2019 ANNUAL REPORT

WakeMed Nursing
Dear Nursing Colleagues,

It’s hard to believe that four years have passed since we earned Magnet® recognition, but here we are—ready to soon greet our Magnet apPRAISErs for our re-designation visit!

So much has changed in our professional practice, much of it reflecting initiatives that are being tackled on the national stage. In just the past year, we partnered with Emergency Department physicians to identify alternatives to opioids, we have re-imagined and launched innovative care for observation patients, and we have used best evidence to change the way we prioritize care of expectant mothers in our OB EDs. We are introducing patients to new technology at the bedside, and we continue to disseminate our new, key strategies in care at state and national conferences.

You, the WakeMed clinical nurses, are at the heart of everything we do. It is your expertise at the bedside, and your vigilance and voice, that inform us when practice needs to be changed.

We thank you for your patient and family advocacy. We thank you for your involvement in Clinical Nurse Council and unit-based initiatives to improve patient outcomes. And, most importantly, we thank you for being WakeMed nurses.

So proud to be, like you, a WakeMed nurse,

Cindy Boily, MSN, RN, NEA-BC
Senior Vice President &
Chief Nursing Officer
WakeMed Health & Hospitals

David Manyura, RN
Past Chair
Clinical Nurse Council
One of the highlights of my day is having the opportunity to witness first-hand the work that our exceptional nurses do on behalf of our patients and their families. As someone whose parents were nurses and had the good fortune (wisdom) to marry a nurse, I am deeply aware of the important, challenging and rewarding work you do. As a leader at WakeMed, I have seen time and again that you are committed to providing the highest quality care in the safest environment possible – all with your trademark compassion that no other organization can claim.

This year, our Board of Directors also had the chance to see and experience the outstanding work that you all are doing through a special video presentation highlighting nursing accomplishments from the last 12 months. It was a special opportunity for our Board members to see the people and passion behind WakeMed Nursing and hear about the incredible work you do each day.

I am humbled by the dedication, passion and love that WakeMed nurses share with each patient and family member that needs our help. The work you do inspires us all to be kinder, more compassionate and caring people.

On behalf of the WakeMed Board of Directors, our executive team and our WakeMed family, thank you for advancing the WakeMed mission in our community.

Donald R. Gintzig
President & CEO
WakeMed Health & Hospitals
Nurse managers and clinical leaders at WakeMed’s hospitals perform daily rounds on patients to help ensure their comfort, safety and engagement in their care. Daily interactions with our patients also help nurse leaders validate that the care clinical nurses deliver meets standards of practice as well as patient expectations. Patients and families also share lots of positive comments about clinical staff during Nurse Leader Rounds, giving nurse leaders lots of opportunities to celebrate and recognize their teams!

Nurse Leader-Patient Rounds in FY19

53,000+
Expediting Best-Practice Care for Clinical Evaluation

A new, patient-centered model and interprofessional team approach expedite care for observation patients in our 1A Clinical Evaluation Area (CEA).

How are they making the most of their model?
- Unit utilized for observation patients
- First-of-its-kind status/communication board created that prioritizes patients for discharge
- Patients stay in the unit for Cardiology and Cardiovascular testing procedures
- Structured, interprofessional team huddles
- 24/7 Case Management

1A Clinical Evaluation Area Improvements

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<tr>
<th></th>
<th>PRE-IMPLEMENTATION</th>
<th>POST-IMPLEMENTATION</th>
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<tbody>
<tr>
<td></td>
<td>OCT. 18 - FEB. 19</td>
<td>MAR. 18 - SEP. 19</td>
</tr>
<tr>
<td>CEA LOS</td>
<td>57.6 hours</td>
<td>34.24 hours</td>
</tr>
<tr>
<td># of Patients</td>
<td>239</td>
<td>344</td>
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Continuous Education Improves Quality of Care

WakeMed nurses are excellent educators! Their outstanding falls with injury and pressure injury scores prove it.

The Wound Ostomy Continence team developed an innovative education program that can be viewed on a cell phone. Medical-Surgical, Rehab and Critical Care nurses also received pressure injury prevention education.

Re-educating clinical nurses about AvaSys® Telesitter® observation technology utilization, new bed in-services and a Falls Prevention Fundamentals class held three times a year are just a few of the nursing efforts that are decreasing falls with injury at WakeMed hospitals.

Thanks in large part to our innovations in education, our National Database of Nursing Quality Indicators® (NDNQI®) scores at WakeMed Raleigh Campus have consistently been better than the national mean since we began NDNQI participation in 2014.
Patient-centric Comfort Measures

WakeMed's nurse-led, multimodal pain management program is yielding impressive results. Led by a clinical nurse specialist (CNS), the program involves pharmacologic and extensively researched non-pharmacologic pain control strategies. Clinical nurses are big supporters of Nursing's work to decrease opioid pain control and they are stepping up to receive training on alternative therapies (Reiki therapy, aromatherapy, healing touch). A multidisciplinary team also created new protocols for the use of acetaminophen and non-steroidal anti-inflammatory drugs (NSAIDs) instead of opioids when possible.

