



*CELEBRATING
EXCELLENCE.*

Henry Ford Allegiance Health

2018 NURSING ANNUAL REPORT



**HENRY FORD
ALLEGIANCE HEALTH**

An Inside Look at Henry Ford Allegiance (HFAH)

TRANSFORMATIONAL LEADERSHIP

A message from the Vice President & Chief Nursing Officer	3
Creating a Healing Environment.....	4

STRUCTURAL EMPOWERMENT

HFAH Shared Governance	8
• Shared Governance Coordinating Council Chair & Co-Chair	
• Annual Shared Governance Day 2018	
Commitment to Professional Development	11
• Professional Certification Achievements	
• Advanced Nursing Degrees	
• Professional Advancement Ladder	
Teaching and Role Development.....	14
• Nursing Residency Program	
• Transitioning Experienced Registered Nurses (TERN) Program	
• Preceptor Program	
• Educational Needs Assessment and Continuing Education	
Nurse and Clinical Staff Recognition Programs	16
• DAISY Leadership Award	
• Honey Bee Program	
• Annual Nursing Excellence Awards	
• Annual Nurse and Clinical Staff Program	
Commitment to Community Involvement.....	18
• Local Community Health Care Initiatives	
• Local and National Nursing Conferences	
• Healthy Lifestyle Challenge Among the Hematology Oncology Nursing Team	
• Nurses Advance Trauma Care	

EXEMPLARY PROFESSIONAL PRACTICE

HFAH Nursing Professional Practice Model..... 24

- Nurse Engagement, Retention and Satisfaction
- Internal Resources to Improve Clinical Practice
- Commitment to Patient Family Centered Care
- Collaborative Practice and Care Coordination

NEW KNOWLEDGE, INNOVATIONS AND IMPROVEMENTS

Nursing Research at HFAH 32

Quality Improvement Projects 35

Empirical Quality Outcomes

Prevention of Hospital Acquired Infections 38

Reducing Patient Falls 41

Left without Being Seen Rates 41

Committment to Patient Centered Care 42

TRANSFORMATIONAL LEADERSHIP

The Division of Nursing at Henry Ford Allegiance Health strives to create a collegial environment where collaborative practice is valued and encouraged for all levels of nursing. Our mission, vision, values and philosophy are at the heart of all we do every day.



A message from the Vice President & Chief Nursing Officer

Dear Nurses,

It is my pleasure to present to you the 2019 Henry Ford Allegiance Nursing Annual Report. This report is a celebration of our successes as a nursing organization, and represents nurses in all roles and settings throughout Henry Ford Allegiance Health (HFAH).

When reflecting on this past year, we can take great satisfaction in many successes. We can be proud of the opening of the West Tower and its influence on clinical transformation for our patients, community and colleagues. Leading up to this significant achievement, we demonstrated teamwork and collaboration, and remained committed to our pursuit of clinical excellence. As a result, we received national recognition with a grade "A" for quality and safety in the 2018 Leapfrog Hospital Safety Report. We were among 32 of 81 reporting hospitals in Michigan to receive this rating. On top of that, we maintained our Four-Star rating from the Centers for Medicare and Medicaid Services.

Throughout the year, we made great strides not only from a quality and outcomes perspective, but also in creating a rewarding practice environment, which makes HFAH a desirable place to work. Month after month, I heard so many wonderful, touching stories from our patients, families and staff who wanted to recognize the outstanding care experiences you provided. Nurses received more than 600 DAISY recognitions, and our supportive clinical care team members received close to 300 Honey Bee nominations. We delivered on our "Rely on Us" promise by making a significant reduction in hospital acquired infections and continuing our work to be a highly reliable organization. Every exceptional year end result makes it evident we lived our values and raised the bar in nursing care delivery through new knowledge, innovation and evidence driven care.

All of these accomplishments were made possible thanks to your commitment to our collective mission, vision and purpose. As you reflect on your own individual purpose, I hope you feel fulfilled as a Henry Ford Allegiance Health nurse. Please take time to celebrate the positive impact of your contributions, because every step forward or milestone met, regardless of size, matters.

Looking ahead, our rich history can energize us to refine, reflect and stretch ourselves to achieve even higher levels of clinical excellence in the future.

What an amazing year with an extraordinary team! Thank you for all you do!



Sincerely,

A handwritten signature in black ink that reads "Wendy Boersma". The signature is fluid and cursive.

Wendy Boersma, DNP, RN, NEA-BC

Vice President and Chief Nursing Officer

Creating a Healing Environment

August 23, 2018, was a memorable day for Henry Ford Allegiance Health, filled with festivities in honor of our 100-Year Anniversary and a new patient tower grand opening. The celebrations kicked off in the afternoon when HFAH staff were invited to take a first look at the newly finished patient tower. Later that evening, more than 320 community leaders gathered for the tower's grand opening and ribbon-cutting ceremony. This event featured a Henry Ford flag-raising, recognition from the Michigan Historical Society, the unveiling of a centennial sculpture by artist Ken Thompson, and two interactive art projects.

The CNO, Nurse Leaders and nurses successfully created a supportive environment to promote frequent communication between physicians, hospital leaders and clinical nurses to ensure adequate resources and efficient workflows. Nurse Directors, Sue Cross, MBA/MSN, RN, CNML, and Joielinn Nelson, MSN, RN, included many members of the healthcare team and ancillary support staff in the design, care delivery model and construction of the newest tower.

The goal was to create a more healing environment for our "Centennial" patient tower which provides patients with private rooms. On September 6, 2018, HFAH was excited to begin transferring patients from their semi-private rooms to their beautiful new patient-centered private rooms. These added rooms have allowed HFAH to provide private rooms throughout the hospital—both in the East and West towers.

The West Tower's three new floors are designated for patients who require these services:

- 4th Floor – Surgical Universal Bed
- 5th Floor – Cardiac Universal Bed
- 6th Floor – Medical Universal Bed
- 7th Floor – Neuro Universal Bed

To ensure a safe transition between towers, an Incident Command Center coordinated patient transfers while also accepting admissions from the Emergency Department, Surgical Services and the Cath Lab to the appropriate unit based on patient need. Patients from the East Tower's Medical Intensive Care Unit (ICU), Progressive Care and Cardiology arrived in their private rooms by the end of the day.

The teamwork demonstrated from across the organization throughout this entire project was nothing short of amazing. The final product was a high-tech care delivery model and environment to deliver superior care.

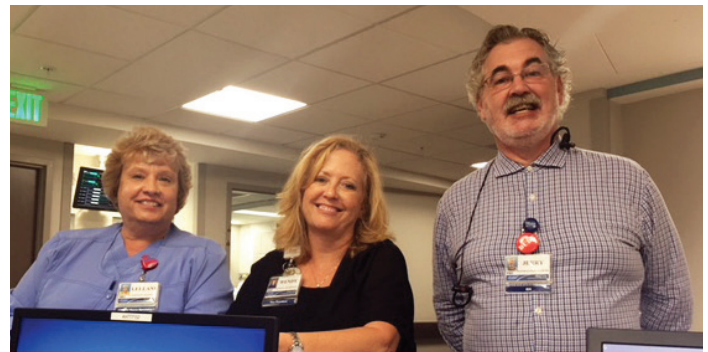
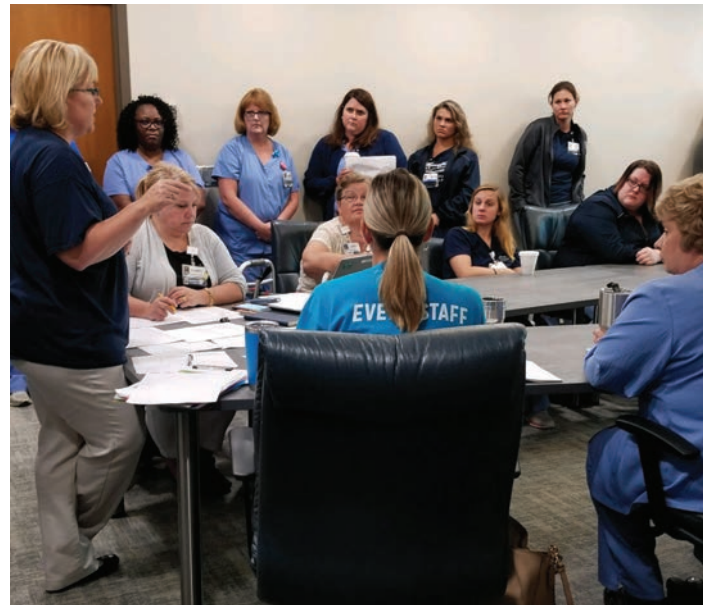
The newest tower was an organization-wide change that required transformational leadership on all nursing levels and interdisciplinary team work throughout the hospital. Other initiatives to accompany the West Tower included:

Redesign of Care Delivery Model and Staffing

Given the successes of the acuity adaptable model on the CUB/SICU and continued focus on patient and family centered care, the original design and intent of the CUB (universal bed design) was expanded to the new units in the East Tower. Each tower unit now focuses on specific patient populations to help guide patient placement. After several meetings with nursing leadership and clinical nurses from MICU, CUB/SICU, PCU and 7 South, the clinical nurses helped develop the process for bidding and redesign of staffing for the West Tower.

Sonifi Health

Sonifi Health is an interactive TV software that allows patients and families to see more information about their stay in the hospital. SONIFI Health delivers interactive patient engagement applications through TV that encourage active patient participation along the continuum of care, to promote healthy lifestyle choices and improved patient outcomes.



Rauland Nurse Call

Nurse leaders and clinical nurses had an opportunity to travel to Chicago during the planning phases in 2017 to consider the Rauland product, which provided an opportunity to work together and support shared decision making. The team approach provided nurses the ability to see the benefits of the product first hand and ask questions to offer an informed decision. This system provides many opportunities to better streamline how the needs of patients and families are met.

Team work

Supply Chain Management worked closely with nurses to review the needs for each unit. Once a mockup was completed, nurse leaders and clinical nurses determined which supplies were appropriate to meet the demands for efficient patient care.

Education

Education was developed by Henry Ford Allegiance Health University educators and Clinical Nurse Specialists for all disciplines to match the needs of each patient population in the new tower. Education included classroom learning, on-line training (CBLs), and Lunch and Learns.

STRUCTURAL EMPOWERMENT:

As a team of care professionals, we will continue to seize opportunities for professional growth and advancement in patient care delivery to exceed expectations and achieve the highest performance for the betterment of our community.





Shared Governance at HFAH

The **Shared Governance Coordinating Council (SGCC)** serves as an oversight, decision-making committee that provides guidance to the Shared Governance (SG) six system councils, approves council proposals through consensus voting and plays an integral role in promoting shared decision making. To ensure communication between Shared Governance, Unit Based Councils and nursing leadership, SG members follow a communication algorithm to support sharing of information. This ensures that all nurses receive important information in a timely manner. The SGCC Chair represents the voice of SG as a member on the Nursing Executive committee and Nursing Leadership committee.

Continuum of Care Council – This council collaborates with other disciplines to ensure quality care across the continuum. The members help promote nursing participation in community outreach events by sharing volunteer opportunities within the community and getting nurses engaged to participate.

