.org To find out how you can become certified!





In collaboration with: **AONE**  
The Voice of Nursing Leadership™

## Daisy Award Program

The DAISY (Diseases Attacking the Immune System) Award is an international recognition program that honors and celebrates the skillful, compassionate care nurses provide every day. The DAISY Foundation was established by the family of J. Patrick Barnes after he died from complications of the auto-immune disease in 1999. During his hospitalization, they deeply appreciated the care and compassion shown to Patrick and his entire family. When he died, they felt compelled to say “thank you” to nurses in a very public way.

### Individual DAISY Award Winners

|                |                     |
|----------------|---------------------|
| January 2023   | Laura Davidson      |
| March 2023     | Jennifer Ann Parker |
| April 2023     | Mike Freeman        |
| May 2023       | Hailey Hostetter    |
| June 2023      | Darrell Day         |
| July 2023      | Josh Gallegly       |
| August 2023    | Lewis Hughes        |
| September 2023 | Chelsey Glenn       |
| October 2023   | Fallon Jolley       |
| November 2023  | Samantha Kepler     |
| December 2023  | Mark Hayden         |

## Daisy Nurse Leader of the Year

The DAISY Nurse Leader Award recognizes the many contributions of nurse leaders who create a setting where compassion is valued, and staff, in turn, treat patients and their families with deep humanity.

“Erica has been the glue that has held our unit together, in a time where we were falling apart. She is the definition of how a manager should lead. She holds everyone to the same standards and expectations, including herself.

She would never ask a staff member to do something that she wouldn’t do herself. “She is passionate about her job and never breaks a promise.”

“She will move mountains for her staff ensuring a calming presence to a chaotic environment. 2 South is incredibly lucky to have a leader like Erica; she is someone who advocates for her staff and helps them reach their goals.”



**DAISY Nurse Leader of the Year, Erica Yager, MSN, RN, NEA-BC**

## 2 South Wins Team Daisy Award

2 South has been a fairly stable unit for the past three to four years. Late last year, it was decided that 2 South would become the Designated Training Unit (DTU) for all new grads starting in med/surg and the Nursing Resource Team (NRT). Since the inception of the DTU in February, the team on 2 South has oriented 22 new grads, including staff hired to 2 South. NRT had struggled in the past to identify a unit to allow their new team members to orient on. This has allowed NRT staff to have consistent orientation. The team was able to set expectations that new grads took to their home unit such

as Bedside Shift Report and had exposure to the use of whiteboards before being implemented on other units. Sev-



eral preceptors needed to be identified in order for the DTU to be successful.

All that had been asked to take the four hour preceptor class, took it without hesitation and the team has since grown more preceptors. It has almost become a “rite of passage” to precept new staff. The team is eager for the opportunity to assist with on boarding new grads. They enjoy teaching and have continued to ask for more opportunities to precept including building relationships with other med/ surg units to assist them with orienting their new nurses.



Olga Ellison, CNA

## Sunshine Award

The sunshine award was created by nurses to recognize the invaluable work of our supporting staff without whom we could not do our jobs. This award honors the positive contributions made by our CNAs, HUCs, ED Techs, PSAs, MHS and housekeepers. Other support staff who have gone above and beyond to impact patient care can also qualify. All nominations are submitted to our Nursing Work Environment Committee for consideration and selection. This award was new for 2023, and our first recipient was Olga Ellison.

## 2023 Nursing Awards

Nurse Preceptors are selected for their ability to create an environment that promotes learning, professional growth and development. They stand out as experts in their clinical knowledge and display a positive and inclusive attitude. In short, they exemplify the Kootenai Health Way of Safety, Compassion and Engagement.

### Andrea Collins named Nurse Preceptor of the Year



Andrea was recognized at Nurses Day in 2023 for being the Nurse Preceptor of the Year for 2022. Andrea worked on the General Surgery department at the time and is a great role model and teacher for her orientees. Andrea utilizes best practices, teaches about following protocols and policies, demonstrates professional values, and provides opportunities to practice in a safe environment as they are learning. Andrea has since moved on to Critical Care as a fellow and is currently in a PhD program at Idaho State University. Andrea started her nursing journey at Kootenai Health as a nurse resident and gives back to the program by teaching the nurse residents why evidence-based practices are needed in nursing and she helps the nurse residents learn how to form PICO(T) questions. Andrea is an exemplary team member and was an instrumental preceptor for so many in the General Surgery department.

### Nurse Preceptors of the Quarter

**Quarter 1:** Carmen Towan, CVOR

**Quarter 2:** Dustin Williams, 3E

**Quarter 3:** LuAnn Townsend, KC-Neurosurgery

**Quarter 4:** Jaime Adcock, 2S



## Recognizing our GEMS: Nursing Excellence Program

The Kootenai Health Nursing Excellence Program (NEP) is an evidence-based program founded on the five domains of magnetism; empirical outcomes, transformational leadership, structural empowerment, exemplary professional practice, and new knowledge, innovation, and improvement. This voluntary, peer-reviewed program recognizes clinical nurses for their professional achievements and contributions to improve patient outcomes and further Kootenai Health's mission to improve health one patient at a time, in a friendly and professional culture, with superior safety and quality.

