


2023 Nursing Annual Report

Achieving Nursing Excellence



“Our fingerprints
don’t fade from the
lives we touch”

~Judy Blume

Welcome

Message from our Chief Nursing Officer



MELISSA FRADETTE, MSN, RN, CCRN
EXECUTIVE DIRECTOR, CENTRACARE CNO

Contents

Message from the CNO	Page 2
Message from CentraCare Chief Operating Officer – St. Cloud Hospital President	Page 3
St. Cloud Hospital Statistics	Page 4
Magnet Program Director Message, Nursing Strategic Plan FY 2022	Page 5
Nursing Care Delivery	Page 6-7
Patent Experience	Page 8
Exemplary Professional Practice	Page 9-11
Shared Governance	Page 12-13
Working Relationships	Page 14-18
Professional Development	Page 19-21
Nursing Makes a Difference	Page 22-26

As I reflect on the past year, I remember the array of emotions felt at different times. I had a sense of inspiration and pride as I listened to the stories of how nurses lived out their purpose during personal connections or through our Magnet document. A sense of accomplishment with the implementation of a nursing and interdisciplinary colleague system shared decision-making clinical practice committee to align nursing practice and patient care at all sites – ensuring reliability and safety for patients and our colleagues. Finally, an overwhelming sense of commitment to empower nurses to engage in innovation, problem solving and clinical inquiry to enhance continuous improvement of the nursing practice environment.

As the pandemic becomes more distant in our rearview mirror, I am grateful for the collaboration, innovation, and learnings. As I look forward through the windshield, the road ahead is full of possibilities to advance the nursing profession and improve outcomes for our colleagues, patients and communities we serve. As you read the stories in the nursing annual report, reflect on the numerous accomplishments of you and your colleagues, amidst the challenges of healthcare and society, and use these as the foundation for continued successes.

A handwritten signature in black ink that reads "Melissa Fradette". The signature is written in a cursive, flowing style.

Message from the President



JOY PLAMANN, DNP, MBA, RN, BC
CENTRACARE CHIEF OPERATING OFFICER
ST. CLOUD HOSPITAL PRESIDENT

Our Journey

The road to a Magnet designation is often referred to as a journey, this is especially true as we prepare for our fifth site visit. We have held strong as a nursing community through changing Magnet requirements, a change in Chief Nursing Officers, and most vividly, through a once-in-a-lifetime pandemic with COVID-19. A journey is an activity that takes place over time and space. It requires preparation, guidance, personal and team effort, grit and along the way, if we really allow ourselves to be open to it, we change and we grow as well.

Magnet is truly about a journey. Magnet pushes us to be better than we were the designation before, it pushes us to implement the latest evidence and to create it. It emphasizes all voices and a spirit amongst a team like no other, all in service of our patients, their families and one another. Magnet insists on collaboration and helping each other to be better and it reinforces how we need to support each other to achieve this magnificent designation.

I know we are Magnet, I see it every single day in what we do together. I am proud we are on this journey together and cannot wait to achieve our fifth designation and continue these efforts over many years to come.

Enjoy the journey!

Joy M. Plamann

enjoy THE JOURNEY

Hospital Profile

JULY 1, 2022 TO JUNE 30, 2023

Licensed beds: 489

Net Patient Revenue: \$928,965,2999

Consumers served: 775,296

Inpatient admissions: 23,138

Number of patient days: 111,328

Average length of stay: 4.81

Number of outpatient visits: 362,801

Number of Emergency Trauma Center visits: 61,496

Number of Home Care visits: 59,764

Number of surgeries: 14,331

Number of births: 2,609

Nursing Team

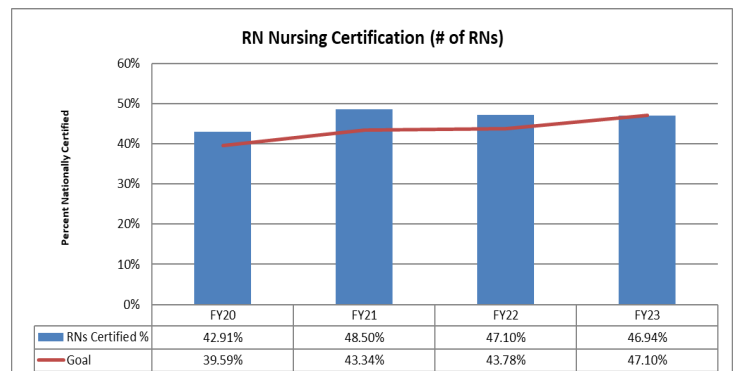
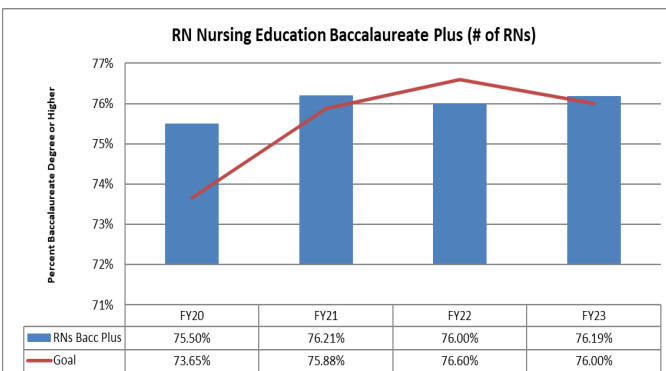
OUR NURSING TEAM IS MADE UP OF ADVANCED PRACTICE REGISTERED NURSES, REGISTERED NURSES, LICENSED PRACTICAL NURSES AND NURSING ASSISTANTS.

	APRNs	RNs	LPNs	NAs
Number employed	133	1861	192	609
Number of FTEs	99.57	1,370.27	123.21	316.59
Skill mix		77%	6%	17%
Average length of service (years)	7.38	7.97	9.99	3.35
Turnover rate	3.8%	18.8%	40.1%	45.1%
Vacancy rate	3.8%	11%	18.2%	3.9%
Diverse staff rate	9.6%	5.7%	10.9%	32.8%

Education and Certification

As a Magnet-designated organization, CentraCare – St. Cloud Hospital (SCH) nurses are committed to lifelong learning and professional development. This can be demonstrated through attainment of a baccalaureate degree in nursing or higher and specialty certification.

Annually, goals are established to increase the percentage of nurses with a baccalaureate degree in nursing or higher and specialty certification. For fiscal year 2023, the percentage of RNs with a baccalaureate degree in nursing or higher was 76.19%, in which we achieved the goal of 76%. In addition, 46.94% of SCH RNs have a national specialty certification, we were close, but did not achieve the 47.1% goal. Attainment of higher education and national specialty certification is a testament to the advancement of nursing practice and commitment to patient safety and quality outcomes.





MELISSA STOWE, MSN, RN, CNOR
MAGNET PROGRAM DIRECTOR/PATIENT
SAFETY MANAGER

Message from the Magnet Program Director

We accomplished many milestones within our Magnet journey this past year, to ultimately prepare us for our Magnet site visit. In September 2022, the Magnet document was submitted for review and by June 2023, we learned our Magnet site visit would occur later that summer. We were busy bees and chose the theme “Stayin’ Alive in the Beehive for Magnet #5” to help us prepare!

As we submitted the Magnet document, I was confident we would have the opportunity to move to site visit. The document reflects why we are Magnet, it’s because we have exceptional outcomes, use evidence to make change, and through our shared governance structures, nurses voices are heard. As we prepare for our site visit in fiscal year 2024, I look forward to celebrating our successes by amplifying, clarifying and verifying our Magnet journey with the Magnet appraisers!