Nursing Excellence Council – This council is instrumental in recognizing nursing excellence and professional development. The Nursing Excellence Council continues to grow the DAISY Award and Honey Bee recognition programs to recognize nurses and patient care support staff for outstanding, compassionate care. The members review the nominations of the DAISY and Honey Bee programs to select one inpatient and one outpatient honoree each month.

Professional Development Council – This council supports nursing professional development and ongoing clinical competency. The Professional Development Council provides education on the Professional Advancement Ladder (PAL) and offers open sessions to all nursing staff who are interested in applying for the PAL each year. This council was instrumental to the increased participation in the PAL program in 2018.

The council members encourage professional nursing certifications to help meet the annual target on the patient care and nursing strategic plan. The chair of the council, Jamie Veith, BSN, RN,

2018 - 2019 Chair and Co-Chair of SGCC



Erin Muller , RN

Chair of SGCC, has been employed in health care for the past 13 years, and as an RN with HFAH for 6 years.

She currently works on the 4T Surgical Universal Bed as a clinical nurse. Erin is a student at University of Michigan - Flint. Erin enjoys outdoor activities with her family, reading and gardening.

Vanessa Abi Saab , BSN, RN



Co-Chair of SGCC, has been a nurse for 7 years and works in the Emergency Department as a clinical nurse.

She obtained her BSN from Michigan State University. She enjoys teaching, and teaches Trauma Nursing Core Course (TNCC), Emergency Nursing Pediatric Course (ENPC), and the Advanced Cardiovascular Life Support (ACLS). She plans to eventually pursue a Master's in Education.

Vanessa enjoys spending time with her twin sister, as well as baking, traveling and getting to know new people.



CNOR collaborated with Surgical Services Educator Terri Foster, BSN, RN, CNOR, in 2018 to offer the Take 2 Certification program and encourage the operating room nurses to complete the Certified Nurse Operating Room (CNOR) professional certification. They increased the CNOR rates from 20% to 28%.

Professional Practice Council – the Professional Practice Council maintains standards of clinical nursing practice and patient care. The council is also instrumental in promoting and enculturating the PPM with clinical nurses, linking tactics and outcomes with the PPM. A new float survey was created by the council, with input from various UBCs, to improve interdepartmental relationships, improve workplace environment and bring forth recommendations for a great experience while floating off home units.

The members continuously collaborate with other disciplines, including Laboratory, Blood Bank, Infection Prevention, and Environmental Services to ensure safety and quality care.

Quality Council – the Quality Council monitors the nursing quality of care provided to our patients. The council distributes a nursing sensitive quality dashboard monthly, to raise awareness of the nursing indicators and foster a culture of accountability. HFAH has experienced decreased prevalence of Catheter Associated Urinary Tract Infection (CAUTI) / Central Line Associated Bloodstream Infection (CLABSI), pressure injuries, Clostridium Difficile (c-diff) infections, and serious safety events.

Research Council – The Research Council serves as a resource to assist nurses with the implementation of evidence-based practice and nursing research. Members of the Research Council completed the National Institute of Health (NIH) training in 2018 in order to be better resources for clinical nurses who are interested in nursing research. The members continuously identify opportunities for potential research studies within the hospital and encourage other nurses to become involved with the projects. Members of the Research Council are active participants in annual research events.

2018 Annual Shared Governance Day

Shared Governance Day allows SGCC to highlight and celebrate the achievements during the year. The celebration occurs in several places simultaneously to reach as many staff members as possible, given nurses are sometimes unable to leave the bedside to attend. Each of the six councils presents posters to



highlight the year's achievements. These posters were placed on display in the dining rooms with the chair and co-chair of each council present to facilitate discussion.

"Shared Governance on the Road" served as the opportunity for council members to visit all nursing units in the hospital and talk with numerous nurses during their workday. The shared governance booklets were given to nurses on the units as a summary of the discussions that took place highlighting the year's achievements.

Shared Governance 2018 achievements

- Continued momentum with Unit Based Councils.
- Implemented Unit Based Councils for the Centennial Tower.
- New float survey for all inpatient units.
- Promoted the NDNQI Registered Nurse (RN) Satisfaction Survey to improve participation rates.
- Increased PAL participation rates.
- Growth of Daisy Recognition Program.
- Hosted the Greater Lansing Community Nursing Research Day with speaker Kathleen Vollman, Fellow in Academy of Nursing, who presented on "Mentoring staff nurses in EBP and Research"
- Distributed the Nurse Sensitive Indicator Quality Dashboard to increase transparency with nursing quality indicators.
- Hosted the Annual Recognition Ceremony and Nursing Excellence Awards for nurses.
- Participated in setting the foundation for implementation of a Mentor Program for clinical nurses.
- New Patient and Family Welcome packet to standardize communication for patients upon admission.

Commitment to Professional Development

While professional and academic achievements may bring personal and professional benefits, it is important to recognize the commitment and perseverance required from those who choose this path. Nursing leadership is proud to formally recognize staff for their professional achievements during the HFAH Annual Nurse and Clinical Staff Recognition Ceremony. We take this time to celebrate nurses and say “thank you” for their pursuit of excellence in their profession.

In 2018, approximately 80 staff members were recognized for one of the following achievements during the Annual Nurse and Clinical Staff Recognition Ceremony:

- Professional Nursing Certification
- Advancement in the PAL
- Continuing education degrees (nurses and clinical staff)

Professional Nursing Certification Achievements

Henry Ford Allegiance Health is fortunate to have scholarships and assistance for our nurses who wish to complete a Professional Nursing Certification. We commend those who are newly certified and those who renewed their certification in 2018.

ACUTE CARE PEDIATRIC NURSE PRACTITIONER

Shana Schneider, MSN, RN, PNP-AC, *Special Care Nursery*

CERTIFIED EMERGENCY NURSE

Maria Nemeth, BSN, RN, CEN, *Allegiance Health University*

CERTIFIED FAMILY NURSE PRACTITIONER

Jenay Krumm, MSN, RN, FNP-C, *Labor and Delivery*

CERTIFIED HEALTHCARE AUDITOR

Chasity Keeler, RN, BA, CHA, CPC, *Revenue Integrity*

CERTIFIED MEDICAL SURGICAL REGISTERED NURSE

Amanda Bradley, BSN, RN, CMSRN, *Comprehensive Clinical Care*

Mandy Davison, BSN, RN, CMSRN, *Allegiance Health University*

Barbara Logsdon, BSN, RN, CMSRN, *6th Floor Renal/Oncology*

Deanna Nadell, MSN, RN, CMSRN, *Allegiance Health University*

Laura Thomas, BSN, RN, CMSRN, *7E Secure*

CERTIFIED NURSE MANAGER AND LEADER

Chantell Krage, BSN, RN, CNML, *6T Medical Universal Bed*

CERTIFIED NURSE OPERATING ROOM

Sherrie Combs, BSN, RN, CNOR, *Surgical Services*

Terri Dandurand, RN, CNOR, *Surgical Services*

Bridget Fisher, RN, CNOR, *Surgical Services*

Michelle Hamlin, RN, CNOR, *Surgical Services*

Molly Miller, BSN, RN, CNOR, *Surgical Services*

Chelsea Schaefer, BSN, RN, CNOR, *Surgical Services*

CERTIFIED PROFESSIONAL CODER CERTIFICATION

Penny Fournier, BSN, RN, CHA, CPC, *Revenue Integrity*

Tammy Hamilton, BSN, RN, CNML, OCN, CPC, *Revenue Integrity*

Chasity Keeler, RN, BA, CHA, CPC, *Revenue Integrity*

CERTIFIED PROFESSIONAL IN PATIENT SAFETY

Michelle Tuckerman, MBA, BSN, RN, CPPS, *Patient Safety and Advocacy*

CRITICAL CARE REGISTERED NURSE

Jewell Allen, RN, CCRN, *5T Cardiology Universal Bed*

Patricia Clark, BSN, RN, CCRN-K, *4T Surgical Universal Bed*

Jeff Mackie, BSN, RN, CCRN, *4T Surgical Universal Bed*

Tyler Mattis, RN, CCRN, *5T Cardiology Universal Bed*

Anthony McIntyre, RN, CCRN, *6T Medical Universal Bed*

Erin Williams, BSN, RN, PCCN, CCRN, *Critical Care Float Pool*

ONCOLOGY CERTIFIED NURSE

Catherine Camburn, BSN, RN, OCN, *Outpatient Infusion Therapy*

TRAUMA CERTIFIED REGISTERED NURSE

Denise Garrecht, BSN, RN, CEN, TCRN, *Trauma Program*

Matthew Matthias, RN, CEN, TCRN, *Emergency Department*

Advanced Nursing Degrees

In 2018, the system provided support for more than 143 RNs who are either currently enrolled or recently completed a Bachelor of Science in Nursing (BSN) program, 25 nurses who are in the process or completed a Master of Science in Nursing (MSN) program, and one nurse who has successfully achieved a Doctorate of Nursing Practice (DNP).

Congratulations to HFAH Nurses who have completed an advanced nursing degree in 2018.

BACHELOR OF SCIENCE IN NURSING

Miranda Adams, BSN, RN, *Organizational Throughput*

Andrea Barnett, BSN, RN, *Specialty Hospital*

Tracy Bearer, BSN, RN, *5S Medical/Surgical*

Jessica Benz, BSN, RN, *4T Surgical Universal Bed*

Maggie Brown, BSN, RN, *5T Cardiology Universal Bed*

Ann Bui, BSN, RN, *Specialty Hospital*

Stephanie Carey, BSN, RN, *7T Neuroscience Universal Bed*

Kimberly Cropsey, BSN, RN, *Emergency Department*

Goulden Egbuchulam, BSN, RN, *7th Floor Medical Surgical*

Jodie Huddleston, BSN, RN, *Specialty Hospital*

Kayla Hutton, BSN, RN, *7T Neuroscience Universal Bed*

Nicole James, BSN, RN, *6th Floor Renal/Oncology*

Lindsey Kerr, BSN, RN, *Addiction Recovery Center*

Kelly Leslie, BSN, RN, *Emergency Department*

Jennifer Marlow, BSN, RN, *Home Care*

Kelly McNew, BSN, RN, *4T Surgical Universal Bed*

Rachelle Meeks, BSN, RN, *5T Cardiology Universal Bed*

Jennifer Morse, BSN, RN, *6th Floor Renal/Oncology*

Janelle Pallas, BSN, RN, *ONC, 4T Surgical Universal Bed*

Toneisha Potter, BSN, RN, *Case Management*

Alyse Rainey, BSN, RN, *Clinical Informatics*

Albert Rossner, BSN, RN, *Emergency Department*

Susanne Sanford, BSN, RN, *Labor and Delivery*

Ashley Savicke, BSN, RN, *Women & Newborn*

Amy Stapleton, BSN, RN, *Home Health Care*

Joan Strohm, MBA, BSN, RN, *CHPCA, Specialty Hospital*

Amber Sweeter, BSN, RN, *Specialty Hospital*

MASTER OF SCIENCE IN NURSING

Deenah Cavill, MSN, RN, FNP-BC, *7T Neuroscience Universal Bed*

Jenay Krumm, MSN, RN, FNP-C, *Labor and Delivery*

Courtney McIntosh, MSN/MBA, RN, CEN, *Inpatient Behavioral Health*

Deanna Nadell, MSN, RN, CMSRN, *Allegiance Health University*

Katie Ryan, MSN, RN, *Inpatient Adult Behavioral Health*

Shana Schneider, MSN, RN, PNP-AC, *Special Care Nursery*

Jody Whiteye, MSN, RN, CNML, *Medical/Neuroscience Universal Bed*

DOCTORATE IN NURSING

Lisa Marcin, DNP, RN, ACCNS-AG, CNML, *Allegiance Health University*



Helping Nurses Climb the Ladder of Success: Professional Advancement Ladder (PAL) Program

The Professional Advancement Ladder (PAL) is the clinical ladder for Registered Nurses (RNs). It is a voluntary program, but it is strongly encouraged to support professional growth and development.