Use of non-opioid therapies at WakeMed is proving to reduce overall opioid use and over-sedation risk, improve patient safety—and patients report that they are comfortable!

Supporting At-Risk Community Members

Another facet of the project is to support patients facing opioid overdose. WakeMed Emergency Departments can now distribute NARCAN® Nasal Spray to appropriate patients.

The NARCAN distribution project as well as professional training for staff to provide alternative therapies were made possible with the support of the WakeMed Foundation.

Providing Effective Alternatives to Opioids

<table>
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<tr>
<th>FY18</th>
<th>FY19</th>
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<tbody>
<tr>
<td>20%↓</td>
<td>20%↓+3%↓</td>
</tr>
<tr>
<td>72%↑</td>
<td>Acetaminophen - Sustained 72%↑+8%↑</td>
</tr>
<tr>
<td>31%↑</td>
<td>NSAIDS Use - Sustained 31%↑+20%↑</td>
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</table>
Nurses in WakeMed’s three Obstetrics Emergency Departments (OB EDs) are outperforming patient prioritization standards set by the Association of Women’s Health, Obstetric & Neonatal Nurses (AWHONN). Our nurses use the AWHONN Maternal Fetal Triage Index (MFTI) to prioritize a woman’s urgency for provider evaluation. On average, they complete the MFTI 4 minutes faster than AWHONN’s recommended 10-minute timeframe. Our OB ED nurses worked with Information Services on an innovative, color-coded visual cue—Lean methodology—in Epic and use a number scale to prioritize patients to facilitate their new process.

**Average MFTI Completion**

<table>
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<tr>
<th>AWHONN</th>
<th>WakeMed</th>
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<tr>
<td>10 mins.</td>
<td>6 mins.</td>
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TECHNOLOGY TO ENHANCE RELATIONSHIPS

Bedside iPads

It’s amazing how technology can enhance nurse-patient communication. Bedside iPads, now available in many patient rooms, put lab results, current medication information and even photos of the care team at a patient’s fingertips. The iPads are also equipped with the InDemand app—a favorite feature with nurses. The availability of this interpretation service on the Bedside tablets means they can converse with patients in real-time with ease.

InDemand Usage in 1 Year

↑ 55%
NATIONAL LEADER:
ERAS for Cardiac Surgery

WakeMed Raleigh Campus is the nation’s first Center of Excellence for Enhanced Recovery after Surgery (ERAS) for Cardiac Surgery, thanks to the interprofessional work of nurses, physicians, pharmacists and other clinicians. Team members hosted the first and second national ERAS for Cardiac Surgery training conferences and earned a top performance rating from the Society of Thoracic Surgeons (STS).

While the WakeMed team of ERAS for Cardiac Surgery pioneers continues to receive accolades, it is our patients who are receiving the most benefit from this proven protocol.

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<tr>
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<th>PRE ERAS 2016</th>
<th>POST ERAS 2019</th>
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<tbody>
<tr>
<td>Post OP LOS</td>
<td>7 days</td>
<td>5 days</td>
</tr>
<tr>
<td>GI Complications</td>
<td>6.3%</td>
<td>3.7%</td>
</tr>
<tr>
<td>Total ICU hours</td>
<td>43</td>
<td>29</td>
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WakeMed Awards & Accolades 2019

American College of Cardiology
- Raleigh Campus received the NCDR Chest Pain – MI Registry Platinum Performance Achievement Award.
- Raleigh Campus and Cary Hospital were re-certified as Chest Pain Centers.

American Heart Association/American Stroke Association
Raleigh Campus
- Stroke: Gold Plus and Target: Elite Honor Role
- Heart Failure: Gold Plus and Target

Cary Hospital
- Stroke: Gold Plus and Target: Elite Honor Role
- Heart Failure: Silver Plus and Target: Honor Role

Emergency Nurses Association Hall of Fame
- Elizabeth Stone, RN, Children’s ED, was 1 of 8 in the country inducted.

Home Health Compare
WakeMed Home Health earned top performance rating.

National Committee on Quality Assurance
Eight WakeMed Primary Care locations re-designated as Patient-Centered Medical Homes.