### NAME

### AWARD

|                            |             |
|----------------------------|-------------|
| Abrosimov, Oksana          | Star Garnet |
| Anderson, Jesse            | Star Garnet |
| Baker, Megan               | Star Garnet |
| Baron, Kara                | Star Garnet |
| Belcourt, Vanessa          | Star Garnet |
| Birsette, Brooke           | Star Garnet |
| Borgman, Aran              | Star Garnet |
| Branson, Korri             | Star Garnet |
| Breakie, Kelly             | Star Garnet |
| Brush, Sara                | Star Garnet |
| Collins, Andrea            | Star Garnet |
| Daugharty-Sterner, Jessica | Star Garnet |
| Day, Darrell               | Star Garnet |
| DeCoteau, Sherry           | Star Garnet |
| DeMers, Natalee            | Star Garnet |
| Dickey, Alisha             | Star Garnet |
| Dolan, Carolyn             | Star Garnet |
| Epperson, Suzanne          | Star Garnet |
| Fiorini, Jordan            | Star Garnet |
| Fong, Mei                  | Star Garnet |
| Fraize, Courtney           | Star Garnet |
| Frederick, Madison         | Star Garnet |
| Goldworm, Jacqueline       | Star Garnet |
| Goode, Michele             | Star Garnet |
| Gwin, Katherine            | Star Garnet |
| Haley, Kirstin             | Star Garnet |
| Hall, Stephanie            | Star Garnet |
| Halland, Summer            | Star Garnet |
| Hanson, Shelby             | Star Garnet |
| Hartzell, John             | Star Garnet |
| Hayes, Melissa             | Star Garnet |
| Hiiva, Kristie             | Star Garnet |
| Hughes, Lisa               | Star Garnet |

### NAME

### AWARD

|                       |             |
|-----------------------|-------------|
| Jackson, Lori         | Star Garnet |
| Johanson, Klayton     | Star Garnet |
| Kinson, Lynne         | Star Garnet |
| Koziol, Christie      | Star Garnet |
| Lundy, Taylor         | Star Garnet |
| Mccown, Crystal       | Star Garnet |
| Mejia, Rebekah        | Star Garnet |
| Meschko, Alyson       | Star Garnet |
| Miller, Jennifer      | Star Garnet |
| Montgomery, Chris     | Star Garnet |
| Newbold, Kaelianne    | Star Garnet |
| Nissen, Stephanie     | Star Garnet |
| Oddy, Cassandra       | Star Garnet |
| O'Hara, Stephanie     | Star Garnet |
| Peters, Jodie         | Star Garnet |
| Petticolas, Lauren    | Star Garnet |
| Pottenger, Rachel     | Star Garnet |
| Preston, Molly        | Star Garnet |
| Pringle, Jason        | Star Garnet |
| Rocha, Tabitha        | Star Garnet |
| Roller, Wendy         | Star Garnet |
| Sample, Jeff          | Star Garnet |
| Schultz, Elina (Satu) | Star Garnet |
| Seigmund, Catheline   | Star Garnet |
| Storm, Brittany       | Star Garnet |
| Swenson, Kenze        | Star Garnet |
| Tingelstad, Darby     | Star Garnet |
| Waddell, Cathy        | Star Garnet |
| White, Sean           | Star Garnet |
| Whitehead, Amber      | Star Garnet |
| Wilson, Karen         | Star Garnet |
| Wilson, Sidney        | Star Garnet |

The point requirements and award ranges are set annually and in alignment with the nursing strategic plans. This year Kootenai Health is proud to announce their support for this program by increasing the award values. **Star Garnet: \$4,000/year, Opal: \$3,000/year, and Topaz: \$2,000/year.** All applicants meeting the program requirements will receive the award matching their point value. Congratulations to our 2023 Gems!

## NAME AWARD

|                    |      |
|--------------------|------|
| Anderson, Erica    | Opal |
| Bear, Anne         | Opal |
| Bellamy, Colton    | Opal |
| Burton, Michelle   | Opal |
| Clough, Nancy      | Opal |
| Deuling, Teresa    | Opal |
| Erickson, Kelsey   | Opal |
| Etchison, Lindsey  | Opal |
| Ferguson, Wendy    | Opal |
| Gillespie, Bryna   | Opal |
| Gisclair, Shannon  | Opal |
| Gordon, Josh       | Opal |
| Gunderson, Scott   | Opal |
| Hagar, Alexander   | Opal |
| Henderson, Joshua  | Opal |
| Hess, Katy         | Opal |
| Hurley, Katherine  | Opal |
| Irving, David      | Opal |
| Johnson, Juanita   | Opal |
| Johnson, Amanda    | Opal |
| Justesen, Jennifer | Opal |
| Kellogg, Logan     | Opal |
| Kincaid, Kelly     | Opal |
| Kraack, Kimberly   | Opal |
| Kugler, Paul       | Opal |
| LaGessee, Janelle  | Opal |
| Martin, Megan      | Opal |
| McRory, Mia        | Opal |
| Merrill, Julia     | Opal |

## NAME AWARD

|                            |       |
|----------------------------|-------|
| Miller, Shirley            | Opal  |
| Miranda, Heidi             | Opal  |
| Morgan, Alexandria         | Opal  |
| Philpott, Raymond          | Opal  |
| Plunkett, Jerrett          | Opal  |
| Rees, Diana                | Opal  |
| Seitz, Laura               | Opal  |
| Stammers, Bobbi            | Opal  |
| Stang, Katie               | Opal  |
| Sullivan, Christine        | Opal  |
| Tilleman, Sydney           | Opal  |
| VanDitto, Belinda          | Opal  |
| Wade, Athan                | Opal  |
| Walters-Piekarski, Nichole | Opal  |
| Williams, Heidi            | Opal  |
| Womelduff, Andrew          | Opal  |
| Wood, Kristin              | Opal  |
| Young, Elizabeth           | Opal  |
| Adcock, Jaime              | Topaz |
| Buroker, Kalie             | Topaz |
| Carver, Courtney           | Topaz |
| Elam, Afton                | Topaz |
| Kinskie, Shannon           | Topaz |
| Kolenda, Lisa              | Topaz |
| Lenon, Jessica             | Topaz |
| Stroemsvik, Monica         | Topaz |