The purpose of the Professional Advancement Ladder (PAL) is to:

- Attract, engage and retain highly qualified clinical nurses
- Recognize the contributions and achievements of the clinical nurse
- Encourage and develop a culture of life-long learning and professional growth
- Foster interprofessional collaboration and teamwork

Congratulations to the 2018 PAL Honorees

TIER I ACHIEVEMENTS

Kristy Casagrande, RN, 7 East

Lindsay Hammond, RN, Surgical ICU

Melissa Loring, RN, Joint Replacement Center

Chelsea Mayo, RN, Surgical ICU

Kerri Morris, RN, Labor & Delivery

Erin Muller, RN, Surgical ICU

Heather Patrick, RN, 7 South

Angelique Tacia McCann, RN, Surgical ICU

Joy Gebhardt, BSN, RN, Labor & Delivery

Stefanie McClintic, BSN, RN, Labor & Delivery

Shari McUmbert, BSN, RN, Surgery Center (AOSC)

Ann Marie Russell, BSN, RN, CNOR, Surgical Services

Janelle Pallas, BSN, RN, ONC, Surgical ICU

Stacy Steenrod, RN, CLC, Labor & Delivery

Laura Thomas, BSN, RN, 7 East Secure Unit

Jamie Veith, BSN, RN, CNOR, Surgical Services

TIER 2 ACHIEVEMENTS

Vanessa Abi-Saab, BSN, RN, Emergency Care

Katherine Blackmer, BSN, RN, Prep (3 West)

Deenah Cavill, FNP-BC, Neuroscience Universal Bed

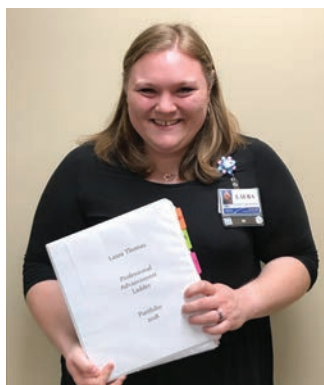
Rachae DeGroat, RN, Surgical ICU

TIER 3 ACHIEVEMENTS

Carrie Baker-Chizmar, BSN, RN, RNC-OB, Labor & Delivery Triage

Jane Boyle, BSN, RN, ONC (5 South)

Christina Old, BSN, RN, RNC-OB, Labor & Delivery Triage



“Participating in the PAL program has given me the opportunity to be a part of the decision making process at the hospital, further my education, contribute to research and evidence based practice and give back to our community through service.”

— Laura Thomas, BSN, RN, CMSRN, Clinical Nursing, 7 East

Teaching and Role Development

Nurse Residency Program

The Henry Ford Allegiance Health Nurse Residency Program continues to provide our new nurses with a smooth transition into the field of nursing. The one-year program assists new graduates to achieve a successful transition from student to practicing registered nurse. The residency program offers a variety of clinical tracts including emergency department, critical care, obstetrics, behavioral health, and medical surgical nursing. In addition to classroom time, the resident receives 16 weeks of orientation with a preceptor. The testimony of our new graduates continues to demonstrate the value of this program, and the turnover rate for these new nurses is lower than the national benchmarks of 7%.

In 2018, the residency program supported 78 new graduates during their first year of training. Residency programs are known to improve confidence and critical thinking skills leading to improved patient outcomes.

Transitioning Experienced Registered Nurses (TERN) Program

The Transition of Experienced Registered Nurses (TERN) is a program to support experienced nurses throughout the continuum of care during the first year at Henry Ford Allegiance Health. The goal of the program is to help support the newly hired experienced nurses during their first year and ensure an effective transition into the practice environment. The program consists of quarterly meetings coordinated by Clinical Educator Melissa Cope, BSN, RN, and includes topics such as professional nursing practice, evidence-based practice, research, quality and safety.

Preceptor Program

Precepting is a vital component to building competency in a new nurse during the first year. Our program, Precepting for Success, provides the tools necessary to assist new nurses in learning the practice environment and nursing profession. HFAH offers a training program for our experienced nurses who are interested in becoming a preceptor, as well as a refresher course for those who have previously taken the preceptor course. The course has been modified to include more interactive learning opportunities. Topics include the role of a preceptor, how to teach in the clinical environment, coaching and evaluation.

Educational Needs Assessment

Nurse participation in professional development is important to enhance knowledge, clinical skills and practices in the workplace. The education department conducts an educational needs assessments annually to evaluate the educational programs nurses at all levels feel would be beneficial in their roles or specialties. The professional development activities are designed to improve the practice of nursing and patient outcomes.

The learning needs assessment provided to nurse managers, nurse directors, clinical unit leaders and Advanced Practice Registered Nurses (APRNs) was completed by 642 nursing staff in 2018. The feedback provided the nurse education team a rich overview of the learning needs of our nursing staff, and the feedback helped develop the educational calendars for 2018 – 2019.

Annual Skills Fair – making learning fun!

Emoji was the theme of this year's Skills Fair. Nurses came together to learn using a hands on format. The annual skills fair hosted over 1,000 nurses from across the continuum of care. The topics included hand hygiene, suicide prevention, customer service and multiple skills stations for nurses to demonstrate their enhanced understanding.

Annual Women's and Children's Services Education Fair 2018

Every year for the last eight years, the Education Team has held an education fair for the staff of Women's and Children's Services (WCS). The Education Team is made up of volunteer staff members from each of the five different units. They create and hold an educational fair that is also a fun event. WCSs have approximately 170 staff members, and planning this event takes time and precision. The fair is funded by the staff and includes a theme. This year was "Putting on the Ritz of Education." The fair includes decorations, treats and costumes.

Nursing Grand Rounds

Nursing Grand Rounds are presented to nurses arranged by AHU nurse educators.

The monthly sessions feature presentations and free Continuing Education Units (CEUs) on topics requested from the annual learning needs assessment and requirements under the PAL. A total of eight presentations were offered in 2018, with over 262 attendees.

Joint Symposium Hosted by Henry Ford Allegiance University

Nurse educators from HFA University hosted an event on November 14, 2018 from 4:30 p.m.-7:30 p.m. It offered presentations by Timothy Ekpo, DO; Tudor Tien, MD; and John Walper, MD. Also in attendance were Hanger Clinic, Compression Therapy, ACell, Convatec (Aquacell dressings) and Zimmer Biomet.

The Symposium was well attended with approximately 69 attendees, including nurses, CNAs, LPNs, physical/orthopedic (PT/OT) therapists, nurse practitioners, residents, physicians and a supervisor from Community Paramedic.

"Karin makes it all about the patient and the family, understanding that in the moment we are working with them we have the opportunity to make a difference for that patient and their loved ones."

— Grateful Staff Member

Nurse and Clinical Staff Recognition Programs

DAISY Award to Recognize Extraordinary Nursing Care

DAISY, an acronym for Diseases Attacking the Immune System, is the name of a program established in 1999 by the family of Patrick Barnes, a young man who died from Idiopathic Thrombocytopenia Purpura. The family was so moved by the compassion displayed by Patrick's nurses that they created the DAISY Foundation in his memory, to recognize extraordinary nursing care. Nominations for the DAISY Award can be submitted by anyone, including colleagues, patients, families and physicians.

Henry Ford Allegiance Health is very proud to honor one inpatient nurse and one outpatient nurse each month. We recognized over 600 nurses for receiving a DAISY nomination and recognized 24 outstanding nurses with the DAISY Award during 2018.

The DAISY Award Honoree consistently meets the following criteria:

- Compassionate
- Displays integrity
- Dedicated
- High performer
- Goes above and beyond
- Patient advocate

DAISY AWARD HONOREES 2018

Katie Benn, RN, *Cardiac Cath. Lab*

Cathy Camburn, BSN, RN, OCN, *Infusion Services*

Louisa Chui, BSN, RN, *Medical Universal Bed*

Lisa Coan, RN, *Neuroscience Universal Bed*

Josie Crittenden, RN, *7 North West*

Kimberly Cropsey, BSN, RN, *Emergency Care*

Imelda Dolcine, BSN, RN, *Neuroscience Universal Bed*

Marjorie Donnelly, BSN, RN, *Clinical Decision Unit*

Ron Dunfield, RN, *Emergency Care*

Kathleen Fedewa, BSN, RN, *Organizational Throughput*

Nathan Harpe, BSN, RN, CMSRN, *Medical Universal Bed*

Carla Hastings, RN, CHTP, *Cardiology Diagnostics*

Janine Hatt, BSN, RN, RN-OB, C-EFM, *Labor and Delivery*

Amy Jones, RN, *Medical Universal Bed*

Erin Muller, RN, *Surgical Universal Bed*

Lori Neill-Adams, RN, ONC, *Joint Replacement Center*

Susann Pascarella, LPN, *Ambulatory Services*

Philicia Richmond, MSN, RN, AANP, *Behavioral Health*

Kim Schultz, RN, *Special Care Nursery*

Tina Smith, RN, *Digestive Health*

Sonja Varney-Herr, BSN, RN, *Palliative Care*

Dawn Vellequette, RN, ONC, *Joint Replacement Center*

Tricia Vinson, BSN, RN, *Day Surgery*

Molly Weber, BSN, RN, *Emergency Care*

Daisy Team Award

The DAISY Team Award is presented annually to honor the collaboration of two or more people, led by a nurse, who makes a difference in the lives of our patients, families, staff and community. In 2018, HFAH presented the DAISY Team Award to the 7th Floor Sepsis Committee.

The 7th Floor Sepsis Committee was formed in January 2018 to recruit and engage sepsis champions and to develop and empower resource nurses for the newly created sepsis unit at HFAH. The team is mentored by Clinical Nurse Specialist Jennifer Rice, MSN, RN, AGCNS-BC, SCRNP, and Clinical Nurse Educator Mandy Davidson, BSN, RN, CMSRN. The committee is led by clinical nurses Katie Blanton, RN, and Mary Rentschler, RN.