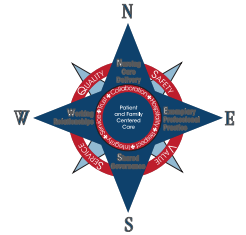
Thank you!



Nursing Strategic Plan

2022 - 2023 CENTRACARE – ST. CLOUD HOSPITAL

“We’re here for your whole life
– to listen then serve, to guide and heal –
because health means everything.”



NURSING CARE DELIVERY

(Experience, Value):

- Evaluate and improve alignment of the patient’s story, care progression and care plan. (Jen Burris & Holly Kockler): **Care plan note and story board changes implemented.**
- Implement Electronic Health Record (EHR) staffing acuity tool in the inpatient settings. (Tyler Dwyer): **UKG Staffing and Clinical Dimensions, including EHR staffing acuity tool to be implemented August 2023.**
- Evaluate valid, reliable staffing acuity tools for outpatient setting. (Tanya Mazzone): **Explored acuity staffing tools for outpatient settings and available tools do not meet current needs.**
- Implement HD Nursing Falls Prevention Program and reduce acute and ambulatory patient falls. (Evalyn Michira & Liz Plante): **HD Nursing Falls Prevention Program implemented December 2022.**

SHARED GOVERNANCE (People):

- Implement a systemwide shared governance structure which supports nursing collaboration across the ambulatory, acute and skilled nursing facilities within CentraCare. (Melissa Fradette, Jen Burris, & Nursing Integration Committee): **Systemwide acute care shared governance structure implemented. Ambulatory care structure planned implementation in FY24.**
- Explore implementation of a system nursing committee to enhance nursing innovation, research and engagement in evidence-based practice projects. (Melissa Fradette, Jen Burris, Heidi Albrecht, & Nursing Research Review Board): **Work deferred until FY24.**

WORKING RELATIONSHIPS (People):

- Through participation in the Patient Flow and Throughput system initiative, implement processes to improve access and patient progression across the care

continuum and through all care

transitions. (Jennifer Seifert & Patient Flow and Throughput Steering Committee):

Systemwide Transfer Center to be implemented September 2023.

- Implement strategies to improve nurse safety and retention. (Michelle Gamble, Stephanie Hagen, Diane Pelant, Kirsten Skillings, & Workforce Strategy Committee): **Literature review completed and stay interviews to be implemented system wide in FY24.**
- Explore opportunities and implement strategies to enhance the response and reduce violence and threats from patients, visitors and employees. (Breanna Bouley, Kate Van Buskirk, Cheyenne Orcutt & Workplace Violence Committee): **New workplace violence prevention curriculum to be implemented in FY24.**
- Evaluate multiple modes of nurse to provider communication and implement a standardized communication process. (Kirsten Skillings, SCH Nursing SME TBD & Workforce Strategy Committee): **Pilot continues. Outcomes will be spread upon completion.**

EXEMPLARY PROFESSIONAL PRACTICE

(Community Health):

- Implement the deterioration index scoring system. (Holly Kockler & Evalyn Michira): **Work deferred until sepsis predictive model work is completed and implemented across CentraCare planned for October 2023.**
- Implement strategies to increase staff engagement, recovery and resiliency. (Alison Reginek, Melissa Stowe, Employee Wellness Steering Committee & Workforce Strategy Committee): **Action plan created; aligning work with Employee Experience Pillar.**
- Achieve 5th Magnet Designation. (Melissa Stowe, Magnet Writers, & Magnet Steering Committee): **Magnet documented submitted and site visit planned for August 2023.**

Nursing Care Delivery

Discharge Process Standardization Improves Patient Flow

Driven by opportunities to better serve our community and reduce patients diverted from St. Cloud Hospital (SCH), stakeholders were brought together to create standardized discharge processes. Group representation included nursing, care management and hospitalists. It was supported by the Transformation Management Office and executive sponsor Phil Luitjens, Vice President, Operations, Acute Care.

The Medical and Oncology Unit was chosen as the "Innovation Unit" to pilot and evaluate small tests of change with a goal to reduce patient length of stay (LOS). Between April-June, the following actions were taken on the Innovation Unit:

- Clarification of expectations of unit director, charge nurses and providers to ensure optimal patient flow.
- Enhancement of existing discharge and loop back huddle processes.
- Increase night shift involvement in care progression and discharge planning.
- Improve care team communication related to discharge goals and estimated discharge date (EDD).
- Communication of estimated discharge date (EDD) to patients and families on patient room My Care Board.
- Initiation of the Progression of Care/Discharge Delay Panel, a group of key subject matter experts, who review patients with LOS greater than 15 days to identify and problem solve potential barriers to discharge and care progression.

Discharge process standardization resulted in patient discharges earlier in the day, reduction in LOS, and improved patient experience scores related to likelihood to recommend and discharge experiences. In alignment with CentraCare's strategic priority related to access, tactics were approved by the Throughput/LOS Steering Committee and future global spread is planned for fiscal year 2024.



(Left to Right) Crystal Hahn, LSW, Corinne Dawson, RN, Abby Carriveau, BSN, RN, Sarah Peterson, Social Work Intern, Ann Backes, MSN, RN, OCN, Megan Larson, BSN, RN, Chelsea Wicht, LSW

Improved Communication Through Note Overhauls

To improve care team communication and increase awareness of the patient's plan of care, teams at CentraCare looked to revamp care management and nursing notes.

Earlier this year, CentraCare – St. Cloud Hospital's Care Management team implemented a new initial and progress note template. The new note focuses on patients' transition, care progression barriers and comprehensive discharge plan. Since implementation, nurses and providers have recognized notes are more concise and clearly understand the discharge plan.

In addition, a care plan overhaul workgroup surveyed nurses to understand how to improve care plan notes. The workgroup learned care plan notes were difficult to read, write and did not effectively demonstrate care progression. The workgroup used this feedback to improve workflows. On March 14, 2023, a new template was implemented guiding nurses to summarize care progression and demonstrate the overall patient plan. Since implementation, nurses have shared care plan notes are easier to write and the entire care team better understands the patient's plan.

Resource Nurse of the Day

As CentraCare – St. Cloud Hospital strives to become a high reliability organization (HRO), safety is not just leadership's responsibility, it's everyone's. To ensure nurses are given the opportunity to learn and grow, Wound Center leadership decided to implement a Resource Nurse of the Day.

The roles and expectations of the Resource Nurse of the Day include:

- Planning complex patient appointments in alignment with the resource nurse availability to improve patient care, employee satisfaction and resiliency.
- Attending the 8:30 a.m. surgery section Daily Safety Check In (DSCI) to create a greater safety awareness.
- Being a resource for student shadow experiences to promote recruitment.
- Managing urgent referrals, phone calls and in-basket messages.

Since implementation, staff feedback has been well received:

- "Things go quicker in the morning and after lunch."
- Decreased staff burnout.
- Improved communication.
- Greater teamwork.
- Enhanced skill development for team members.



Camille Johnsen, RN

Patient Experience

A Life Saved: How Suicide Prevention Screenings Increase Patient Safety

Research shows most people who die by suicide have interacted with a medical professional in the year prior to their death, with 64 percent receiving healthcare the month prior. In fall of 2022, CentraCare – St. Cloud Hospital changed suicide screening practices from upon admission to daily because research found there can be a progressive change in suicidal thinking. When suicide risk is identified, nursing staff work with advanced practice providers, physicians and behavioral health clinicians for further assessment, safety planning, and stabilization.