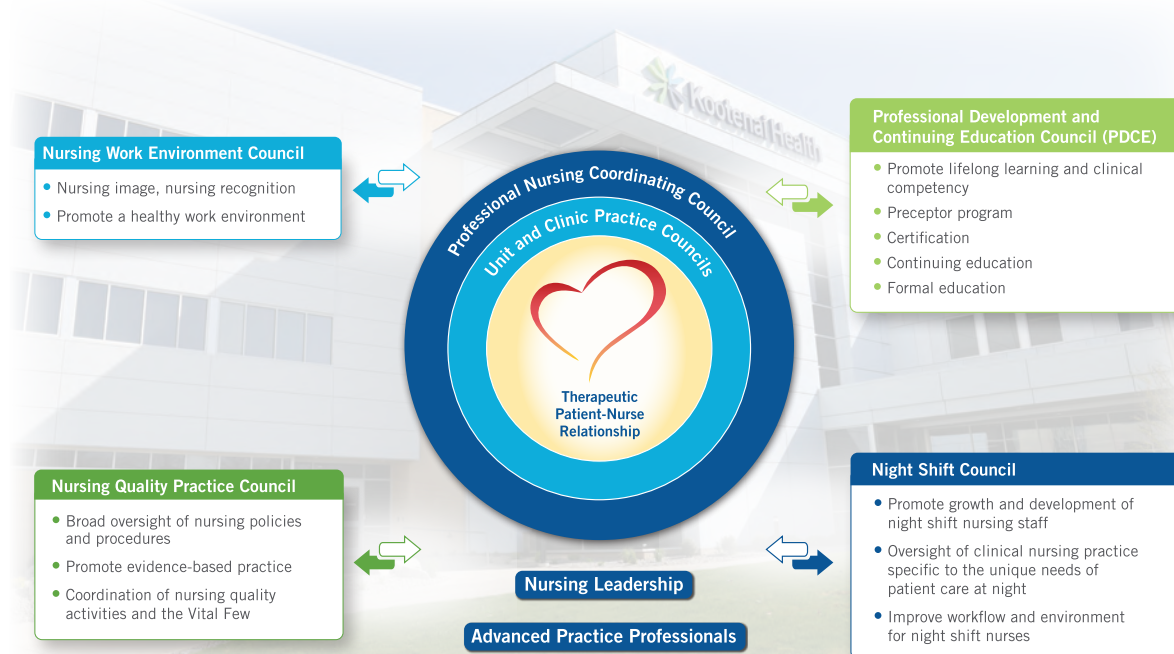
## Professional Nurse Coordinating Council

Over the last year the Professional Nurse Coordinating Council (PNCC) has worked to not only increase participation in Kootenai Health's Professional Governance (PG) Day, but also worked to increase collaboration, reduce repetitive work, and build interdepartmental relationships among nurse leaders and the sub councils. One way that we have worked to increase collaboration was through the rebranding of our overarching professional governance nursing body; this group is now known as the Professional Nursing Coordinating Council. This council works with unit members, leadership, and sub councils to divide work and make meaningful change happen. For example, we were able to foster support and change stan-

dard medication administration times from 6 am and 6 pm to 9 am and 9 pm and work with the dietary and café department to now provide hot food services for night shift staff. Another large change that was made in 2023 was to change the timing of meetings held on our professional governance day. This day is when most nursing professional governance meetings are held. We start our morning with the first coordinating council meeting, then move into sub council meetings, and finish the day with the afternoon session of the coordinating council. This has helped us to discuss and present issues during the morning session, triage those concerns to sub councils, and bring back solutions or suggestions

to the afternoon session for voting and updates. We have just released the new "Hot Topics Forum" where nurses can submit concerns, practice questions, or other issues that can be addressed at the following PG day. Our leadership team has also worked to help increase participation and knowledge regarding Unit Practice Councils to help make meaningful changes for each unit within the organization; we are continuing to support this work by having staff sit in on other unit's council meetings and by providing professional governance workshops every other month.

## Nursing Professional Governance Model



## Nursing Sensitive Indicators

The American Nurses Association defines Nursing Sensitive Indicators (NSI) as those indicators that capture care or are most affected by nursing care. NSI are specific to nursing and differ from medical indicators of care quality. In 2023, Kootenai Health selected five Nursing Sensitive Indicators to really focus on. These are our “Vital Few” initiatives.