Congratulations Seventh Floor Sepsis Committee

Kathleen Blanton, RN

Kristy Casagrande, BS, RN

Carey Johnson, RN

Stephanie Palmer, BSN, RN

Heather Patrick, RN

Mary Rentschler, RN

Andrew Shay, RN

Jammie Sibley, RN

Emily Whitaker, RN

DAISY Leadership Award

Over the years of The DAISY Foundation's growth, it became evident that the environment created by nurse leaders is a strong factor in how direct care nurses take care of patients. These leaders are often not eligible for The DAISY Award, however, they create a workplace where compassionate care thrives and nurses deliver the quality of care the DAISY celebrates. Henry Ford Allegiance Health recognizes nurse leaders annually through the DAISY Leadership Award. Congratulations to Clinical Unit Leader Carey Johnson, RN, as the recipient of the 2018 DAISY Nurse Leadership Award.

The Nursing Excellence Awards - May 2018

The Nursing Excellence Awards is an annual program that recognizes the clinical excellence our nurses bring to their patients every day. Each year, a select group of nurses receives a Nursing Excellence Award. The Humanitarian Service Award is also presented during the ceremony, to recognize a staff member who made an extraordinary contribution to a patient.

Congratulations to the 2018 Nursing Excellence Award Honorees.

Kristy Casagrande, BSN, RN, *Excellence in Nursing Innovation*

Barbara Logsdon, BSN, RN, CMSRN, *Excellence in Clinical Nursing Practice*

Christina Old, BSN, RN, RNC-OB, *Dedication to Nursing Practice*

Michelle Smith, RN, *Excellence in Patient Advocacy*

Joy Sterrett, RN, *Humanitarian Award*

Laura Thomas, BSN, RN, CMSRN, *Excellence in Nursing Innovation*

Karen Tibbs, ANP-BC, ACHPN, *Excellence in Advanced Practice Nursing*



Henry Ford Allegiance Honey Bee Award Program

Honey bees have the important job of helping flowers and other plants grow. Just as honey bees gather pollen and nectar, HFAH nursing assistants, nurse externs, nurse residents, unit secretaries, technicians and sitters contribute to the delivery of the care plan to provide the best possible care to patients and their families.

The award honors nursing support staff members who go above and beyond for our patients and their families.

A HONEY BEE AWARD NOMINEE IS:

- Compassionate, caring and maintains a positive attitude
- Able to make a special connection with the patient and family
- Responsive to the patient's needs in a timely way
- Excellent at communicating needs with the rest of the health care team
- Willing to go above and beyond in caring for the patient
- Careful to maintain the safety and cleanliness in the patient's environment

CONGRATULATIONS TO THE 2018 HONEY BEE AWARD HONOREES

Mary Connell, Unit Secretary, *7 South*

Abigail Gleeson, Tech, *Behavior Health Unit*

Tianna Hicks, CNA, *7 East*

Nicole Benner, CNA, *6 South East*

Hayley Bollinger, Delivery Tech, *Home Health Care*

Gena Fajardo, Tech, *Neuroscience Universal Bed Unit*

Tony Hogan, *Emergency Department*

Amanda Horning, Tech, *Critical Decision Unit*

Alyssa Kirst, CNA, *Joint Replacement Center*

Christa Ley, CNA, *7 South*

Mark Maloney, CST, *Surgery Services*

Cora Moore, CNA, *6 South East*

Michelle Riker, Tech, *Surgical Universal Bed Unit*

Melanie Roberts, Tech, *Digestive Health*

Thomas Scheidt, Tech, *General Adult Unit*

Abby Soper, CNA, *6 South East*

Christine Travioli, Tech, *Emergency Care*

Lori Turner, Tech, *Digestive Health*

Jeremee Wood, Tech, *Clinical Decision Unit*

Ashley Zimmerman, CNA, *7 South*

Racquel Zimmerman, CNA, *7 South*

Commitment to Community Involvement

Our HFAH nurses are enormously generous with their time when it comes to volunteering to help the greater Jackson community. They make great volunteers when sharing their expertise during various injury prevention programs sponsored by the Trauma Program. These outreach activities also include fall prevention for the elderly, distracted driving prevention, pedestrian safety, dog-bite prevention and bicycle safety.

Foremost among these volunteer efforts are the ThinkFirst™ programs (for teens and children), Matter of Balance™ (for the elderly), and Safetyville (for pre-school and early elementary students). This past year, 30 nurses from HFAH volunteered close to 200 hours of their time toward these community programs.

Local Community Health Care Initiatives

Henry Ford Allegiance Health's annual Heart and Vascular Expo

Henry Ford Allegiance Health's annual Heart and Vascular Expo is a free community event that promotes access to care as well as health and well-being. The most recent event was held on February 24, 2018.

Free health screenings, educational exhibits, healthy cooking demonstrations and health-promoting resources were offered to community members, along with unique opportunities to learn about heart health from the experts. Keynote speaker Joe Piscatella spoke to the audience as a national authority on lifestyle and health. This February event also gave nurses a platform for educating guests on services offered by the health system and the modern technology that is used to deliver precise, safe, effective heart and vascular care.

HFAH nurses participated in the 2018 Heart and Vascular Expo in various roles, including providing education, performing health screenings and offering demonstrations.

THE FOLLOWING NURSES VOLUNTEERED AT THE 2018 HEART AND VASCULAR EXPO:

Laura Thomas, BSN, RN, CMSRN, *Clinical Nurse, 7th Floor*

Kayla Miller, BSN, RN, *Clinical Nurse, Cath Lab*

Eric Froedtert, BSN, RN, ONC, *Clinical Educator, Comprehensive Clinical Care*

Tracey Hunter, BSN, RN, ONC, *Clinical Educator, Comprehensive Clinical Care*

Yvonne Crawford, BSN, RN, *Clinical Educator, Comprehensive Clinical Care*

Leilani Tacia, MSN, RN, *Clinical Nurse Specialist, Comprehensive Clinical Care*

Karen Zastrow MSN, RN, AGCNS-BC, *Manager, Comprehensive Clinical Care*

Harold (Bud) Knight, BSN, RN, *Organizational Throughput Department*

Sigrid Higgins, MHA, BSN, RN, *Ambulatory Services*

Race to Health

Hundreds of community members come to participate in the Henry Ford Allegiance Race to Health and Step by Step Family Wellness Day each September. This special community event supports our vision by encouraging people of all ages to develop healthier lifestyles through physical activity. Nurses were once again supporting the first aid tent. They were also present at the finish line to help any race participants who were in distress or injured and needed medical attention.

Surgical Services White Coat Tours

This quarterly event provides invited guests with a "backstage pass" to see the hospital's advanced technology by touring the operating room (OR) suites—donned in "bunny suits." They also learn what is new in medical techniques from our surgeons and specialists. Along with this, nurses have an opportunity to educate guests on their important role in the OR, ensuring each patient receives the safest care.

The Big Latch On

On August 4, 2018, Henry Ford Allegiance Health Women's and Children's Services hosted "The Big Latch On" event for the community in support of breastfeeding. Families enjoyed food, prizes, portraits and music class. The families also had a session for question and answer with lactation consultants. A total of 122 moms, babies, partners and volunteers participated in this year's event.

Jackson County Breastfeeding Coalition/Bosom Buddies

The lactation department staff are active members in the Jackson County Breastfeeding Coalition. Meetings are held monthly and attended by community members and organizations. The mission of the Breastfeeding Coalition of Jackson County is to educate the community about the benefits of breastfeeding, to promote friendly breastfeeding environments, and to support the quality and duration of breastfeeding. Along with participating in the coalition, we support moms with The Bosom Buddies support group. This group of breastfeeding mothers meets monthly to support their breastfeeding journey.

Local and National Nursing Conferences

National Magnet® Conference

Three clinical nurses had the opportunity to attend the annual Magnet® Conference in Denver, Colorado: Erin Muller, RN, Chair of Shared Governance Coordinating Council (SGCC); Vanessa Abi-Saab, BSN, RN, Co-Chair of SGCC; and Carrie Baker-Chizmar, BSN, RN, RNC-OB, clinical nurse in Women's and Children's Services. The Magnet® conference is the largest nursing conference in the United States with more than 10,000 nurse attendees for 2018. It included dynamic speakers who covered a multitude of topics related to education, innovation, excellence in patient care practices and improved patient outcomes.



Maternal Newborn Nurse Professionals of Southeast Michigan (MNNP) Fall Consortium

Three clinical nurses from WCSs attended the MNNP Fall Consortium in 2018: Stacy Steenrod, RN, CLC; Christina Old, BSN, RN, RNC-OB and Carrie Baker-Chizmar, BSN, RN, RNC-OB. This local event is targeted to health care providers of maternal and newborn care, including nurses, physicians, students and other related professionals.

Healthy Lifestyle Challenge Among the Hematology Oncology Nursing Team

It's never too early or too late to work towards being the healthiest you. The Hematology Oncology Nursing team decided to make a difference in their own self-care in July 2018. This challenge was to encourage each other to take better care of ourselves. Being healthier is a value supported by HFAH, and it supports the team's ability to provide excellent and safe care for our patients.

During this challenge, the nursing team strengthened their camaraderie in several ways by sharing healthy recipes, changing the junk food drawer to a healthy snack drawer, increasing daily water intake, choosing an exercise routine and supporting each other. The team's combined efforts were successful, resulting in better overall health and 109.5 lbs. lost!

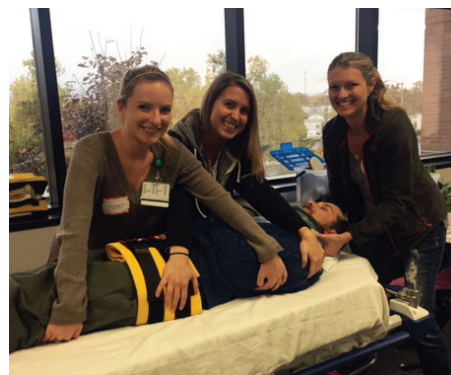


Nurses Advance Trauma Care

HFAH became verified as a Level II Trauma Center by the American College of Surgeons (ACS) in 2017. Maintaining the quality and advanced level of patient care essential for trauma center credentialing requires the contributions of nurses from multiple specialties and all levels of acuity. Across the entire continuum of care, from the Emergency Department (ED) to discharge, our nurses have been dedicated to trauma education and training, injury prevention activities, performance improvement and the delivery of increasingly complex patient care.

Trauma Nurse Core Curriculum (TNCC)

HFAH continues to have a very high rate of TNCC completion among ED and ICU nurses, which is considered essential hands-on simulation and nursing preparation for trauma care. Since 2012, the Trauma Program has provided the TNCC course to almost 350 nurses. HFAH now has seven TNCC instructors on our staff, including Denise Garrecht, BSN, RN, CEN, TCRN; Chris Mullen, BSN, RN, CFRN, CEN; Vanessa Abi-Saab, BSN, RN; Courtney McIntosh, MBA/MSN, RN, CEN; Albert Rossner, BSN, RN; Brandie Howard, BSN, RN; and Madonna Walters, BSN, RN.