Following implementation of daily screening, Neuroscience Spine Unit Registered Nurse, Amber Lewandowski, BSN, RN, demonstrated daily screening importance. Upon admission, Amber's patient screened negative for suicide. On the second day, using the new daily screening guidelines, the patient screened moderate risk for suicide. Through established workflows, Amber notified the provider and psychiatry was consulted. During consultation, the patient described a recent interrupted suicide attempt which was the first time the patient divulged the information. The care team was able to stabilize and create a safety plan in collaboration with the patient and their family.



Larry Hook, MD & Amber Lewandowski, BSN, RN



Jodi Lillemoen, BSN, RN, CMSRN

It's all in the Cards – Sustaining VIDA

In May 2022, CentraCare – St. Cloud Hospital implemented, Very Important Discharge Appointment (VIDA), to improve patient flow and throughput by discharging two patients by 11:00 a.m. daily. Medical Unit 2 charge nurses and leaders committed to sustaining VIDA by involving providers to ensure discharge orders are timely, and keeping nurses informed through loop back huddles. In collaboration with patients, nurses during all shifts actively participate in discharge planning. One year following implementation, Medical Unit 2 improved the percent of patients discharged by 11 a.m. from 5.3% to 14.53%. Additionally, patient experience scores related to nurses keeping patients informed and overall discharge have increased, demonstrating the partnership between the healthcare team and patients.

Exemplary Professional Practice

Conducting Research to Change Vital Signs Frequency

Upon completion of an evidence-based practice project related to post operative vital sign frequency on the Neuroscience Spine and Orthopedic Units, it was hypothesized patients could be safely monitored in a shorter timeframe. In July 2022, Sadie Seezs, BSN, RN, ONC, Educator, Orthopedic Unit, Liz Plante, BSN, RN, CNRN, SCRNP, PCCN, Nurse Clinician, Neuroscience Spine, Tiffany Omann-Bidinger, BSN, RN, Director, Neuroscience Spine Unit, and Jennifer Burris, MA, APRN, ACNS-BC, Director, Nursing Practice created a partnership with St. Cloud State University's Nursing and Statistical Departments and pursued a research study.

In January 2023, after CentraCare Nursing Research Review Board and Institutional Review Board approval, patients who returned to the Neuroscience Spine and Orthopedic Units after a Post Anesthesia Care Unit stay received a modified version of serial vital signs. In comparison with usual practice, the changed frequency was found not statistically different in relation to death, higher level of care need, code blue event or acute response team activations.

Throughout Fiscal Year 2024, the practice change will be disseminated across CentraCare for adult medical surgical patient populations.

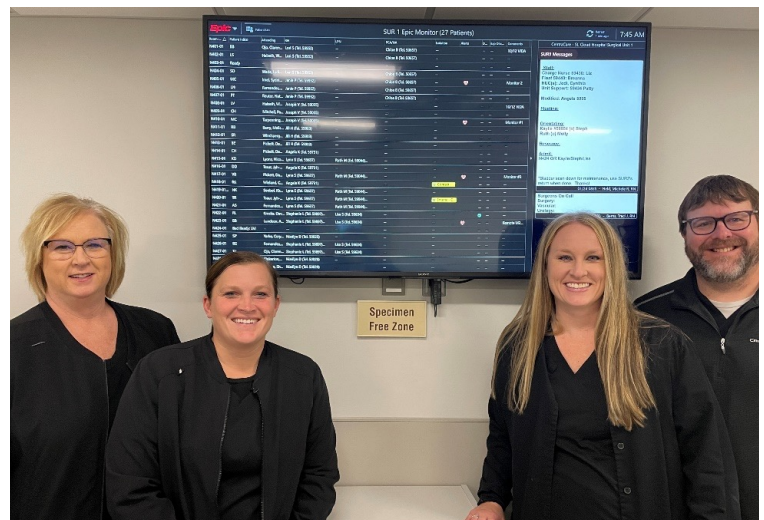
Electronic Boards Enhance Workflows

During the Surgical Care Unit 1 remodel, an idea was presented to create an electronic board to display patient assignments at each nurse's station. With input from staff, unit leadership collaborated with Information Systems and Technology to develop the assignment board.

The assignment board, which includes patient room number and initials, staff name/phone number and various orders, automatically updates as changes are made within the electronic health record (EHR). Staff have verbalized appreciation for the technology, assignment visualization, real-time updates and overall enhanced workflows.

(left to right)

Michelle Mohr, RN, CMSRN, Rachel Radermacher, BSN, RN, CMSRN,
Traci Berns, BSN, RN, CMSRN & Curtis DeVos BSN, RN, CNRN



Hester Davis Fall Program Implementation

Patient falls are the single largest category of reported incidents in hospitals and have been identified by Centers for Medicare and Medicaid Services (CMS) as a preventable event. In December 2022, CentraCare implemented the Hester Davis program which is a comprehensive evidence-based assessment tool and care planning system targeted at preventing falls and fall-related injury. With implementing Hester Davis, nursing interventions are based on assessed fall risk factors. Clinical nurse fall champions continue to evaluate and establish sustainable workflows and support this important safety initiative.

Graduate Nurse Residency Peer Mentorship Program

The transition from academia to the hospital setting can be emotionally, physically and mentally challenging which could lead to stress, loss of confidence, guilt and an absence of professional identity amongst new nurses. CentraCare's Graduate Nurse Residency Program recognizes this phenomenon could lead to burnout and higher turnover rates. As new nurses are exposed to a world surrounded by unpredictable situations, caring is one key element that is critical to the development of resiliency. A caring presence offered through peer mentorship encourages new nurses to share experiences, interactions with team members and patients, and learning goals in a psychologically safe environment. The Graduate Nurse Residency Program, in collaboration with previous new nurses, implemented a peer mentorship program specific to addressing and strengthening unique needs of new nurses as they transition from academia to practice. New graduate nurses have verbalized appreciation for the positive and caring mentor relationship and have recognized increased confidence, enhanced career satisfaction, and decreased symptoms of burnout and compassion fatigue.

Innovation and Collaboration to Serve Heart Failure Patients



Aquapheresis, an alternative to diuretic therapy, uses a simplified approach to ultrafiltration and removes salt and water in fluid-overloaded patients. Aquapheresis requires a specialized catheter or temporary dialysis catheter for venous access and can be associated with patient discomfort and complications. In December 2022, Jamie Pelzel, MD, Cardiology, requested evaluation of an off-label use of midline catheters for vascular access in patients receiving aquapheresis therapy. In response, Brenda Swendra-Henry MSN, RN, NPD-BC, VA-BC, Supervisor, Vascular Access Team, Jessica Thoma, MSN, RN, NPD-BC, Supervisor, Cardiac Intensive Care Unit/

Cardiovascular Thoracic Unit, and Tanya Glenz, RN, BSN, CCRN, CHIP/ Shock Coordinator came together to evaluate and apply evidence to practice. They gained approval from the Medical Executive Committee to trial midline catheters as an off-label use and created guidelines for midline insertion and aquapheresis therapy. The initial trial demonstrated midline catheters were viable devices for vascular access, however, continued evaluation of guidelines and inclusion criteria was required, which will continue in fiscal year 2024.



Left to Right: Swendra-Henry, Pelzel, Glenz, Thoma

Use of Evidence to Change Practice: Transition to Saline Flushes for Implanted Ports

Heparin, a locking solution for implanted ports, has been a common practice to ensure patency. In August 2022, Amity Hickman, BSN, RN, Medical Oncology clinical nurse recognized use of heparin has risks including heparin induced thrombocytopenia (HIT), bleeding, hypersensitivity and infection. Lauren Tollefson, BSN, RN, Medical Oncology clinical nurse and graduate nursing student completed a literature review and suggested an evidence-based practice change using saline with a pulsatile technique to flush implanted ports instead of Heparin. A six-month pilot was completed on the Medical Oncology Unit, resulting in zero implanted port occlusions. The practice change will be disseminated in Fall 2023.