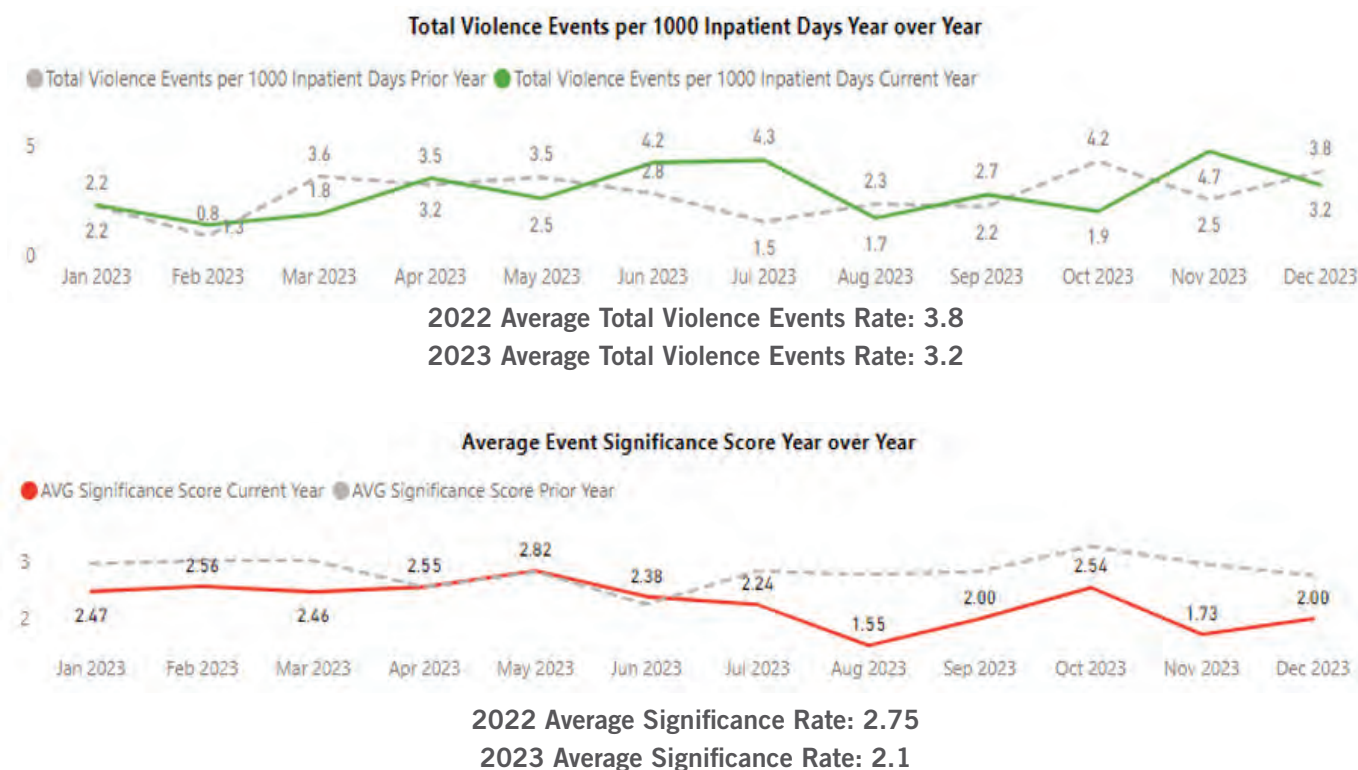


## Clinical Violence

Clinical Violence in and around U.S. hospitals has been an increasing threat to the safety of staff and visitors. Since the COVID Pandemic, there has been a significant increase in violence against healthcare workers. Kootenai Health takes the safety of its staff and patients seriously and for 2023 one of the “Vital Few” workgroups focused on clinical violence.

The **Positive Approach to Care (PAC)** class teaches staff how to approach patients with dementia proactively to prevent violence before it happens. The **Situational Awareness and De-Escalation** class teaches staff how to stay safe and to identify and calm behaviors. These classes were initiated in December 2022 with increased participation in February 2023, as one way to address clinical violence.

Other interventions included placing work-place violence signage at clinic and hospital entrances, use of clinical violence magnets on door frames to identify patients with the potential for violence, improved reporting, teaching verbal de-escalation tips and providing telephone de-escalation talking points to staff. These activities have shown an improvement in both the incidence and severity of events.



# Voices From the Bedside - Solving Problems, Changing Lives

## Sabbatical Report:

In March of 2023, I spent a week traveling to Guatemala for a surgical mission trip. This was in conjunction with **A Love for Missions Abroad (ALMA)**, which was started by a Kootenai Health anesthetist, Mike Oswald. He leads these missions to Guatemala two to three times a year. On this trip, there were a total of eight of us, two nurses, Shannon Kline and I, one scrub tech, Jenn Mikaloff, an ENT surgeon, Dr. Dan Cannon, as well as two of his teenage children, Ben and Lily, and my 27-year-old son Sam, along with Mike Oswald.

After a red eye flight into Guatemala City, we got into a van and drove three hours north to Solola and Panajachel. We had 14 large hockey bags filled with equipment and supplies—50-75 pounds each, which we unloaded and began to sort.

The next morning, we went to the hospital to set up the operating room, pre-op and recovery rooms. I was the only nurse that was to take care of the patients in pre-op and recovery. I quickly realized we were going to have to be very conservative with what we had, as well as being resourceful to make up for supplies we did not have.

We had about three emesis basins, so fortunately I only needed one! We started doing surgeries that first afternoon and ended up spending about

13 hours at the hospital that day. The surgeries included tonsillectomies, thyroidectomies, ear tubes, and sinus, among others. Most of the patients only spoke Spanish. My son is quite fluent in Spanish, so his primary job was to be



my translator throughout the week. Mike Oswald is also fluent in Spanish, and then a few of us spoke minimal amounts of Spanish and attempted to use translating apps to fill in the gap. My son was able to connect with them much better and help alleviate some of their stress. It was nice to be able to have him by my side through out pre-op and recovery, especially since he has never been able to watch me being a nurse on the job.

We spent the next two days at the hospital, completing all the surgeries that were scheduled. There are two local surgeons (ophthalmologist and general surgeon), who were able to see these patients in the days and weeks prior to our arrival, to optimize them for

surgery, as well as to follow up with them after we left. This is a huge comfort, that we are leaving them in good hands in case there are complications. Many Guatemalans live in dire poverty and the patients we provided care for

would not have been able to afford these life changing surgeries without an organization such as ALMA assisting. Some of our patients traveled six plus hours to be able to have their procedures.

My experience in Guatemala was intensely rewarding and enlightening and I hope I can go again someday or perhaps be involved in another medical mission. The

people there were so gracious and kind, and the patients were so very thankful. It was emotionally moving, and I am extremely grateful I was able to participate in this mission. I love being able to use the skills I've acquired as a nurse to benefit these precious people.

Thank you to the Nursing Work Environment Council and Kootenai Health for covering part of my expenses through the sabbatical program!