Emergency Nurse Pediatric Course (ENPC)

Since 2012, HFAH has trained 127 nurses in the Emergency Nurse Pediatric Course (ENPC), to prepare them to care for the most seriously ill and injured children who present to our Emergency Department. These children must be promptly and appropriately treated before transfer to a pediatric trauma facility. HFAH ENPC instructors include four RNs: Vanessa Abi-Saab, BSN, RN; Whitney Elliott, BSN, RN; Chris Mullen, BSN, RN, CFRN, CEN; and Denise Garrecht, BSN, RN, CEN, TCRN.

The HFAH Center for Health Innovation & Education hosts our TNCC and ENPC courses.



Fifth Annual Jackson Trauma Symposium

On September 28, 2018, the Anderson Auditorium at HFAH was once again at capacity for the Fifth Annual Jackson Trauma Symposium. We hosted this multidisciplinary event for physicians, nurses, EMTs, social workers and other trauma caregivers. Topics included difficult airway management, chest wall trauma, hypothermia and frostbite, compartment syndrome, gunshot trauma and the opioid epidemic. This year, the planning committee for the symposium included seven HFAH nurses: Denise Garrecht, BSN, RN, CEN, TCRN; Linda LaRoe, BSN, RN; Mariah Foster, MSN, RN, AGCNS-BC; Leilani Tacia, MSN, RN; Terri Foster, BSN, RN, CNOR; Lisa Marcin, DNP, RN, ACCNS-AG, CNML; and Madonna Walters, BSN, RN.

Burn Surge Training

HFAH continues to function as a designated Burn Surge Facility (BSF) for the State of Michigan Burn Coordinating Center. Burn Surge Facilities provide short-term burn care for up to 72 hours, in the event of a burn mass casualty incident that exhausts Michigan's existing 79 designated burn beds. As a designated BSF, HFAH will provide initial care, resuscitation and stabilization of these burn patients. Thirty-eight nurses from HFAH have attended an Advanced Burn Life Support (ABLS) training course, developed by the State Burn Coordinating Center. As a BSF team member, nurses demonstrate acquired knowledge and hands-on skills needed to treat victims of a burn mass casualty event.

Injury Prevention and Outreach

Many of our HFAH nurses volunteer their time and expertise during the community injury prevention programs that are sponsored by the Trauma Program. Injury prevention and outreach includes fall prevention, distracted driving, pedestrian safety, dog-bite prevention and bicycle safety. Foremost among these are the ThinkFirst™ program (for teens and children), Matter of Balance™ (for the elderly), and Safetyville (for pre-school and early elementary students). Together, 10 nurses volunteered nearly 40 hours towards these community outreach programs.

EXEMPLARY PROFESSIONAL PRACTICE

Our future is exciting as we develop and grow the nursing profession at HFAH where we will strengthen our ties across the continuum to provide safe, quality, and coordinated care.





HFAH Nursing Professional Practice Model (PPM)

Enculturation of the PPM

The Nursing Professional Practice Model (PPM) aligns and integrates nursing practice with the mission, vision, values and philosophy of nursing. The PPM embraces key attributes pertaining to professional relationships, professional values, our care delivery model, Patient & Family Center Care, and includes three pillars to guide nursing practice.

- The Nursing Practice Pillar emphasizes a culture of excellence through research, evidence-based practice, safety, innovation and quality.
- The Nursing Focus Pillar supports health by partnering with individuals in a patient centered care delivery model to create seamless, exceptional customer experience. Our nursing practice is conducted in a courteous and respectful manner and seeks to include families and significant others with the goal of assisting our patients to achieve their maximum level of wellness, function, and comfort.
- The Nursing Approach Pillar centers on customer-driven excellence based upon teamwork, collaboration, professionalism, and respect. The Division of Nursing at Henry Ford Allegiance Health strives to create a collegial atmosphere where collaborative practice is valued and encouraged.

On Shared Governance Day, September 19, 2018, the shared governance members proudly presented “Shared Governance on the Road” and visited their peers on the nursing units to discuss highlights from shared governance. Informational booklets were distributed by the shared governance members who included a cover displaying the HFAH PPM.

Nurse Engagement & Retention

The new Staff Engagement & Retention Committee is a group of highly engaged staff looking to increase engagement and retention within the nursing division at HFAH. The team has identified opportunities to improve onboarding strategies and enhance the preceptor program. The team reviews turnover data and budget processes in order to define a full action plan for improving engagement. A clinical nurse member, Nicole James, BSN, RN, CMSRN, from 6 South East, presented an upcoming initiative, The Pickle Pledge™, in efforts to improve staff engagement by promoting positive thinking and optimistic behaviors in a new and fun way.



Internal Resources—Advanced Practice Nurses—to Improve the Clinical Practice Setting

The presence of APPs is expanding at HFAH. Nurses who are APPs include Certified Registered Nurse Anesthetists (CRNAs), Nurse Practitioners (NPs), Certified Nurse Midwives (CNMs) and Clinical Nurse Specialists (CNSs). With the expansion of their presence comes an expansion of the impact we make on delivering cost-effective, high-quality care, as well as advancing care for specific conditions and populations through application of evidence-based care and expert practice, which improves patient outcomes. We would like to highlight two APPs: Benjamin Lee, MS, CRNA, and Jennifer Schmid, MSN, RN, CNP



Benjamin Lee, MS, CRNA, has been a member of the anesthesia department at HFAH for nine years. In that time, he has grown both personally and professionally. He recognized that he could have a positive impact on the care provided by our perioperative RNs by initiating an educational program. Benjamin has been providing education on anesthesia related topics to the HFAH perioperative RNs to provide the nurses with a greater understanding of anesthesia and potential anesthesia related complications in their patients. Presentations of this nature help the perioperative staff gain insight about their specific roles in assisting the CRNAs and anesthesiologists, as well preparing them to treat their patients in emergencies. Some of the topics covered were local anesthetic toxicity, laryngospasm and anesthetic medications. The ultimate goal of this education is to foster relationships between departments, improve quality and outcomes, and create a seamless transition of care for patients as they move through the perioperative phases of care.

Benjamin is active as a preceptor for the rotating anesthesia students, a mentor in the Michigan State University College of Nursing mentorship program. He is also a member of the Michigan Association of Nurse Anesthetists and the American Association of Nurse Anesthetists, as well as a charter member of the Registered Nurses Association in Michigan. He somehow finds time to volunteer with the American Diabetes Association and the Angels of Hope Foundation. Benjamin is an example of an APP who has a positive, widespread impact on our patients, his fellow staff and the community.

Jennifer Schmid, MSN, RN, FNP-C, EMT-P has been an APP in Radiation Oncology for more than three years. She sees patients for follow up visits after they have completed radiation treatments. She also performs other advanced surveillance procedures, including flexible laryngoscopy and pelvic examinations.



"My patients are very appreciative of the time and individual care they experience here at Henry Ford Allegiance Radiation Oncology. Year to date patient satisfaction scores in Radiation Oncology is 98.3%!"

Jennifer feels very privileged to work with an amazing team, which includes administrative assistants/ front desk staff, manager, social worker, nurses, therapists, dosimetrists, physicists and physicians. She describes her team as second to none.

As an APRN, Jennifer is a provider of medical and nursing care, along with a partner with the physicians in the clinic. Following best practice, she participates in a daily huddle to review all patients, including recent radiographic imaging. She also conducts Survivorship Visits for patients once their cancer treatment is completed. This visit reviews the specifics of the patient's cancer and what to expect over the next 5 years and beyond.

Jennifer is active on internal committees within HFAH, including the HFAH EPIC Quality Improvement Committee as well as the Thoracic Disease Site team. Jennifer is committed to the advancement of nursing and is presenting at the 2018 Annual Meeting of the American Society for Radiation and Oncology (ASTRO), which is the main national society in Radiation Oncology. The presentation will be "Prostate Cancer: Clinical Points for RNs."

Jennifer is not only active at a national level, but she is active with programs in our local community, participating in a prostate cancer support group, as well as providing presentations on prostate cancer at local prisons.

"I am very honored to be a Nurse Practitioner in a job that I love!" said Jennifer.

This past year has presented us with enormous change, opportunities for growth and strengthening of our collaborative professional relationships. It is an honor to be part of a dedicated nursing structure that is focused on the provision of excellent patient care and living our mission.

Clinical Nurse Specialist (CNS)

The Clinical Nurse Specialist (CNS) is a collaborative leadership role that works closely with the nurse manager to oversee and improve patient care through identifying nursing problems and assisting staff to address patient needs. As an expert in a specialized area of clinical practice—behavioral health, cardiovascular, oncology, pediatrics, medical, surgical, critical or emergency care, etc.—the CNS participates in research projects and research review to drive evidence-based clinical care. The CNS may assess the health of patients by physical examination and taking medical histories, while promoting health maintenance and disease prevention by providing education to patients and their families.

Leadership and communication skills, as well as flexibility and the ability to adapt practice across settings, are essential for the CNS to effectively work with multidisciplinary healthcare teams, analyze care delivery and make appropriate decisions. Core competencies advance the development of critical thinking skills, mentoring, consulting, research, management and systems improvement. The CNS focus is on the three Spheres of Influence (patient, nurse and system) to expand knowledge and bridge gaps across the continuum. These APPs greatly influence outcomes by providing expert consultation to care providers and implementing improvements in health care delivery systems.

Mariah Foster, MSN, RN, AGCNS-BC



Mariah strives to create environments that empower staff and help them feel comfortable reaching out to her for expert consultation, in order to benefit nurses and providers and improve outcomes throughout the health care delivery system.

Jennifer Rice, MSN, RN, AGCNS-BC, SCRNP



Jennifer strives to increase professional development and improve patient care to improve patient outcomes and satisfaction.

Leilani Tacia, MSN, RN



Leilani helps drive practice changes throughout the organization that are based on the latest available evidence to achieve the best possible patient outcomes.

Danielle Elswick, MSN, RN, AGCNS



Danielle's goal is to empower and support staff nurses to be change agents in their daily practices to achieve better outcomes and satisfaction for patients, staff and the organization.



Autonomy & Accountability

Clinical Nurse Identifies Opportunities to Improve Medication Efficiency

Learning and innovation are foundational to the work of nurses at HFAH and the provision of high quality care. The work of the 7th Floor Sepsis Committee epitomizes the ways in which HFAH strives to create a culture of excellence through innovation, learning and leadership. The committee continually leverages technology and evidence-based practice to promote superior patient outcomes. By facilitating a culture of excellence through continual growth and professional development, and review of patient safety data, the team is contributing to improved patient outcomes for patients on the Sepsis Unit. The clinical nurses on this committee serve as reliable resources for their peers and work to identify barriers to best-practice recommendations and educational needs for the unit.

Clinical Nurse Renee Silva, RN, 7 South, identified opportunities for antibiotics administration times. With implementation of the new Sepsis Unit in 2018, time is a critical element in managing the sepsis patient. The availability of the antibiotics from Pharmacy was perceived as a barrier to early goal directed therapy for timely antibiotic administration, resulting in administration delays. Silva advocated for patients and began to track specific antibiotics and administration times. By collaborating with Pharmacy and sharing data with nurse leaders, a greater supply of antibiotics became available in the pyxis to prevent administration delays.