PRC Recognition (Patient Experience)
- Top Performer – Department: Mobile Critical Care Services
- 5-Star Awards – Departments: Brier Creek Healthplex-Emergency Department, Cary Hospital-Outpatient Lab, Cary Hospital-Outpatient MRI, Cary Hospital-Outpatient Specialty Rehab, North Hospital-Outpatient Surgery, North Hospital-Medical/Surgical, North Hospital-Women’s Pavilion & Birthplace, North Hospital-Outpatient Lab, Raleigh Campus-6A CVIC, Raleigh Campus-Cardiac Rehabilitation, Pediatric Cardiology-Apex, Pediatric Endocrinology-Apex, Pediatric Outpatient Minor Procedures, Pediatric Weight Management-Apex, ENT-Head & Neck Surgery-Apex, Heart & Vascular-Apex, Heart & Vascular-Cardiovascular & Thoracic Surgery, Heart & Vascular-Cary, Heart & Vascular-Complex Arrhythmia, Heart & Vascular-Heart Center, Heart & Vascular-Advanced Heart Failure, OB-GYN-Brier Creek, Primary Care-Holly Springs, Primary Care-Downtown Raleigh, Urgent Care-Cary, Urology-Raleigh Medical Park

The Joint Commission
Cary Hospital received re-certification as an Advanced Primary Stroke Center.

The Society for Enhanced Recovery After Cardiac Surgery
Raleigh Campus named first-ever ERAS Cardiac Center of Excellence.

Society of Thoracic Surgeons
Raleigh Campus received top performance rating and #1 composite quality score for isolated CABG in the state.

Triangle Business Journal
- Healthiest Employers
- Health Care Hero: Jessica Dixon, RN, Infection Prevention

Triangle Chapter of the Association of Fundraising Professionals
Congratulations to Brenda Gibson, past chair, WakeMed Board of Directors, long-time WakeMed advocate and outstanding supporter of WakeMed nurses for receiving the Excellence in Philanthropy Award.

WakeMed Nursing Professional Development

RNs with National Certifications
- 42.49%

BSN-or-higher Degrees
- 73.18%
### Research

<table>
<thead>
<tr>
<th>Study</th>
<th>Design</th>
<th>PI</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Characteristics of Intranasal Dexmedetomidine for Sedation in Children Undergoing Nonpainful Procedures</td>
<td>Descriptive</td>
<td>M. Davis, BSN, RN, CPN (Site PI)</td>
<td>Closed</td>
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<tr>
<td>Health Care Providers’ Attitudes and Beliefs of Family-centered Care Practices in the NICU</td>
<td>Survey</td>
<td>D. Vittner, PhD, RN, CHPE</td>
<td>Closed</td>
</tr>
<tr>
<td>Effect of A Multifaceted Implementation Program on Compliance of Daily Chlorohexidine Bathing in Critical Care and Bone Marrow Units</td>
<td>Multisite stepped-wedge, cluster randomized trial</td>
<td>P. Woltz, PhD, RN (Site PI)</td>
<td>Open</td>
</tr>
<tr>
<td>An Exploration of Music Therapy Among Patients with Serious Medical Illness</td>
<td>Qualitative</td>
<td>C. Taylor, BSN, RN</td>
<td>Review</td>
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<tr>
<td>Efficacy of Intervention Components on Sleep in the Inpatient Rehabilitation Setting: A Factorial Experiment</td>
<td>Parallel-group randomized 2X2 factorial trial</td>
<td>P. Woltz, PhD, RN</td>
<td>Design</td>
</tr>
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### Publications


### Oral Presentations

Lindahl, A., Shelton, R., & Kramer, J. (2018, October). Overcoming barriers that will keep you from building an app people actually use. Epic App Orchard 2018 Conference, Verona, WI.


Fennell, R., & Grant, B. (2018, November) Nurses’ comfort level discussing sexual health care with patients. American Public Health Association, San Diego, CA.


Bogamil, L. (2019, April). Care of the amputee patient in acute inpatient rehab. Greater NC Chapter of Association of Rehabilitation Nurses, Wilmington, NC.


Klaess, C. (2019, April). Understanding biases – improving awareness and delivery of care for patients with OUD. Academy of Medical-Surgical Nurses Chapter Meeting, Raleigh, NC.


George, S., Maloy, C., & Sandel, K. (2019, September). Emergence delirium: a quality improvement project to decrease the incidence of emergence delirium in PACU. North Carolina Association of Peri-anesthesia Nurses State Conference, Greenville, SC.

Poster Presentations


McIntyre, S., Hicks, N., Hamilton, P., & Udekwu, O. (2019, April). The team that huddles together saves lives. Trauma Center Association of America Conference, Las Vegas, NV.


# FY 2019 Statistical Highlights

<table>
<thead>
<tr>
<th>Category</th>
<th>Value</th>
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<tbody>
<tr>
<td>Licensed Beds</td>
<td>941</td>
</tr>
<tr>
<td>Discharges</td>
<td>55,917</td>
</tr>
<tr>
<td>Emergency Department Visits</td>
<td>295,132</td>
</tr>
<tr>
<td>Inpatient &amp; Outpatient Surgeries</td>
<td>38,525</td>
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<tr>
<td>Total RNs</td>
<td>3,674</td>
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<tr>
<td>Nursing Turnover Rate (National: 14.85%)</td>
<td>11.00%</td>
</tr>
<tr>
<td>RN Average Years of Service</td>
<td>7.53</td>
</tr>
<tr>
<td>Nurse Fellow Retention Rate After 1 Year</td>
<td>91%</td>
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