-Kristin Wood, RN  
*Perioperative Services*

## Tribal Knowledge to Practice Transparency

Kootenai Heart Clinics has survived for years with experienced nurses that have backgrounds in cardiac and critical care. The nursing practice structure has always been a nurse assigned two to three cardiologists and that nurse would handle any nursing tasks for that specific provider. The assigned nurse would know their assigned providers preferences and work to bridge communication of patient needs and issues to and from their providers. Nursing turnover has historically been minimal. Like many Kootenai clinics, COVID and staff shortages changed the familiar in our clinic. This led to back-to-back orientation for new nurses. This

was the first catalyst for change as the nurses from outside of Kootenai would ask their preceptor “where is the policy that supports that action?”. Preceptors found themselves frequently saying “we don’t have a policy; this is how we have always done it”. A common theme for orientation was jokingly labeled WWLD. What would Lori do?

The second catalyst for change was sparked by EPIC. EPIC hit and the physicians at Heart Clinics and quickly revealed the need for standardization of practice. Providers were getting frustrated by the number of entries in their desktop with simple task questions. The second factor is nursing started asking

discussions about how policies and protocols can support our nursing practice to allow our nurses to practice and decrease physician desktop burden to allow them to focus on seeing patients. We identified priorities for protocols for cardiac clearance, dental protocol, and triage orders. We identified that many

policies had not been updated since 2018. The needed standardization trickled into our orientation process. Step by step workflows have made the nursing process transparent for new grads and nurses that are transitioning from the acute setting to the ambulatory setting.

My story is intended to focus on nurses working collaboratively to influence and create transparency in their nursing practice. Our clinic leadership is mostly non-nursing until recently they have created



where the line is of staying within my practice. As I nurse, I might know a provider’s preference, but the preference is not an order.

This led to the General Cardiology nursing staff meeting every week to start the conversation of what is our practice and what policies do we need. We had many

a team of nursing clinical supervisors. All leadership have been very supportive in allowing nursing staff to create policies and facilitate the needs of physician group. It is exciting to have engaged nurses who want to change tribal knowledge to practice transparency to support their practice and create the best outcomes.

-Lori Jackson BSN

## Nurse-driven Spark in Kootenai Heart Clinics

Kootenai Heart Clinics is one of the Kootenai Clinics that has a high percentage of registered nurses employed to serve patients and support clinic staff. The clinic has many different departments and nurse-specialty training, such as electrophysiology, heart failure, general cardiology, structural heart team, and cardiology imaging services. For having several nurses, there was no nursing practice council at the beginning of this year. In the past, this council has been very beneficial in creating nurse-driven goals to improve nurse practice in Heart Clinics. An established nurse practice council also provides a good opportunity for nurses to discuss issues and concerns within each department. No one wanted to step up after the 2022 chair finished her

term. After coming back from maternity leave, I decided to start the **Cardio-vascular Services Nursing Practice Council** in June.



Since the council has started, nurse involvement has grown within all of Kootenai Cardiovascular Services de-

partments, which has been exciting to observe. The meetings have nurse attendees from heart failure, electrophysiology, structural heart team, and general cardiology. The meetings are engaging and interactive. Our goals have moved forward in a positive direction. Starting in 2024, we will have two nurse co-chairs that have recently joined Kootenai Heart Clinics. Both are motivated to continue these meetings and see the importance of continued nurse involvement in our practice. I am enthusiastic to work at Kootenai Heart Clinics and feel confident the progress we have made this year will carry on into 2024.

Thank you,  
Christine Sullivan, BSN, RN, CV-BC  
*Kootenai Heart Clinics*

## Increasing Nursing Morale Through Self-Scheduling

Nurses in the perioperative setting here at Kootenai Health worked with unit leaders and clinical coordinators to create an environment that emphasizes

work-life balance with online self-scheduling to increase nursing morale and staff retention. Department nurse leaders sent out an anonymous online Survey Monkey and paper surveys to perioperative staff to collect scheduling preferences. Unit Practice Council (UPC) met with department leaders and scheduling committee made up of perioperative peers to review schedule preferences. Perioperative staff were presented with options at monthly



staff meetings. Education was provided to unit staff on how-to self-schedule via monthly meetings and department emails. Staff were able to choose between a block-schedule of preferred days or an online self-schedule model. The new scheduling model went live in the early fall of 2023, with follow-up surveys sent roughly every six weeks for staff satisfaction results. By winter 2023, the staff reported an overall increase in nursing morale, as a result of nursing staff feeling like they had control of their schedule contributing to a greater work-life balance. An improvement in staff retention also resulted from increased nursing morale.

-Wendy Ferguson RN-B-BSN PERIOP  
SVCS – PACU

## Sepsis Escape Room

As bedside nurses and nursing leadership face staffing challenges, education hurdles, and burnout, the process to create an innovative learning environment led to the creation of a sepsis escape room. This project started with developing the content to exemplify Kootenai Health policies and to allow for a different kind of educational opportunity for critical care nurse residents and fellows. It was a collaborative effort between the preceptor resource nurse team, nurse educational specialist team, the sepsis coordinator, and Christiana Care Hospital.

The vision was to implement a safe, creative and challenging, albeit slightly claustrophobic, experience that incorporates teamwork, communication, critical thinking and application of knowledge



through a series of increasingly complex puzzles and changing patient condition. The residents and fellows were able to analyze the provided clues and patient situation to identify possible causes and expected interventions.

The goal was to have the nurses report an improvement in co-managing stressful situations, settling differences in opinion, communicating with the patient, and providing patient status updates. The nurses were able to save their patient and “escape” the room within the allotted time and afterwards reviewed Kootenai Health policies and identified practice changes that they would implement at bedside. The creative learning environment led to high classroom satisfaction scores and participants implementation of new practices at bedside.