Infusion Services - both Inpatient and Outpatient Settings Accomplishments in 2018

Inpatient Vascular Access Team (VAT) focused on appropriate Peripherally Inserted Central Catheter (PICC) placements, often collaborating with providers and clinical RNs to place the right line for the right reason. VAT has found the ultrasound to be an invaluable tool for all intravenous placements. This year the team implemented a longer extended dwell peripheral catheter with ultrasound, providing another option for venous access. Not only did this provide the best intravenous device for the patient, it also contributed to cost savings for the department and organization. The VAT's adherence to best practice standards for all intravenous placements contributed to the low CLABSI rate, which included six consecutive months of zero CLABSIs. VAT recognizes all the clinicians who adhere to correct use and maintenance for all intravenous catheters, as it takes everyone to keep a patient safe from CLABSI.

Outpatient Infusion, an ambulatory department in the Anderson Building, experienced a three percent growth in patient volume. The clinical RNs identified an opportunity to improve workflow by rearranging the recliner chair in the infusion bays. By moving the chair to a different angle, the clinical RN can quickly access the patient for vital signs and assessments, as well as administer infusions. Patients have found it to be easier as well, since they no longer need to adjust their recliner for the RN to reach the infusion pump. As we anticipate further growth, the clinical RNs and support staff continue to collaborate on throughput and workflow issues to help the patient experience be more efficient.

Women's and Children's Services Human Donor Milk

The WCS Department has a passion to lead our community to better health and well-being at every stage of life, starting at pre-conception and through the life span. The nurses have implemented the use of human donor milk, allowing for more infants to remain exclusively breastfed, maintaining optimal health of the infant, and increasing parental satisfaction. Utilization of pasteurized donor human milk helped us reach The Joint Commission perinatal targeted goal of exclusive breastfeeding of 70% in August 2018.

Helping Patients Prepare for Baby with a New Prenatal Tour/Hospital Orientation

In an effort to increase the knowledge and health of our patients related to their pregnancy and birth, The Stork Club and Lactation Services added one hour tours on Wednesday evenings at 7 p.m. and Saturdays at 1 p.m. The department goal is to have parents attend to help them better understand available HFAH and WCS services. This program assists in educating the community on the department services, improving our core measure outcomes for decreasing our primary cesarean section rate, increasing breastfeeding rates and improving the health of Jackson County, one baby at a time.

HFAH is proud to have a structure that empowers nurses to use research to provide evidenced-based care to promote quality health outcomes for patients.

NEW KNOWLEDGE

In healthcare today, it is essential to remain resilient and seek new knowledge through partnerships to develop innovative programs and define best practices to maximize patient outcomes.





Nursing Research

An Assessment of Nurse Perceptions Regarding the Acute Shortage of Small Volume Parenteral Solutions Following Hurricane Maria

Principle Investigator: Karen Biskupski, BSN, RN, CRNI, VA-BC

Co-Investigators: Jane Boyle, BSN, RN, ONC; Leilani Tacia, MSN, RN; Karen Gossman, BSN, RN, CCM-CCRC, and Kathleen Walsh, MSN, RN, NEA-BC

Background

Hurricane Maria hit Puerto Rico in late September 2017, damaging several factories that supply Intravenous (IV) bags to hospitals in the U.S. This resulted in a national shortage of IV solutions. To address this shortage, new procedures and practices were quickly implemented to minimize potential disruptions in patient care.

Purpose/Aim

The Shared Governance Research Council reached out to solicit nurses' perspectives regarding communication, training, and risks associated with the shortage, and to create generalized knowledge that may help hospitals better respond to medication and supply-related shortages in the future.

Method/Analysis

The study asked HFAH nurses who administer infusions to participate in an anonymous online questionnaire administered through Survey Monkey. The questionnaire asked nurses about (1) their nursing background, (2) communication received about the shortage, (3) how the shortage may have impacted their practice/patient care, and (4) training on new procedures to accommodate the shortage.

Research Findings:

The research findings under each category included:

Perceptions of communication about the IV mini-bag shortage

- 83.7% of clinical nurses recalled communication on the expected acute IV bag shortage.
- 69.1% recalled hearing about the procedural changes to accommodate the shortage.
- 53.7% remembered receiving prior communication on the change to syringe pump.

Impressions of how the IV mini-bag shortage may have impacted patient care

- 6.5% respondents believed the changes frequently or very frequently compromised patient care.
- 4.9% of respondents believed administering medications via syringe increased the risk of central line associated bloodstream infection (CLABSI).
- 38.2% believed 96 hour hang time for 1 liter IV bags increased the risk of CLABSI.

Quality of training for the new procedures to accommodate the IV mini-bag shortage

- 69.2% of clinical nurses felt that the combination of team huddles and e-mail were the most effective form of communication.
- 96.1% received training prior to their first use of this technique of respondents who administered antibiotics through the syringe.

Three open-ended questions had response rates of 14 - 22%, and the most frequently suggested improvement was related to communication.

Dissemination during the Research Symposium

The research project and results were shared internally at the 2018 HFAH Research Symposium. Jane Boyle, BSN, RN, ONC, and Karen Biskupski, MSN, RN, CRNI, VA-BC, were recipients of a third place award for their poster presentation. The research project and results were also shared externally at the Greater Lansing Research Symposium and Henry Ford Macomb Nurse Research Conference in 2018.

Sharing the Knowledge: Internal Dissemination

The 2018 HFAH Research Day was hosted on April 27, 2018. This event offers an opportunity for nurses and other health care disciplines to disseminate their quality improvement projects and research findings internally. Information is shared on writing for publication, as well as abstract submission for oral and poster presentations.

Congratulations to the following nurse winners from each of the poster categories!

Original Research

1st Place: Karen Zastrow, MSN, RN, AGCNC-BC; Nursing - Comprehensive Clinical Care; Compassion Fatigue for Trauma Nurses

2nd Place: Tracy Metzger, BSN, RN, OCN; Nursing – Hematology/Oncology; Massage in Oncology Patients Receiving Chemotherapy: Impact on Anxiety (MOCA)

3rd Place: Jane Boyle, BSN, RN, ONC; Nursing - Med Surg; & Karen Biskupski, BSN, RN, CRNI, VA-BC, Nursing – Infusion Services; An Assessment of Nurse Perceptions Regarding the Acute Shortage of Small Volume Parenteral Solutions following Hurricane Maria

Quality improvement

- **2nd Place:** Lisa Marcin, DNP, RN, ACCNS-AG, CNML; Nursing Education – HFAHU; Early Identification of a Septic Patient: Pulling Out the Toolbox

Sharing the Knowledge: External Dissemination

Annual Greater Lansing Community Nursing Research Day

The 26th Annual Greater Lansing Community Nursing Research Day was hosted by HFAH on April 18, 2018, with keynote speaker Kathleen Vollman, MSN, RN, CCNS, FCCM, FAAN, who presented “Igniting the Flame: Mentoring the Staff Nurse in Evidence Based Practice & Conduct of Research.” This event provided an arena for networking and sharing of research and EBP by nurses of all areas from academic to clinical settings.

HFAH Poster Presentations

- Compassion Fatigue for Trauma Nurses was presented by Erin Muller, RN, CUB/SICU, Clinical Nurse.
- Research conducted by Karen Zastrow, MSN, RN, AGCNS-BC, Sue Cross, MBA, MSN, RN, CNML, and Leilani Tacia, MSN, RN, Clinical Nurse.
- Nurse Perception of ICU Liberation Shortcomings was presented by Torrie Taylor, BSN, RN, CUB/SICU.

Supporting Evidence Based Practice: Reducing the Use of Peripherally Inserted Central Catheters (PICC)

Midline placements were identified as an opportunity to implement a new evidence-based infusion practice. Expanding vascular access to include midline placements would decrease the frequency of short peripheral catheter (SPC) restarts, PICC use and CLABSI, by minimizing device utilization. The VAT discussed the possibility of placing midline catheters as an alternative for long-term venous access. The VAT clinical nurses outlined the benefits and risks of extended dwell peripheral catheters, such as midlines and PICCs.

Literature review stated that midlines have the following advantages:

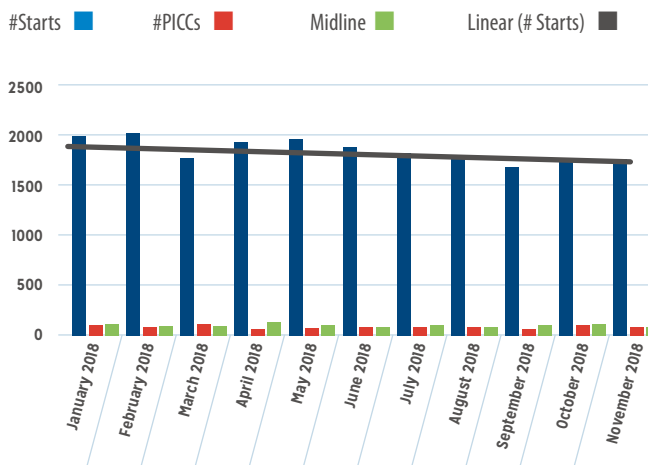
- Reduction in multiple peripheral IV catheter placements (and patient discomfort) for select therapies
- Dwell time of up to 29 days
- Provide for long-term administration of fluids, antimicrobials and other infusions that are well tolerated by peripheral veins, pressure injection rated in lieu of placing PICC or external jugular for computed tomography (CT)
- Quick venous access in emergency or challenging situations in which peripheral venous access is difficult
- Temporary access while the determination regarding PICC or central line access is made
- More cost efficient than PICC insertion and maintenance for select therapies (such as hydration for hyperemesis or antibiotics for long term use)

Implementation

The Powerglide Midline product was selected as an all-in-one product that does not require modified seldinger technique (MST) insertion. As the VAT continued the newer practice of midline insertions, they discovered the midline catheter that had been trialed was prone to kinking and inconsistent lab draws. The manufacturer had redesigned the midline catheter with a non-collapsible tip and developed a new kit that included the sterile probe cover.

The VAT clinical nurses' diligent efforts led to the new evidence-based practice of using midlines in place of the PICC, as appropriate. The VAT clinical nurses have often consulted with providers about midline placement as an alternative when a PICC has been ordered. As midline insertions have increased, PICC placements have decreased.

COMPARISON VAD



VASCULAR ACCESS TEAM

Karen Biskupski, BSN, RN, CRNI, VA-BC

Judith Cook, RN

Sandra Hartman, RN, VA-BC

Melody Kuntzleman, BSN, RN

Christine Ledwidge, RN

Debra Middleton, BSN, RN

Allison Ottolini, BSN, RN

Jamie Roney, BSN, RN

Allison Sherwood, RN

2018 Quality Improvement Projects

Health care is a conglomeration of complex processes that must be carried out in perfect harmony to ensure our patients receive the very best care and service. Processes that fail to support our True North Framework must be diagnosed and treated. HFAH has adopted the DMAIC Lean Six Sigma methodology to do just that. The Lean Six Sigma Green Belt and Black Belt members continuously facilitate improvement teams to ensure our processes are safe, effective and efficient.