Leveraging Technology for the Safety of Our Patients: Rapid Electroencephalogram Monitoring

Despite an onsite neurodiagnostic program at CentraCare – St. Cloud Hospital limitations in availability of Electroencephalogram (EEG) monitoring existed. In August 2022, a multidisciplinary group collaborated to broaden availability of EEG services by implementing Rapid EEG technology across neurosciences, critical care and emergency medicine.

Rapid EEG recordings may have limitations compared to continuous recordings, however, has immediate feedback for monitoring of nonconvulsive status epilepticus. Artificial intelligence “reads” the EEG during the study to determine any epileptic like activity over a five-minute period, which results in timely intervention. While the EEG is not diagnostic at the bedside, each EEG is read by a neurologist.

Since implementation, Rapid EEG monitoring has been used over 600 times. Ability to screen at the bedside has resulted in:

- Average time to STAT EEG decreased from 11.25 hours to 1.9 hours.
- New access to EEG capabilities in the Emergency Trauma Center to make informed admission decisions.
- Timely intervention, urgent needs can be addressed up to 16 hours earlier contributing to flow and throughput.

Work continues maximizing Rapid EEG usage with potential expansion across CentraCare.

Perioperative Glucose Monitoring Standardization

To ensure patients have a successful postoperative outcome, maintaining normal glucose levels is important. Perioperative nurse leaders recognized there was not a standardized approach for glucose management and a multidisciplinary group was formed. The group reviewed perioperative glucose monitoring evidence-based practices and developed guidelines.

The guidelines have established a perioperative process which includes chart review and patient assessment to identify patients with diagnosed diabetes or no known history yet having hyperglycemia risk factors. Glucose monitoring is then required for both patient populations pre, intra and post-operatively. After implementation, there has been heightened awareness and improved outcomes. For example, a patient with no previous history of diabetes had an elevated glucose preoperatively. The elective surgery was postponed and a consult was made to their primary care provider for further evaluation. Glucose monitoring process standardization has demonstrated to decrease patients' risk for poor surgical outcomes and ensures patients have additional resources for diabetes management.



Tammy Filippi, BSN, RN, NPD-BC, Courtney Van Vickle, MSN, RN, CNOR, Nicole Helgeson, MSN, RN, CNOR, Deb Moengen BSN RN CPAN, Amy Salzer, RN, MSN, CPAN

Shared Governance

Implementation of a System Nursing Shared Governance Structure

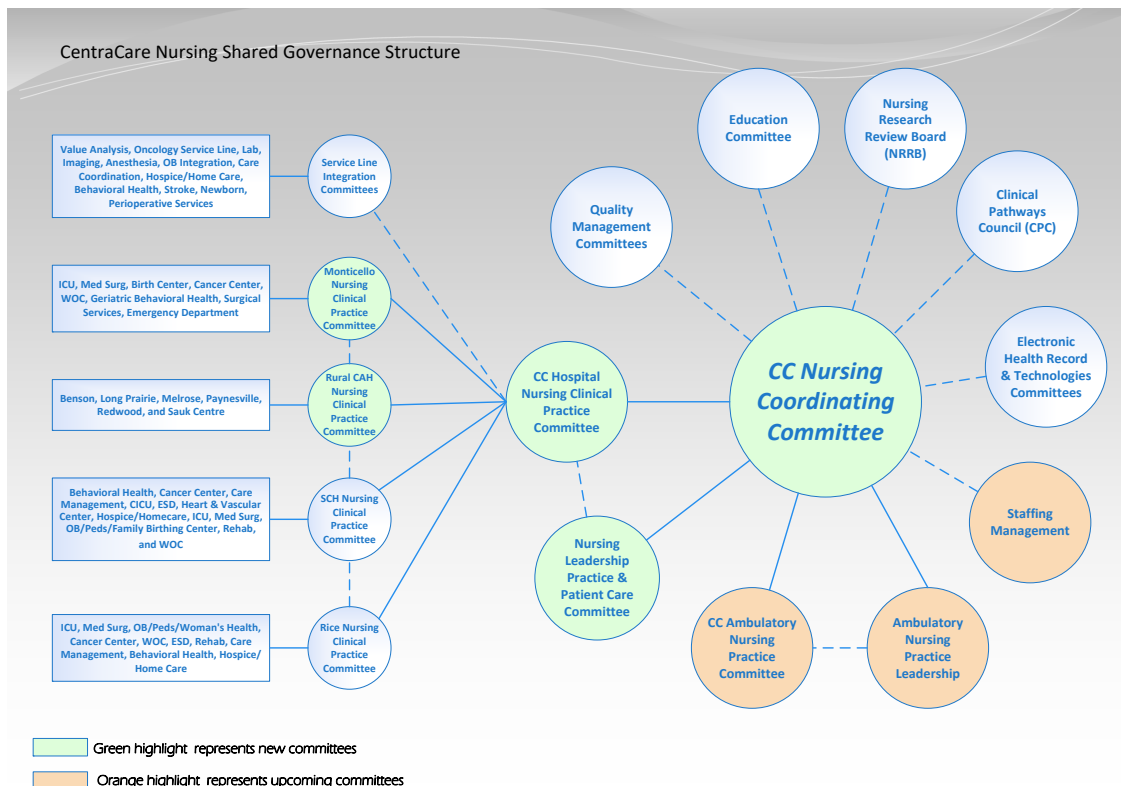
In March 2023, a system nursing shared governance (SG) committee structure was implemented. The new system structure was built upon CentraCare – St. Cloud Hospital's SG foundation. Shared governance committees engage and empower nurses to collaborate with interdisciplinary stakeholders across the system and to implement and sustain best practices and standards of care which encompasses our purpose and aligns with nursing and organizational strategic priorities.

Previously established, newly formed and future committees enable nurses and interdisciplinary team members to actively participate in:

- Alignment of policies, procedures and practices related to patient care and nursing practice across the system as appropriate.
- Facilitation of effective and appropriate communication and decision-making regarding nursing care delivery systems, nursing practice and nursing scope and standards.
- Review and discussions of practice changes related to performance improvement, education, research and evidence-based practice project opportunities.
- A coordinated approach to address clinical patient care issues.
- Collaborative working relationships amongst nursing, interdisciplinary team members and leadership to improve patient outcomes.

Evidence has demonstrated nurse participation in nursing SG committees:

- Fosters growth and development of a professional nursing practice environment.
- Empower staff nurses to use clinical knowledge and expertise to impact decisions regarding professional practice.



Optimization of New Technology Through Shared Governance

In March 2022, CentraCare – St. Cloud Hospital transitioned to smart pump technology for intravenous medication administration. Post implementation, nurses reported multiple air in line and downstream occlusion alarms, medication library opportunities and administration set failures. A super-user group, including clinical nurses, educators, pharmacy and leaders convened to evaluate opportunities. The team decided to partner with manufacturer representatives to identify best practices, mitigate alarms, monitor tubing failures and create a “boots on the ground” approach. Tests of change were initiated including use of alternative intravenous administration sets and medication libraries were updated. Tubing failure evaluations resulted in changes to manufacturer quality control processes which resulted in fewer administration set failures. Efforts to mitigate interruption alarms continue.

Safe Patient Transportation

Greta Titus, BSN, RN, Core Charge Nurse, Telemetry Unit, Janelle Maciej, BSN, RN, CV-BC, Telemetry Supervisor, and Teresa Jahn, APRN, CCNS, CCRN, Clinical Nurse Specialist Heart and Vascular Center, completed a literature review to determine non-critical safe intra-hospital transport practices. Critical care patient transport practice guidelines exist, however; limited evidence guides practice for adult non-critical patients. The team decided to develop an intra-hospital transport safety checklist for nurses to systematically assess specific patient parameters before transport. If safety concerns are identified, a huddle is warranted to determine if patient transport can occur with an unlicensed staff or requires a nurse. In some cases, it was identified procedures should be completed at the bedside. Since developing the nurse driven pre-transport checklist, safety concerns have been identified and appropriate interventions were performed resulting in no adverse events.