## Stroke Certification



**Kate Knight, RN,**  
Stroke and STEMI  
program coordinator

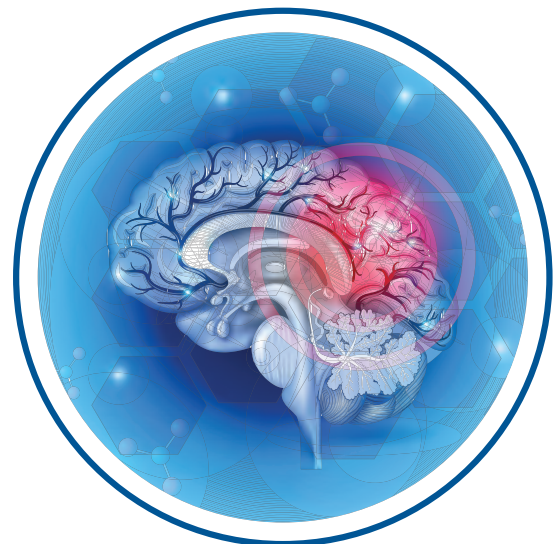
From 2016-2023 Kootenai Health has had nurse stroke coordinators, paving the way for quality stroke care. The journey was long, and much anticipated. In 2023,

Kootenai Health became an Idaho Time Sensitive Emergency Level II Stroke Center. This took collaborative efforts from physicians, administration, nursing, prehospital partners, and referring facilities. As with any program designation, endless hours were spent by our nursing stroke coordinator preparing for our survey. The result of that was one of the best survey's our surveyor had seen.



They spoke so highly of Kootenai Health's stroke program and the nurse stroke coordinator's preparation for it.

Our Stroke Program saw over 600 patients in 2023, and over 1,000 stroke alerts in the emergency department. Our program will continue to grow with our population growth and best practices coming out.



# A Healthy Idaho from Day One: Interprofessional Partnership to Improve Maternal/Fetal Outcomes in Rural Communities

Due to changes in the region in 2023, Bonner General Health experienced a closure of their maternity department. This resulted in a sudden decrease in obstetrical care and services available in the panhandle region of northern Idaho. Without Bonner's maternity care option, the closest facilities are a rural critical access hospital, Boundary Community Hospital or a regional medical center, Kootenai Health. Each of which are approximately 45 miles away in either direction. This distance led to healthcare provider concern for this patient population's access to routine and emergency care.

therapists, and emergency medical technicians. Obstetric topics for selected education included: normal vaginal delivery, shoulder dystocia, pre-eclampsia and eclampsia, post-partum hemorrhage and initial newborn care.

than two weeks, a team designed and implemented a comprehensive training program for rural healthcare professionals to recognize, manage, and escalate common obstetric emergencies in various care settings. Just a few weeks after

the last training, a pregnant rural community member was emergently brought to Boundary Community Hospital with a life-threatening condition. The patient was quickly monitored and treated in alignment with the recent practice in education and was successfully transferred to Kootenai Health. This partnership in education created opportunities for even more collaboration and the provision of excellence in patient care for improved

Through analysis of the concerns, Boundary Community Hospital and Kootenai Health quickly developed an innovative interprofessional, intercommunity educational collaboration. The collaboration for education included nurses, physicians, respiratory

The education design had a blended approach to include self-study pre-requisites and resources, classroom based didactic instruction and discussion, simulation activities and unit observations with subject matter experts. In less

maternal and fetal outcomes in the region. When the care of the community comes first, doors are opened for creative solutions to bring hope for a healthy Idaho today and tomorrow.



## Simulation Center

In 2023, the Simulation Center, in partnership with the Center for Nursing Excellence, Code Blue Committee, and unit leadership, provided 12 interprofessional code blue simulations. Over 130 staff attended, representing physicians, advanced practice providers, nurses, respiratory therapists, and other allied health professionals. Simulations occurred in the Simulation Center and in situ. In situ locations included PACU, MOR, Cath Lab, MRI, and others. The training allowed participants to recognize and initiate BLS and ACLS protocols, use effective team dynamics, and perform within their roles and scopes of practice.



# ANCC Magnet Recognition Program® Status Update

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

**“ About 1% of U.S. hospitals - just 74, have five or more Magnet designations, according to data from the American Nurses Credentialing Center. ”**

In 2025, Kootenai Health hopes to earn entry into that 1% as we complete our Fifth Magnet re-designation. Kootenai

Health has held Magnet status since 2006 and is one of only two Magnet hospitals in the state of Idaho. Achieving consecutive Magnet Designations from the ANCC is a remarkable ac-

complishment that speaks volumes about the commitment to nursing excellence held by the nurses and leadership within this organization.

To retain Magnet status, organizations must reapply every four years. Kootenai



Health will submit our application for redesignation in September 2024, followed by the

written document submission with supporting evidence in September 2025. Following the documentation review, we undergo an intensive site review by Magnet appraisers. Magnet data collection and evidence preparation is underway and we are proud to showcase the great nursing work happening at Kootenai Health.

## Forensic Nurse Examiner

Kootenai Health Risk Management identified that cases of child abuse were being missed, or when identified, photography and proper documentation was not being done. This discovery opened the conversation about all victims of a crime, not just children. Around the country, other hospitals have developed teams of nurses specifically to care for patients who have been a victim of a crime. These nurses, known as Forensic Nurses, are trained in victim centered, trauma informed care, medical forensic exam and treatment, evidence collection, forensic photography, and safety planning.