- Expanded Progressive/Multidisciplinary/Mini Discharge Rounding to All Med/Surg Units improved inpatient flow by reducing bottlenecks resulting from poor discharge planning. The Progressive Multidisciplinary Rounding improved written discharge orders prior to Noon by more than 50%. Speed of discharges to home and other care facilities was reduced by more than 50%.
- The HFAH Rehabilitation team collaborated with nursing staff to design and promote progressive mobility hospital wide. Progressive mobility started as an initiative in critical intensive care units nationwide. HFAH's current progressive mobility protocol observes five levels of mobility evaluated daily by nursing staff. The aim of progressive mobility is to enhance key outcomes for patients (e.g., reducing rates of Ventilator-associated pneumonia (**VAP**), shortening the duration of mechanical ventilation, enhancing long term functional ability), resulting in decrease in length of stay.
- A team implemented telemonitoring technology to monitor high risk total joint replacement patients once they are discharged to home. The goal was to decrease the number of presentations to the Emergency Department related to total joint surgeries.
- A new service line was developed for non-emergent transportation of patients being discharged to home or other care facilities without timely transportation. Nursing played a key role in identifying and quantifying patient discharge constraints and in the solution selection process to address patient transportation needs
- The use of a patient navigator in the Organizational Throughput Department to improve the next day discharge planning process was initiated. A team piloted the new role designed to centralize next day planning for patient discharges.

EMPIRICAL OUTCOMES

The continued commitment to providing exceptional quality care has resulted in top performance measures, awards, and recognition. HFAH nursing continues to grow stronger as a body of professional, dedicated, and compassionate nurses, positioning ourselves to achieve even greater accomplishments.





Preventing Hospital Acquired Infections

Hospital Acquired Infection Reduction (HAIR) Committee

Influencing clinical care of patients

The Hospital Acquired Infection Reduction (HAIR) Committee is an interprofessional committee consisting of clinical nurses, nurse educators, nurse managers, nurse directors, physicians, pharmacist, infection prevention specialist, clinical nurse specialists and the CNO.

The committee is led by Wendy Boersma, DNP, RN, NEA-BC, Vice President and CNO, and is engaged in reducing hospital acquired infections (HAIs) rates with an emphasis on reducing CAUTIs, CLABSIs and C. diff infections.

HAIR MEMBERS INCLUDE:

Vanessa Abi-Saab, BSN, RN, Clinical RN, *Emergency Care*

Karen Biskupski, BSN, RN, CRNI, VA-BC, *Manager, Infusion Therapy Services*

Wendy Boersma, DNP, RN, NEA-BC, *Vice President & Chief Nursing Officer*

Patricia Clark, BSN, RN, CCRN-K, *Manager, Cardiac Universal Bed/Surgical Universal Bed*

Bonna Cross, MBA, MSN, RN, CNML, *Director, Cardiovascular, Critical Care, and Respiratory Services*

Erin Erikson, PhD, *Pharmacist, Pharmacy Department*

Mariah Foster, MSN, RN, AGCNS-BC, *Clinical Nurse Specialist, Comprehensive Clinical Care*

Brian Kim, MD, *Medical Staff*

Rami Khoury, MD, *Medical Staff*

Lisa Marcin, DNP, RN, ACCNS-AG, *Manager, Allegiance Health University*

Joielinn Nelson, MSN, RN, *Director of Nursing, Patient Care Services*

Nicole Pahl, MPH, *Infection Preventionist, Infection Prevention*

Jennifer Rice, MSN, RN, AGCNS-BC, SCRNP, *Clinical Nurse Specialist, Comprehensive Clinical Care*

Leilani Tacia, MSN, RN, *Clinical Nurse Specialist, Comprehensive Clinical Care*

Anish Wadhwa, MD, *Medical Staff*

Jody Whiteye, MSN, RN, CNML, *Manager, Neuroscience Universal Bed*



The interdisciplinary committee continually reviews existing practices for opportunities for improvement. The team has implemented several best practices, including:

- Two-person insertion practice for all indwelling urinary catheter insertions.
- Removal of indwelling urinary catheter kits from the unit supply to reduce the number of insertions.
- The PureWick Catheter to minimize the use of indwelling urinary catheters.
- Revisions to the Bladder Management Policy requiring urinary catheters to be replaced after forty-eight hours.
- Daily indwelling catheter audits and report to determine the necessity of the catheters and reporting any barriers to removal during the Daily Safety Call.
- Revisions to the Central Venous Catheter Policy to support the use of chlorhexidine gluconate (CHG) impregnated sponges for all central lines and daily CHG bathing.
- Revision of the blood culturing practices from central venous catheters and new competency requirement for nurses performing blood cultures.
- The Do U Disinfect Everytime (DUDE) Campaign to encourage hand hygiene.
- A new policy titled Clostridium Difficile Testing on Admission was developed to assist staff in the process for identifying potential cases of C. diff. In addition, C. diff labs undergo a reconciliation process in which cases are reviewed by infection prevention, infectious disease providers and nursing leadership to improve testing appropriateness.

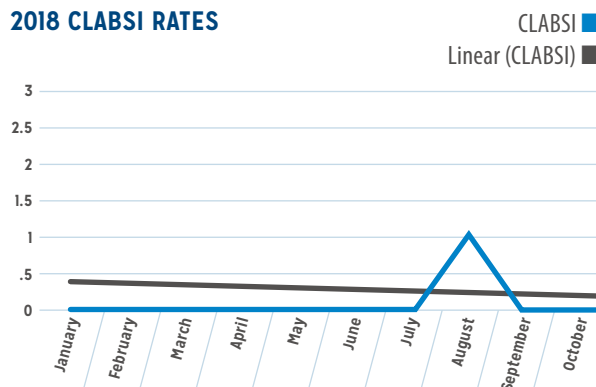
During 2018, there has been a steady decrease of all three hospital acquired infections, due to the new evidence-based practices that have been created and implemented by the HAIR Committee. Since the beginning of 2017, the number of CAUTI rates has been steadily decreasing, with a 56% rate reduction from the first three quarters of 2017 to 2018. CLABSI rates have steadily decreased over the past two years, with an 80% rate reduction from the first three quarters of 2017 to 2018. C. diff rates have decreased by 64% from the first three quarters of 2017 to 2018. Congratulations to the HAIR team members for their contributions in positively influencing patient care and promoting safe, quality nursing practice.

A key focus for infection prevention and control is the prevention and surveillance of hospital-acquired infection (HAI) such as CAUTIs, CLABSIs and C. diff infections. There was a steady decrease of the three infections in 2018, due to new initiatives that have been created and implemented by the HAIR Committee.

Reduction of Central Line Acquired Blood Stream Infection

A CLABSI is a serious infection that occurs when bacteria enters the bloodstream through a central line (e.g., PICC, Hemodialysis (HD) catheter, Port A Cath, etc.) that has been in place for more than two calendar days. This type of infection typically causes a prolonged hospital stay, and it increases cost and mortality risk. In order to prevent these events, proper hand hygiene is necessary before and after contact with the central line. Sterile technique should be ensured when inserting the line, giving medications, changing insertion-site dressings and when removing the line. Patients with central lines should also receive a daily chlorhexidine gluconate CHG bath. CLABSI rates have steadily decreased over the past two years, with an 80% rate reduction from the first three quarters of 2017 to 2018.

2018 CLABSI RATES



Reducing Catheter Associated Urinary Tract Infections (CAUTI)

A CAUTI is a urinary tract infection (UTI) where an indwelling urinary catheter was in place for more than two calendar days on the date of event. These events are the fourth most common HAI. Among UTIs acquired in the hospital, approximately 75% are associated with a urinary catheter.

There are several risk factors for developing a CAUTI, with the greatest being prolonged use of the urinary catheter. Based on this, some of the most important steps in preventing a CAUTI include only using catheters for approved indications and removing them as soon as they are no longer needed. Since the beginning of 2017, the number of CAUTI rates has been steadily decreasing, with a 56% rate reduction from the first three quarters of 2017 to 2018. Several processes have occurred to achieve this, including revisions to the Bladder Management Policy and daily indwelling catheter audits, in order to decrease the number of inappropriate urine cultures and to make sure catheters are discontinued as soon as no longer medically appropriate.

Another important piece to preventing infection includes proper care and maintenance of the catheter while it is in place.

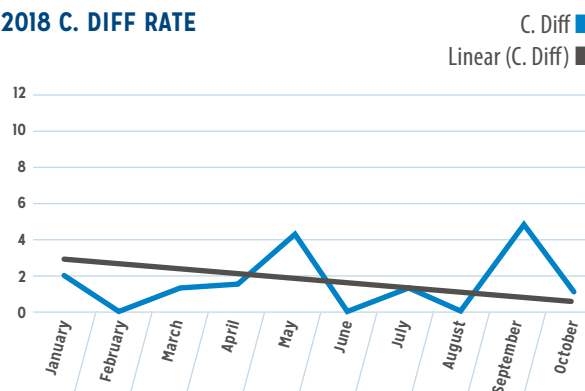
A Heightened Awareness to Reduce Clostridium Difficile

A C. diff infection is due to a bacterium that causes inflammation of the colon, known as colitis. A C. diff infection is considered an HAI when the specimen is collected more than three days after admission to the hospital, and it is positive for C. diff. There are several risk factors for developing C. diff, including prolonged use of antibiotics and being elderly. Appropriate medication prescribing and testing is key to reducing C. diff infection rates, and for the differentiation from C. diff colonization.

In 2018, a new policy—Clostridium Difficile Testing on Admission—was developed to assist staff in identifying potential cases of C. diff. In addition, C. diff labs undergo a reconciliation process in which cases are reviewed by Infection Prevention, Infectious Disease and unit leaders to improve testing appropriateness. As a result of the 2018 implementations, C. diff rates have decreased by 64% from the first three quarters of 2017 to 2018.

In order to encourage appropriate hand hygiene practices, the hand hygiene campaign DUDE launched during Hospital Week, May 2018. This is a fun and interactive way to identify healthcare staff members who forget to wash their hands, by saying, “DUDE!” to help remind them to wash or disinfect their hands.

2018 C. DIFF RATE



Reducing Patient Falls

The Fall Prevention Committee is an interprofessional decision-making group, at the organization-level, that includes clinical nurses from various settings and members from Pharmacy, Occupational Therapy and Transport Services. The committee meets monthly to review fall rates and discuss opportunities for improvement.

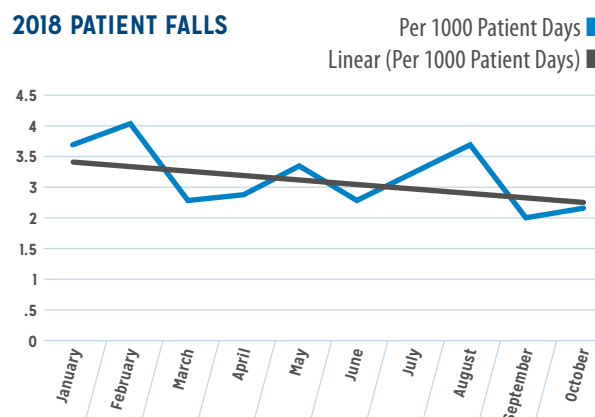
Every patient admitted to an inpatient unit has a fall risk assessment, to quickly identify any fall risk and to promote patient safety. Patients are screened for potential safety risk factors and deficits upon admission, and they are reassessed routinely to determine ongoing need for fall prevention precautions.