Intra-Hospital Transportation Safety Checklist (non-critical care)
Patients only include those going to ultrasound for a thoracentesis, paracentesis or liver biopsy

Patient Label: _____
Date: _____

RN assigned to patient is: _____
Procedure patient is having: _____

- Code Status: _____ (i.e. room air, nasal cannula, etc.)
- Oxygen source: _____
Oxygen flow rate: _____ (Liters)
- Does the patient have increased oxygen needs within the past 12 hours?
 Yes
 No
- Does the patient require continuous pulse oximetry saturation monitoring?
 Yes
 No
- Does the patient have current behavioral issues of both agitated **AND/OR** confused? (i.e. is the patient pulling at lines and might pull off O2 in route to imaging?)
 Yes
 No
- Does the patient meet an **abnormal** systolic blood pressure criteria? *Normal SBP 90-150 mm Hg*
 Yes
 No
- Does the patient meet an **abnormal** respiratory rate? *Normal 8-30 breaths/min*
 Yes
 No
- Does the patient meet an **abnormal** pulse rate? *Normal 50-120 bpm*
 Yes
 No

If RN answered YES to any of the above questions, then a huddle is warranted before the patient is transferred to ultrasound. *As of now*, a huddle includes: RN with Resource RN *and/or* Charge RN to determine patient intra-hospital transportation safety. Consider calling Ultrasound at ext. 54282. If necessary, resource RN will transport the patient with a transporter while remaining on the cardiac monitor and continuous pulse oximeter saturations if necessary (Zoll).
Note: Teresa Jahn is available with questions ext. 55254.

If RN answered all NO to the above questions OR if deemed okay to transport without a RN, assure the same level of monitoring that is provided on the patient's current unit.

Remember to **always** keep cardiac heart monitor on for intra-hospital transportation and if a patient is requiring oxygen needs, then verify a full oxygen tank is brought with the patient on a transport cart.

- Did the Imaging department give a report prior to sending the patient back to the home unit?
 Yes
 No

*** Please return completed checklist to Charge Nurse

Ensuring Patients are Safe: Implementation of a Human Trafficking Protocol

It was identified through a gap analysis, that CentraCare – St. Cloud Hospital lacked a formal screening process to identify patients at risk of Human Trafficking. Diane Pelant, MSN, RN, CCRN, and Shannon Krumvieda, MSN, RN, CEN, convened a multidisciplinary Human Trafficking Committee which included healthcare providers, community members, law enforcement and advocacy. Research and networking allowed committee members to evaluate community risk and evidence-based screening tools. Using shared governance structures, a screening process and protocol was implemented ensuring patients are screened upon arrival to the Emergency Trauma Center and inpatient units. The work resulted in improved awareness, coordination of care and mandatory reporting. The committee continues to monitor data and identify areas of opportunity.



Expansion of Accreditation and Regulatory Team

Historically, CentraCare – St. Cloud Hospital federal and state regulatory requirements were overseen by Julie Grams, MBA, CJCP, with a reliance on hospital leaders to maintain a state of continual survey readiness. As CentraCare continued to expand services across central and southwestern Minnesota, and facilities continued to explore additional accreditations, additional workforce was necessary.

Over the past two fiscal years, the Accreditation and Regulatory team has expanded from a team of one to three, bringing additional knowledge and expertise. Emily Smith, MHA, CPHQ, and Sondra Tschumperlin, MSN, RN, CPN have joined the team as Regulatory & Accreditation Program Managers.

As Julie added on to the Accreditation & Regulatory team, they began their working relationship with mutual respect, open communication and discussion. Over time, the team learned everyone's areas of expertise and relied on each other to analyze regulation and interpret how regulation may affect practice at the various CentraCare sites. Julie and Emily share a vast knowledge and history of regulatory experience, and adding Sondra as an RN to the team provides additional clinical knowledge, guidance and perspective. The Accreditation & Regulatory team dynamics have resulted in value-added efficiency, innovation and a cohesive leadership team. The team appreciates each other's role and specific expertise, which fosters an investment building on personal and professional growth.

Implementation of St. Cloud Hospital Daily Safety Check In

As part of our Safer Together commitment to becoming a high reliability organization (HRO), CentraCare began implementation of a tiered safety huddle process beginning with Daily Safety Check Ins (DSCI) at St. Cloud Hospital (SCH) on June 7, 2022. Since then, DSCIs have been implemented at all nine CentraCare hospitals rolling up to system level DSCI.

In one year since implementation, SCH DSCIs had 250 critical safety issues identified, 248 safety issues fixed and closed, 39.4% being closed within one day, and an average of 4.8 days to resolve others.

One example of an organizational change from DSCI included a collaborative and interdisciplinary effort to care for a complex surgical patient. During the pre-anesthesia triage phone call, a patient became verbally aggressive and made threats towards staff and organization. The situation was immediately reported, through established chain of command infrastructures. The event was reported at SCH DSCI and an action item was to form a team to create a safe plan which included the perioperative and inpatient nursing directors, perioperative providers and primary care providers, Behavioral Health, Security, Legal, Care Management, Workplace Violence, and Quality Resources.

The team extensively reviewed the patient's chart and determined further resources were required since there was extensive verbal violence and threats. Due to the lack of capacity to give informed consent, emergency guardianship was obtained. A Unique Treatment Plan was developed by the interdisciplinary team in collaboration with the patient and guardian. Once finalized and agreed upon by all stakeholders, the patient was scheduled for surgery. There were zero patient or staff injuries or verbal threats during the patient's hospitalization.

This is just one example of how we have been safe and reliable due to implementing DSCI. Thank you to all the teams who have made this new process effective – and remain committed to our Safer Together journey.

1 Year of St. Cloud Hospital Daily Safety Check-Ins (DSCIs)



Safer Together

Data from June 7, 2022, to June 7, 2023

Reflections from Margo Binsfeld, Director, ETC

Experiences of a Nursing Leader New to CentraCare – St. Cloud Hospital

After working in the Minnesota metro for 20 years, as both a registered nurse and nurse leader, I wanted to share some of my insights in my last 12 months as a nursing leader at CentraCare – St. Cloud Hospital. I have been nothing short of impressed with the commitment CentraCare has to becoming a high reliability organization (HRO) . From the commitment of the front-line staff and empowerment to “speak up” by bringing safety concerns forward, to responsiveness and collaboration across departments, to engagement of leadership teams to resolve safety concerns at the daily safety check in; it has been inspiring. I see countless examples each day of how interdisciplinary teams function and work together to address safety concerns in a timely manner with an unwavering commitment to develop resolutions and enhance patient care. There is a constant focus on how reporting can be more streamlined for frontline team members, increasing and improving collaboration between departments, and communication efforts to ensure frontline teams are hearing how issues they bring forward have been resolved. I can confidently say, CentraCare demonstrates what a HRO should aspire to be.

In addition to our commitment to becoming a HRO, I would like to share my observations regarding the culture at CentraCare. From the time I started my journey here, I have felt an immense sense of community. It became clear to me, in a very short time, there is something special about CentraCare, and the commitment our teams have serving the community in which we live. When I walk down the halls of the hospital, I am greeted with smiles, hellos and an overall feeling of employees who are proud of what they do and where they work. I often share this observation with my peers in hopes I can express and articulate how rare this can be to find, and how fortunate we are to have such an amazing, welcoming and community centered culture. The employees at CentraCare honor our commitment to listen then serve, and then guide and heal every day. I am proud to be part of such a unique and amazing organization.