At Kootenai Health, some nurses were trained to care for victims of abuse, however, the focus was on sexual assault. The broader scope of a Forensic Nurse Examiner (FNE) would be more comprehensive and would meet the concern of providing appropriate care for our child abuse population. In studies, it is noted that a victim of a crime who has been cared for by a forensic nurse has lower incidence of physical and mental health complications post assault. Examples of the patient populations served by a forensic nurse would be victims of domestic violence, child abuse, sexual assault, physical assault, intimate partner violence, strangulation,

stabbing, or gunshot. Ideally, this team would report to any area of the hospital once a victim is identified and would not just report to the Emergency Department. After the development, training, and success of the program in the hospital is established, this service could be taken off site as well providing support to all areas of Kootenai Health. Eventually this team could partner with the community to meet needs anywhere in the local area.

Recognizing the growing need for these services throughout northern Idaho, Megan Lorincz, Manager for the Forensic Nurse program and her team began fundraising. Through grant funding and the incredible generosity of our community, we have raised over \$1M from quarter four of 2022 to present. Donors include the Office of Violence Against Women, Idaho Council on Domestic Violence and Victim Assistance, Griffith Family Donation, and Geriatrics donation. This funding has allowed Kootenai Health to build a Forensic Nurse program here to care for all victims of abuse that present to Kootenai Hospital.

The program went live in the emergency department in two stages: April 1, 2023 for sexual assault patients and May 1, 2023 all victims of crime. From go-live

through the end of 2023, our nurses cared for 259 patients.



A brief breakdown of patients includes:

- 44 children evaluated for physical abuse
- 32 patients cared for following domestic violence
- 88 patients cared for following sexual assault/abuse
- 55 patients evaluated after violent attack with a weapon
- 167 seen for physical assault, elder abuse, or other suspicious event

## Preceptor Resource Nurse Team

The Preceptor Resource Nurse role debuted at Kootenai Health in September 2022. This role was created as a pathway to retain experienced nurses at bedside while also creating support structures that could ebb and flow to meet organizational and nursing needs. The new role was constructed utilizing three separate yet interchangeable phases. Phase one focused on optimizing hiring while also standardizing onboarding and training in a multiple preceptee to preceptor modeled approach. Phase two focused on improving practice quality and safety through at the elbow support of preceptees, preceptors, and staff (no longer on orientation). Phase three supported recruitment and retention efforts by partnering with pipeline and academic programs.

Phase one was the first part of the role to be implemented and this was done in collaboration with critical care leadership and staff. At the time the critical care unit was facing a vacancy rate of >70% and projections to fill (in a traditional precepting model) was approximately 13 years. The introduction of the Preceptor Resource Nurse team immediately increased hiring capacity and created training standardization and support for the newly hired nurses. Throughout 2023, 45 nurses were hired and onboarded, aiding in a substantial reduction in contract labor costs.

**“The standardized training that was introduced with the team also created an additional \$1,039,375 in savings for the organization.”**



First day of training with the critical care team September 2022

The success of phase one in critical care led to expansion of the team into the acute care service line, but within the phase two staff support model. The team has been actively rounding and supporting new hires, preceptors, and staff practice and educational needs at the elbow on both day and night shift.

This team has created tools that aid them in tracking, communicating, and elevating trends to assist in ongoing workflow and practice optimization projects. The team is proud of blazing a trail and creating ways to support staff and the organization.



Outdoor team building day after expanding and adding the acute care team

The creation and implementation of a new role comes with many inherent challenges. The Preceptor Resource Nurse role was not just new for Kootenai Health but was considered innovative in a time where healthcare is working towards

creative solutions for recruitment, retention, and bedside support as the market and experience levels shift. New training and onboarding methodologies were designed, and workflows reinvented. The team is proud of their hard work in both phase one and two, but is even more honored to be a part of a role that creates a pathway for experienced nurses to stay at bedside and support the next generation. There has been immense learning for all of us and we take pride in the collaboration that has occurred across service lines and divisions. We extend a huge thank you to the many who have partnered with our team; critical care and progressive care leadership, acute care leadership, Kootenai Health senior leadership, nursing education specialists, the nurse residency and fellowship programs, human resources, the culture and learning team and all of the many nurses at bedside. 2023 has been a huge year and we are looking forward to all the impact our team will collectively make with nursing in 2024!

-Sara Olsen MS, BS, RN  
Nurse Manager Preceptor Resource Nurse Team

## RN Professional Presentations

### **Improving Diabetes Control with Continuous Glucose Monitoring**

Lynn Kinson, MS, RN, Kim Inmann, MSN, RN, CNML, Kootenai Clinic Family Medicine – Poster Presentation (American Academy of Ambulatory Care Nurses – 2023 Annual Conference).

### **Implementation of Patient Reported Outcome Measures As Part of Routine Clinical Care – Lessons Learned**

Kaeli Newbold, RN, BSN, MSCS, MSCN, Katie Gwin, RN, BSN, MSCS, MSCN & Nina Bozinov, MD, MS Neurology, Kootenai Clinic – Poster Presentation. 2023 Annual Meeting of the Consortium of Multiple Sclerosis Centers (CMSC).

### **Improving Access to High Quality Multiple Sclerosis Specialty Care by Creating a Center for Comprehensive MS Care in North Idaho**

Katherine Gwin, RN, BSN, MSCS, MSCN, Kaelianne Newbold, RN, BSN, MSCS, MSCN, Autumn Ramsrud, PharmD, CSP, MSCS, Tyler Cress, PharmD, CSP, Angie Critchfield, CPhT and Nina Bozinov, MD, MS Neurology, Kootenai Clinic – Poster Presentation. 2023 Annual Meeting of the Consortium of Multiple Sclerosis Centers (CMSC).