On August 9, 2018, HFAH implemented a new fall assessment, Hester Davis.

Below are initiatives taken daily to promote patient safety:

- Report days since last fall for each unit during Daily Safety Call
- Falls team collaborates with the Nursing Quality Council to identify opportunities for improvement
- Clinical nurse representation on Fall Prevention Committee
- Utilize fidget blankets to calm anxiety and occupy patients at risk for falls
- Identify fall risk patients with yellow slippers and new signage
- Use of fall mats to help prevent fall related injuries

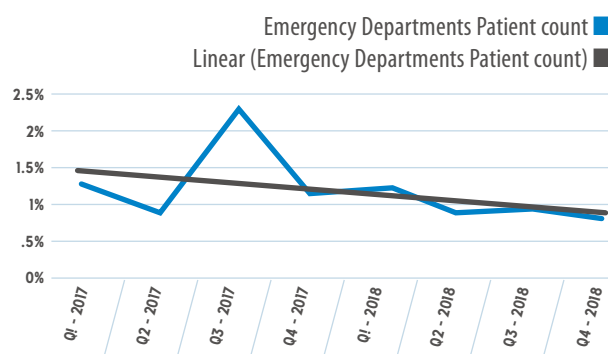
2018 PATIENT FALLS



Left Without Being Seen Rates

The Henry Ford Allegiance Emergency Department has been diligently working to lower the number of patients who leave without being seen (LWBS). In addition to these patients leaving without the care they need, patients leave the system dissatisfied and there are other negative financial implications. Hard work has paid off in steady improvement to our LWBS rate over the past two years reporting rates below the national average of 2%. In just 2 years, we have been able significantly decrease our rate. In CY17, HFAH reported a rate at 1.4%. In CY18, the rate was reported at .96% with a 2019 Year to date rate at an all-time low of .62%. With continued efforts, we hope to continue reporting rates below the national average.

2018 LEFT WITHOUT BEING SEEN



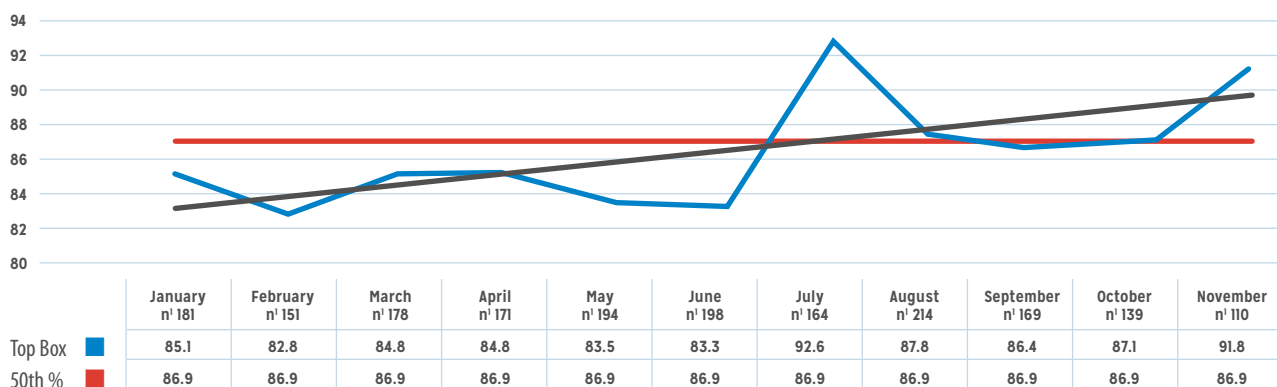
Commitment to Patient Centered Care

Nurses at all levels have been diligently working to improve the customer experience through the HFAH care delivery model for Patient Family Centered Care. Clinical nurses are encouraged to join organizational committees to provide input on topics influencing nursing practice and to support shared decision making. Nurse leaders and clinical nurses, in collaboration with the Patient Experience Department, also implemented Cipher Orchid Rounding® on June 26, 2018 to help make patient rounding more meaningful and effective. The Orchid application features an analytics platform to showcase strengths and identify opportunities for improvement. The top box "Always" response has improved during 2018 for courtesy and respect, careful listening, nurses explaining in an understanding manner and nurse communication roll up.

2018 HCAHPS NURSE TREAT WITH COURTESY & RESPECT

YTD by received date

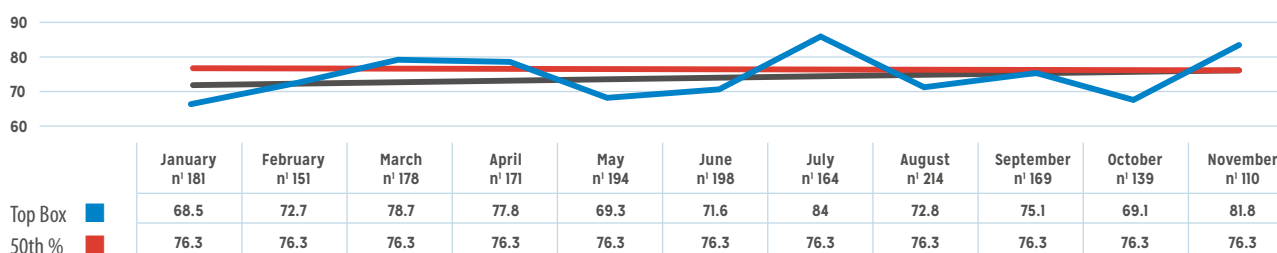
Top Box "Always" response percentage



2018 HCAHPS "NURSE EXPLAIN IN WAY YOU UNDERSTAND"

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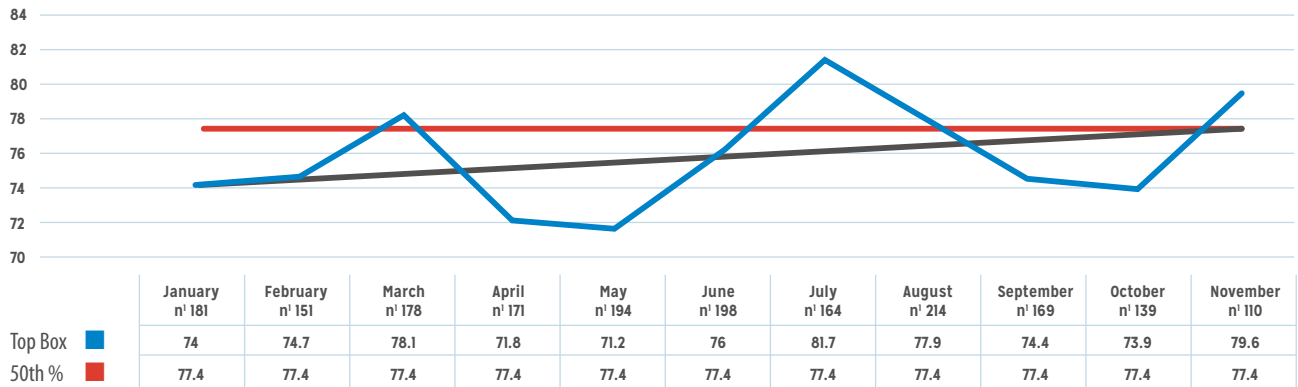
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2018 HCAHPS “NURSE LISTENS CAREFULLY TO YOU”

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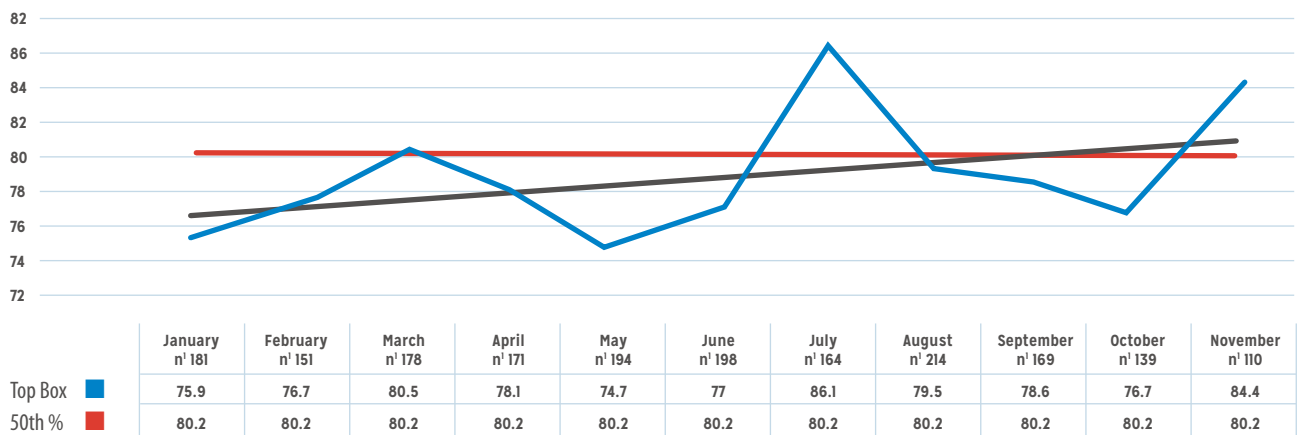
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2018 HCAHPS NURSE COMM ROLL UP

YTD by received date

Top Box “Always” response percentage



Why I Wanted to Be a Nurse



I was a freshman in high-school and my grandpa suffered a stroke. Watching the nurses care for him and being able to explain to our family what was going on and what to expect was the first time I realized I wanted to be a nurse. I knew I wanted to be able to help people and hopefully make a positive impact in other's lives.

— Nicole James, BSN, RN, CMSRN



My church was sending several teams to Africa and China to do preventative health care, and I wanted to go. They needed nurses more than they needed a smiling face that could sing songs with kids. I decided that summer that I was going to go to nursing school so that I could make a difference with the underserved in our world.

— Erin Muller, RN, CUB/SICU



I became a nurse because I had an amazing experience with the nurses here at HFAH with the delivery of my daughter. I wanted to be able to care for someone the way they cared for me and I wanted to be able to give back to my community.

— Rachae DeGroat, BSN, RN, CUB/SICU



I wanted to have a meaningful career with a sense of purpose, autonomy over my work, and the opportunity to connect with others. I knew from a young age I wanted to do something different. I used to watch shows like “ER,” “Dr. Quinn Medicine Woman” and “Doogie Howser, M.D.” which sparked my interest towards nursing.

– Jamie Veith, BSN, RN, CNOR, Surgical Services



My family has experienced MANY illnesses throughout my lifetime. Watching them struggle through these made me want to help others in similar situations. My parents and my children are my “Why.”

– Lindsay HammondL, RN



I never thought I wanted to work in health care but after working in banking for several years, I really felt unfulfilled and not satisfied with where my life was headed. It took me a couple of years but I decided to just go for it and started taking classes. It was the best decision I have ever made. Nursing has changed my life for the better and now I get to help change other people's lives.

– Laura Thomas, BSN, RN, CMSRN, 7East



**HENRY FORD
ALLEGIANCE HEALTH**