Margo Binsfeld, MBA, BSN, RN

Screening for Dysphagia While Using High Flow Oxygen

During the pandemic, an interdisciplinary team collaborated to ensure patients requiring heated high-flow oxygen therapy (HHFOT) were able to safely swallow. Recognizing there was limited research on HHFOT and swallowing, the team conducted a pilot, which required patients on HHFOT to have a bedside swallow evaluation. In August 2022, the team reconvened with Information Systems and Technology to review policies and the electronic health record. In October 2022, the use of HHFOT was added as an indication for completion of a bedside swallow evaluation prior to advancing a diet.



Simulation Helps Everyone

CentraCare's Simulation Center, located at St. Cloud Hospital, is dedicated to being a leader in simulation-based education and training through a positive learning environment. Over the past year, Simulation Center leaders and staff made enhancements, facilitated through collaborative interdisciplinary relationships, to an already robust program. In addition to simulation task training being available 24/7, formalized education simulation is available. For example, mock code blue simulations allow interdisciplinary teams, including nurses, providers, pharmacists, nursing assistants, chaplains and respiratory therapists, to practice emergency response protocols and gain confidence in a psychologically safe environment. Simulation has become part of regular and annual educational requirements.

Michaela Herbst-Bialke, BSN, RN, CCRN, James Tollefson, MSN, RN, CHSE, Jenelle Overgaard, BSN, RN, CCRN

Using Data to Decrease Blood Product Waste in Surgery

Blood waste can be a costly issue for healthcare organizations. Surgery leaders noted a trend in blood waste events. Working together with Transfusion Services, cases were reviewed and it discovered most waste came from cardiac procedure blood cooler storage practices. A cost-benefit analysis was completed and determined benefits outweighed the cost for purchasing new blood coolers. To keep blood products at the correct temperature for longer periods of time, two coolers were purchased, one for cardiac procedures and another for Massive Transfusion Protocol. This change has resulted in an 80% reduction in blood waste.

Working Relationships and the RSV Surge Preparations

CentraCare formed a interdisciplinary team to brainstorm a response to the 2022/2023 Respiratory Syncytial Virus (RSV) surge. The team, including nurses, educators, respiratory therapy, providers, pharmacy, Information Systems and Technology and leadership, met weekly during RSV season.

The team developed:

- Heated high flow nasal cannula practice guidelines for all CentraCare sites.
- A pediatric critical care surge plan, which expanded capacity into adult critical care.
- An emergent staffing plan, which included educating staff with previous pediatric experience.
- Telehealth options for all CentraCare sites.

Additionally, CentraCare – St. Cloud Hospital was one of five hospitals that applied for the Federal Strike Team to assist and participated in a statewide response. Fortunately, the RSV Pediatric Emergency Plan was not activated, however, the collaboration resulted in a future response plan ready for activation.

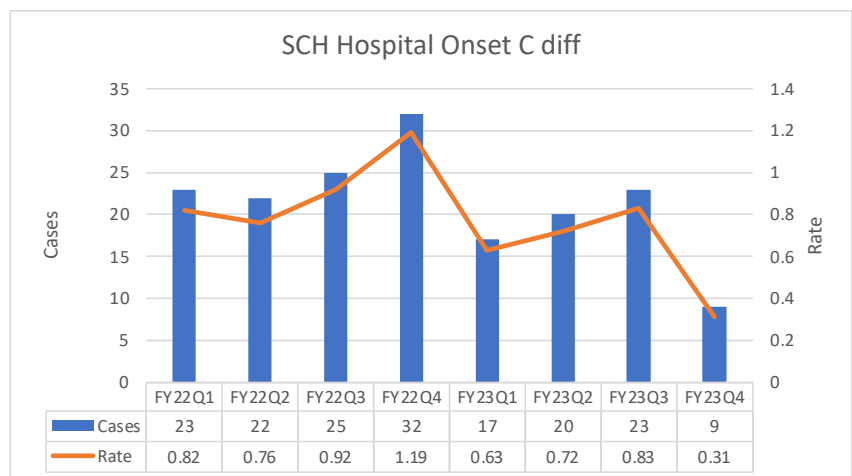
Working Together to Improve Clostridioides difficile Protocol and Testing

In fiscal year 2023, CentraCare – St. Cloud Hospital was challenged to reduce the impact of Clostridioides difficile (C. diff). An interdisciplinary improvement team, led by the Dr. George Morris, Performance Excellence Improvement Physician Section Director, and Infection Prevention Control registered nurses, included members from inpatient nursing, providers, Information Systems and Technology, Laboratory and Pharmacy reviewed current practices and evidence-based guidelines.

Through collaboration several improvements were made:

- Refinement of eligible unformed stools.
- Detailed refinements of C. diff protocol electronic health record best practice alerts (BPA).
- Implementation of a 2-step testing strategy to better identify infectiousness of symptomatic patients, and promote appropriate antimicrobial treatment.
- Prior to testing, hospitalist advanced practice providers (APPs) review for necessity.

These efforts have resulted in a decreased C. diff burden within the facility. Next steps include exploring provider-driven testing and enterprise-wide practices for potential standardization, incorporating outcomes as a learning system through accountability and sustaining practice changes.



Professional Development

NURSING POSTER PRESENTATIONS

Bong, T. (2023). *Systemwide Trauma Service Line Integration*. Poster presented at Trauma Center Association of America.

Brower, C. (2023). *Time to Treatment: Stroke Therapy Accelerates*. Poster presented at St. Cloud Hospital Nurses Week.

Christie, D. (2023). *Drug Diversion Prevention Education for the Anesthesia Provider Plus One*. Poster presented at St. Cloud Hospital Nurses Week.

Gamble, M. (2023). *ICU CAUTI Incidence Reduction*. Poster presented at St. Cloud Hospital Nurses Week.

Gullette, L., Winkelman, B. (2023). *Strengthening New Nurses to Thrive Through the First Year in an Unfamiliar World Filled with Chaos, Confusion and Fear*. Poster presented at Practice Transitions Accreditation Program (PTAP) Conference.

Jahn, T., Maciej, J., Titus, G. (2023). *Safe Intra-Hospital Transport of Patients on Non-Critical Care Units*. Poster presented at St. Cloud Hospital Nurses Week.

Jahn, T., Michira, E., Plante, E. (2023). *Clinical Nurse Specialists: A Rare Breed*. Poster presented at St. Cloud Hospital Nurses Week.

Jahn, T., Plante, E. (2023). *Recognition of Nonconclusive Seizures in Patients After Cardiac Arrest Using*. Poster presented at St. Cloud Hospital Nurses Week.

Janson, R., Meyer, M. (2023). *Sterile Tubing Changes to Prevent CLABSIs in the NICU*. Poster presented at St. Cloud Hospital Nurses Week.

Lehn, M., Backes, A. (2023). *Transitions to Normal Saline ONLY for CVADs*. Poster presented at St. Cloud Hospital Nurses Week.

Maciej, J. (2023). *Promotion of National Certification in Telemetry*. Poster presented at St. Cloud Hospital Nurses Week.

Moscho, A. (2023). *From Silos to Collaborative Working Relationships with EMS and ED*. Poster presented at St. Cloud Hospital Nurses Week.

Overgaard, J. (2023). *Heated High Flow Oxygen Therapy Management of Respiratory, Swallowing/Dysphagia and Nutrition Needs*. Poster presented at St. Cloud Hospital Nurses Week.