### **A Healthy Idaho from Day One; Interprofessional Partnership and Simulation to Improve Maternal/ Fetal Outcomes in Rural Communities**

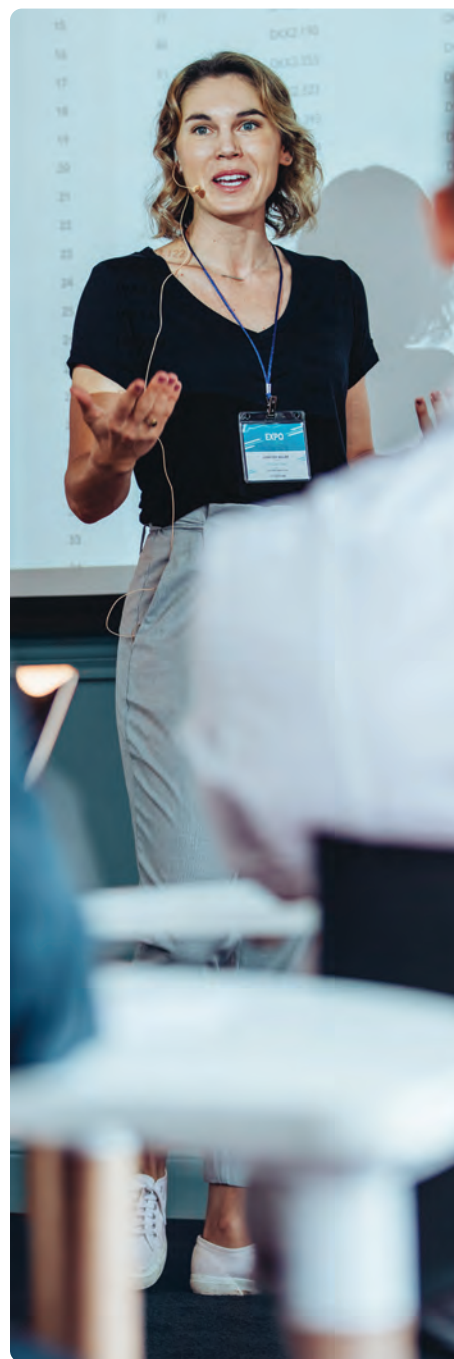
Shannon Kline, MSN, RN, CPAN, NPD-BC, Audrey Kuetemeyer, MSN, RN, PMH-BC, NPD-BC, Kelly POL, MS, RN, NPD-BC, CHSE, Miscilda Vital, MD, BS, CHSE, Podium Presentation, LEAP Idaho Conference.

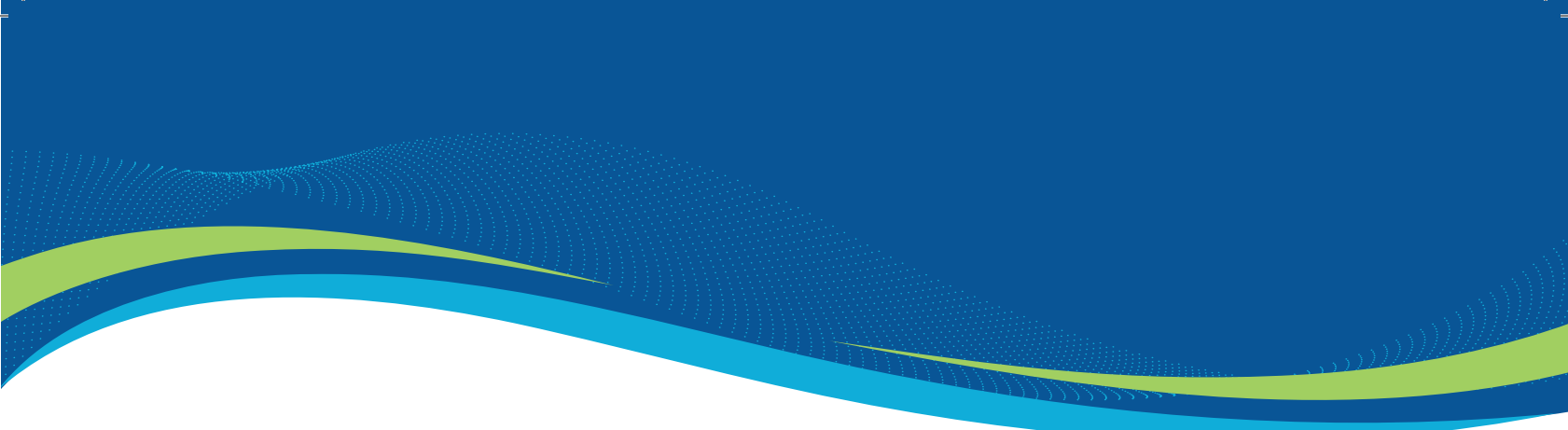
### **New Fellowship and Preceptor Models: Creating Tools to Recruit and Retain,**

Sara Olsen, MS, BSN, RN, CCRN, Voice of Nursing Leadership, AONL, March 2023 edition.

### **A Review of DMT Initiation, Change, and Discontinuation in a Real World Clinical Setting at Kootenai Health Center for Comprehensive MS Care**

Autumn Ramsrud, PharmD, CPS, MSCS, Tyler Cress, PharmD, CSP, Katherine Gwin, RN, BSN, MSCS, MSCN, Kaelianne Newbold, RN, BSN, MSCS, MSCN, Cindy Smith, Angie Critchfield, PhT, and Nina Bozinov. 2023 Annual Meeting of the Consortium of Multiple Sclerosis Centers (CMSC).





## Vision

One  
connected team,  
boldly transforming the health care  
experience, to become a **premier medical destination**.

## Mission

We **improve health** one patient at a time  
in a friendly and **professional culture**  
committed to superior  
**quality** and **safety**.



**KootenaiHealth**