Pflueger, N. (2023). *Stroke Education Compliance Improvement*. Poster presented at St. Cloud Hospital Nurses Week.

Plante, E., Schmidt, C. (2023). *Pupillometry*. Poster presented at St. Cloud Hospital Nurses Week.

Salaski, J., Ophoven, K. (2023). *Dynamic Bronchoscopy for Excessive Dynamic Airway Collapse*. Poster presented at St. Cloud Hospital Nurses Week.

Tindal, J. (2023). *SCH ICU Expanding PICS Throughout CentraCare*. Poster presented at St. Cloud Hospital Nurses Week.

Tindal, J. (2023). *What I Need: Self Care at the Unit Level*. Poster presented at St. Cloud Hospital Nurses Week.

Winkelman, B. (2023). *Accelerated Onboarding for Licensed Personnel when Preceptors are Limited*. Poster presented at Association of Nurses in Professional Development Convention.

Winkelman, B. (2023). *Accelerated Onboarding for Unlicensed Personnel When Preceptors are Limited*. Poster presented at St. Cloud Hospital Nurses Week.

NURSING PODIUM PRESENTATIONS:

Dumoncaux, P., Kiffmeyer, E. (2022). *Preventing the Spread of Emerging Pathogens with Innovative Use of an Electronic Medical Record*. Podium Presentation at Epic UGM.

Kraft, W., Burris, J. (2023). *Onboarding and Sustaining a Skin Champion Model*. Podium presentation at Minnesota Hospital Association Inaugural Workforce Innovation and Connecting for Quality Conference.

Moengen, D. (2022). *Developing a Glucose Protocol*. Podium presentation at Wisconsin Perianesthesia Nurses Society.

Moengen, D. (2022). *Driving a Culture of Safety & Perianesthesia Blood Glucose Management*. Podium presentation at Michigan Association of Perianesthesia Nurses Conference.

Moengen, D. (2022). *Perianesthesia Nurses Can Drive a Culture of Safety*. Podium presentation at Illinois Society of Perianesthesia Nurses Conference.

Moengen, D., Onyiah, C. (2023). *Functional Medicine*. Podium presentation at Minnesota Dakota Society of Perianesthesia Nurses.

Schulz, K. (2023). *Millennials and Zennials: Game Changing Generations*. Podium presentation at Minnesota Dakota Society of Perianesthesia Nurses.

Schulz, K., Stang, A. (2023). *Redesigning Orientation to NPD: The Path to Clear Role Development*. Podium presentation at Association of Nurses in Professional Development Convention.

PUBLICATIONS:

DeVos, C., National Taskforce (2023). *Nurse Staffing Task Force Imperatives, Recommendations, and Actions*. American Nurses Association & American Association of Critical-Care Nurses Featured Website Resources.

Linda Chmielewski Scholarship Awards

Erin Jones, RN and Melissa George, BSN, RN, were the recipients of the Linda Chmielewski Scholarship, a former St. Cloud Hospital Chief Nursing Officer.

Erin is a registered nurse (RN) in the Emergency Trauma Center. Erin started her career in health care at fifteen years old as a certified nursing assistant, followed by earning her LPN and RN degrees. Erin is enrolled at Western Governors University in the RN to Master of Science Nurse Educator program. Erin is known as a preceptor, mentor and is involved in department improvement and employee engagement committees. Erin has a strong passion for nursing excellence, as evidenced by her desire to advance her degree in education.

Melissa, a RN in the Cardiac Intensive Care Unit (CICU), is enrolled at the College of Saint Scholastica in the Doctor in Nursing Practice Family Nurse Practitioner program. Melissa was hired in CICU as a new graduate RN and through her leadership and clinical expertise has become a Core Charge Nurse. Melissa is known for providing compassionate care and is involved in unit-based committees promoting others to learn and grow. Melissa is enthusiastic to complete her professional goal of becoming a nursing practitioner to further serve patients.



Melissa George, BSN, RN



(Left to Right) Melissa Stowe, MSN, RN, CNOR, Katie Schulz, DNP, MBA, RN, NPD-BC, Erin Jones, RN, Melissa Fradette, BSN, RN, CCRN-K, & Jennifer Burris, MA, APRN, CNS

The Rock Dedication

On January 27, 2023, three years to the day after CentraCare launched its COVID Incident Command Unit, CentraCare St Cloud Hospital staff were honored and recognized for their commitment throughout the COVID-19 pandemic. St. Cloud City officials presented the Rock-On Award and monument to express appreciation and gratitude to all frontline workers. The monument is located adjacent to the hospital, at Hester Park. Frontline workers, Amber Martin, BSN, RN, CCRN, CICU Educator, Lisa Kilgard BSN, RN-BC, Medical Unit One RN, and Jacob Lyons, MD, Intensivist Specialty Director in Critical Care Medicine, shared their perspectives and experiences.

“I am amazed, and humbled and appreciative for the work done by my colleagues in the hospital and for the support we receive from our community. As the years pass and the harsh edges of the pandemic wear down in our memories, I hope we can all look back and be proud of the work we did in this tremendously difficult situation.”

- Jacob Lyons, MD, Intensivist Specialty Director in Critical Care Medicine



“I want to celebrate our ability to be resilient. We are resilient with grace and compassion, for ourselves, for our patients and for each other. I want to celebrate all of us, those who moved on, those of us who stayed, those of us who stepped up and those of us who still do.”

- Amber Martin, BSN, RN, CCRN Cardiac Intensive Care Unit Educator

“When we were able to discharge a patient back home to their family and they looked at us, sometimes with tears in their eyes, and said ‘thank you’ that meant the most... the support we received from other units, administration, patients, and families will never be forgotten and we are proud and honored to say we did our part.”

- Lisa Kilgard, BSN, RN-BC
Medical Unit One Charge Support



Nursing Makes a Difference

Association of periOperative Registered Nurses: Outstanding Volunteer Leadership Individual Achievement Award

“The shadows that we cast through volunteering are important – improving the quality of life: mind, body, and soul”



Larry Asplin MSN, RN, CSSM(e), CNOR(e)

In Spring of 2023, Larry Asplin, MSN, RN, CSSM(e), CNOR(e), former Director of Surgery, received the Association of periOperative Registered Nurses (AORN) Outstanding Volunteer Leadership Individual Achievement Award. Asplin believes volunteerism is important and has an inherent need to serve others with the training and talents God has provided him. Asplin is active within his church and shares his perioperative nursing skills with parishioners by providing surgery education and completing home dressing changes, along with transportation to church and provider appointments. Additionally, Asplin serves across the country by participation in surgical mission trips to Guatemala.

Throughout his career, Asplin has been involved with AORN both nationally and locally, as a founding member of the Minnesota AORN Heartland Chapter 2403. As Chapter President, he successfully chaired a merger with a Minnesota chapter contemplating dissolution. Asplin has presented at AORN Expos, Multi-Specialty conferences, and for the American Society of PeriAnesthesia Nurses. In addition, he has been a perioperative textbook reviewer and published AORN blogs. Currently, he serves as President of the AORN Foundation.

While serving as CentraCare – St. Cloud Hospital's Director of Surgery, Asplin opened operating rooms to the community through Surgery Open House events. For over 18 years, annually over 600 community members toured operating rooms highlighting a variety of perioperative careers.

Being the Best Nurse Starts with Caring for Yourself

In the Spring of 2022, following the COVID-19 pandemic, Jessica Tindal, BSN, RN, CCRN, ICU Core Charge Nurse, recognized nurses needed self-care and started a home-grown program called "What I Need." The program encourages staff members to create a monthly individualized self-care goal. Inspirational messages can be posted on a bulletin board or staff can take a message from the board and share with others. The board is routinely updated, and staff participation is recognized. Self-care has been incorporated into performance appraisals and new hire orientation.

Beacon Award

The Beacon Award for Excellence from the American Association of Critical Care Nurses (AACN), a significant milestone on the path to exceptional patient care and healthy work environments, recognizes unit caregivers who successfully improve patient outcomes and align practices with AACN's six Healthy Work Environment Standards. Recipients of a Beacon Award demonstrate staff-driven excellence in sustained unit performance and improved patient outcomes that exceed national benchmarks. This award recognizes the contributions of all members of the multidisciplinary team working toward a common goal of the best outcomes for our patients.



- Neonatal Intensive Care Unit (NICU) was awarded the gold-level.
- Cardiac Intensive Care Unit (CICU) was awarded the silver-level.

Units achieving this three-year, three-level award with gold, silver, or bronze designations, meet national criteria consistent with Magnet Recognition, the Malcolm Baldrige National Quality Award and the National Quality Healthcare Award. This award recognizes these units for working together to meet and exceed the high standards set forth by AACN, whose consistent and systematic approach to evidence-based practice optimizes patient outcomes.



Organizational Awards

Get With the Guidelines - Gold (2022). American Heart Association (AHA). Resuscitation. CentraCare - St. Cloud Hospital - Intensive Care Unit.

“Healthcare Equality Leader” and “Healthcare Equality Top Performer” (2022). Healthcare Equality Index (HEI). The Healthcare Equality Index (HEI) is the nation’s foremost benchmarking survey of healthcare facilities on policies and practices dedicated to equity for LGBTQIA+ community members. The HEI rates healthcare facilities on a scale of 1 to 100 – St. Cloud Hospital received a score of 95 out of 100. CentraCare - St. Cloud Hospital.

MDH - Gold Level (2022). Minnesota Department of Health (MDH). Antimicrobial Stewardship Program. Multiple, including CentraCare - St. Cloud Hospital.

Best Maternity Hospitals (2022). Newsweek. CentraCare - St. Cloud Hospital.

World’s Best Hospitals (2022). Newsweek. #54 in the United States. #2 in Minnesota. CentraCare - St. Cloud Hospital.

America’s Best Maternity (2022). Newsweek. Four-ribbon ranking. CentraCare - St. Cloud Hospital.

Top 50 in the Nation (2022). US News & World Report. Cardiology & Heart Surgery (#30 of 800), Pulmonology & Lung Surgery (#44 of 1700). CentraCare - St. Cloud Hospital.

Salute to Excellence (2022). Ucare. CentraCare.

Get with the Guidelines - Gold Plus (2023). American Heart Association (AHA). Target - Stroke Honor Roll Elite Plus, Advanced Therapy, Target - Type 2 Diabetes Honor Roll. CentraCare - St. Cloud Hospital.

EMS Quality Improvement Award (2023). Minnesota Department of Health (MDH). CentraCare - St. Cloud Hospital.

Platinum Sustainability Award (2023). Innovative Health. Accomplishments in addressing sustainability. CentraCare - Heart & Vascular Center: Electrophysiology.

Employee Awards



Volunteer Leadership Individual Achievement Award (2023) Larry Asplin, MSN, RN, CSSMC(e), CNOR (e), AORN National.



MDH QI-Extraordinary Results Award (2023) Angela Moscho, MSN, RN, SCRNP, Minnesota Department of Health (MDH).



FOR EXTRAORDINARY NURSES

**HONORING NURSES INTERNATIONALLY
IN MEMORY OF J. PATRICK BARNES**

The DAISY Award was established in 2000 by the Barnes Family to recognize nursing clinical skills, leadership and compassionate patient care as a means of honoring their son, Patrick, who died at the age of 33 from idiopathic thrombocytopenia purpura (ITP). The DAISY Award was created to express the profound gratitude of the Barnes family for the care nurses provide to patients and family every day.

During May 2022, CentraCare – St. Cloud Hospital celebrated the annual DAISY Award recognizing nominees and DAISY Award winners in their respective departments. CentraCare – St. Cloud Hospital established nomination and selection criteria in alignment with organizational core values and purpose. Nurses who exemplify these criteria are nominated by patients, families, peers, physicians and colleagues. DAISY Award winners receive a unique, hand carved, “Healer’s Touch” statue, created by artisans from Zimbabwe that represent nursing’s meaningful work.

2023 DAISY Leader Award Winners

Dena Walz, MSN, RN, CCRN

Katherine Schulz, DNP, MBA, RN, NPD-BC

Jessica Reed, BSN, RN-BC

2023 DAISY Award Winners

Peggy Dahl, RN

Sara Gerads, BSN, RN, CEN

Lillian Peschl, BSN, RN

Cameron Johnson, BSN, RN

Joseph Matthews, BSN, RN

Emily Obermiller, BSN, RN, CMSRN

Kelsey Yasgar, BSN, RN

Nicole Johannes, BSN, RN

Kelly Knudson, RN, VA-BC

Jacqueline Tavale, BSN, RN

Cinda Foley, BSN, RN, CAPA

Stephanie Lamser, BSN, RN

Melissa Jorschumb, BSN, RN

Brittney Gobel, BSN, RN

Melinda Hellerman, RN

Jessica Mackendanz-Johnson, BSN, RN

Recognizing Nurse Leaders through the DAISY Foundation

In 2022, the DAISY Nurse Leader Award was implemented to recognize licensed practical, registered and advanced practice nurses who work in leadership or consultative roles directly influencing clinical nurses and their practice. Nurses eligible for the DAISY Nurse Leader award include Vice Presidents, Executive/Senior Directors, Directors, Supervisors, Educators, Nurse Clinicians, Performance Improvement Consultants, Quality Resources Nurses and Informatics Nurses. Nurses are nominated by patients, families, colleagues and providers. Award winners role model: compassion, exemplary professional practice and behaviors perceived as extraordinary; create an environment that fosters trust, compassion, mutual respect, continued professional development and ethical behavior; motivates staff with a shared vision to achieve better outcomes; encourages critical thinking and problem solving; and promotes nursing within the organization, community and profession. This award, along with the DAISY Award, which recognizes bedside nurses for their care, compassion and skill, are supported by The DAISY Foundation. The two DAISY awards were created by a family following their hospital experience after a long hospitalization and death of their loved one, to honor nurses.

Nursing Membership on National/State Offices

American Association of Critical Care Nurses (ACCN)

Jessica Thoma, MSN, RN, NPD-BC, Beacon Reviewer
2022 – 2023.

American Association of Critical Care Nurses (ACCN)

Melissa Fradette, MSN, RN, CCRN, NTI Planning
Committee- Chair-elect 2022 – 2023.

Association of periOperative Registered Nurses (AORN)

Larry Asplin, MSN, RN, CSSM(e), CNOR(e), AORN
Foundation Board of Trustees President 2021 – 2023.

Association for Nursing Professional Development

(ANPD) Katie Schulz, DNP, MBA, RN, NPD-BC, ANPD
Convention Planning Committee 2022 – 2024.

American Association of Neuroscience Nursing (AANN)

Chandra Brower, MSN, RN, SCRN, Education Provider
Committee 2021 – 2023.

American Association of Critical Care Nurses (ACCN)

Melissa Fradette, MA, APRN, CCRN, CCNS, NTI Planning
Committee- Chair 2023 – 2024.

American Association of Critical Care Nurses

Kirsten Skillings, MA, APRN, CCRN, CCNS National Board of
Directors 2023 – 2026.

Vizient

Kay Greenlee, MSN, RN, CNS, CPHQ (retired), Upper
Midwest Clinical Steering Committee Chair 2022 – 2024.

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