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Transformational Leadership
Dear Colleagues and Friends of Centra Nursing,

It is hard to believe that another year has come and gone. The year 2018 was a year of challenges, new opportunities, triumphs and continued achievement for Centra nurses. Each of Centra’s excellent nurses rose to meet the challenges that were put before them and helped us continue to meet our mission of “Excellent Care for Life.” Every one of our nurses contributed to the successes we had in 2018 – from our implementation of the Cerner Electronic Health Record to the significant improvement in our Nurse Sensitive Quality Indicators. This 2018 Nursing Annual Report highlights a variety of snapshots of how Centra nurses are making a difference in the lives of our patients, in the region and for our profession. Some of the 2018 nursing accomplishments for which I am most proud are:

- Successful implementation of the Cerner Electronic Health Record system
- Welcoming a new chief nursing information officer – Jenna Lloyd, DNP, FNP-BC, MSMIT, CNL, RN
- The high level of Centra Nursing Engagement Program (CNEP) participation
- A continued laser-like focus on improving care quality across the Centra system
- The ECMO program implementation
- The amazing work that took place to put our Magnet document together. Seeing our nursing leadership team work together to showcase our Centra nurses was impressive.
- The continued success of our Nurse Residency Program (NRP) – 154 graduates attended NRP in 2018
- The continued work of our thriving Nursing Governance Board
- Welcoming a full time DNP prepared nurse researcher – Vicky Brunet, DNP, NNP-BC, CCRN
- The recognition that some of our nurses have achieved for their contribution to the profession – Ann Clark, RN, CMSRN, and Katie Paige, CNM, MSN, both won national awards for their published research.
- A successful Virginia Henderson Nursing Research Symposium

I look to 2019 with anticipation, eager to see continued progress as we optimize the Cerner tool and as we work through the Magnet redesignation process. In closing, I want to extend a personal and heartfelt thank you to all our fantastic Centra nurses for a successful 2018. Your passion and commitment to patient care help us shine as an organization, and I am thankful for each of you. Your continued commitment to Centra, our patients and our profession is sincerely appreciated. It’s my privilege to work with you and serve as your chief nursing officer.

Respectfully,

Curt Baker, BSN, MBA, RN
Senior Vice President and Chief Nursing Officer
Centra reaffirmed its commitment to nursing in naming a new chief nursing information officer. Dr. Jenna Lloyd joined Centra in June 2018 as the chief nursing information officer. She has a wealth of knowledge in nursing, information technology, and education.

Jenna earned her bachelor of science in nursing from the University of Lynchburg in 1999, her master of science in nursing and nurse practitioner certification in 2002, and doctor of nursing practice in 2012. She also holds a master of science in the management of information technology from the University of Virginia’s McIntire School of Commerce, which she earned in 2013.

Her role as chief nursing information officer will provide leadership to all clinical areas of nursing practice. Jenna will focus on the integration of technology to improve patient care, the patient experience, and workplace experience for all nursing staff.
This past year has been a busy one for the medical-surgical division. We continue to partner with our nursing staff to help make Centra a great place for patients and families to receive care and for nurses to practice. It also has been our pleasure to enjoy a closer working relationship with Christi Cash, manager EDO/AU, who is now working with our leadership team!

Professional Growth

The ongoing professional development of our nursing staff is important for career growth and continued safe patient care. We are always thrilled to see the achievement of our nursing staff through the Centra Nurse Engagement Program, (CNEP), certifications, and professional conference attendance.

We were pleased to see the participation of 53 (seven CNEP III and 46 CNEP IV) nurses within the acute care division on the CNEP. In addition to CNEP, we were able to send nursing staff to several nursing conferences including: January 2018 Patient Safety Summit, the August 2018 ANA Opioid Conference, the Global Leadership Summit, the September 2018 AMSN Annual Conference (at which Ann Clark received the writer’s award), the November 2018 Kronos Conference and the November 2018 Press Ganey Conference. The ongoing professional development of our nursing staff is important for career growth and continued safe patient care.

Acute Care Division Leadership

Every year brings new unforeseen opportunities, and this year was no different. With transitions, several of our wonderful Centra nurses assumed formal leadership positions:

- Debra Poindexter was promoted from clinical quality coordinator to Oncology unit manager.
- Bridgette Smoot was promoted from clinical quality coordinator to Orthopedic unit manager.
- Stacey Ellis was promoted to Pulmonary night shift clinical quality coordinator.
- Christy Reynolds, 3East Surgical night shift clinical quality coordinator, moved to day shift quality coordinator, and Matt Powell was promoted to night shift clinical quality coordinator.
- Courtney Moss was promoted to night shift General Medical Unit clinical quality coordinator.
- Renassa Gordon was promoted to manager, Kronos scheduling and timekeeping.
- Laura Bierowski was promoted to operations manager, Call Center.

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Quality

FALLS REDUCTION

Our True North metrics include focus on those items that make a significant difference in the outcomes of our patients and caregivers. They include team engagement, patient experience, and quality metrics like falls, pressure injuries, catheter-associated urinary tract infections, and catheter-related bloodstream infections.

Falls continue to be a challenge for many healthcare systems and present a major opportunity for all members of the interdisciplinary team, clinical and non-clinical, to focus on how to prevent falls in the hospital setting and how to reduce injurious falls.

In 2018, there were a total of 92 falls with injury across the Centra system and 16 falls with serious injury. Falls have been identified as one of the top five sentinel events in hospitals, with approximately 42 percent resulting in injury, and 8 percent causing serious injury.1

Falls risk assessment and falls prevention protocols are two important factors utilized in the prevention of falls and injurious falls. Patients who are identified at risk for falls through a risk assessment are 21 percent less likely to experience an injury with a fall. With a fall prevention protocol implemented, falls are more likely to be assisted by employees, which also can reduce fall-related injuries. Studies have shown that falls without employee assistance are 50 percent more likely to result in injuries than falls without any assistance.2

With our Cerner go-live, we changed our falls risk assessment to the Johns Hopkins Falls Risk Assessment Tool (JHFRAT), which classifies patients as low, moderate, or high falls risk.

Our Centra experience demonstrates that the majority of our falls are occurring unassisted and often are occurring in the early morning hours when patients are attempting to get to the bathroom.

How we can help

Nurses and nursing care are pivotal in the assessment, prevention, and reduction of harm related to falls. Intentional or purposeful hourly rounding is vital as we proactively seek to toilet our patients. In addition, we use visual cues like yellow falls bracelets and utilization of the careboards to indicate to all members of the interdisciplinary care team and to families about the “Fall Risk” assessment and how the patient should be mobilized (up with one assist, two assists, etc). And, there are the basics, like keeping call bell and personal items within reach, bed/chair alarms set as needed, and a room free of clutter.

Falls with injury can lead to death in the elderly population. Diligence in being astute to these best practices can truly mean the difference between life and death.

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PRESSURE ULCERS

Pressure ulcers are one of the biggest challenges in a healthcare environment. In 2008, the Centers for Medicare and Medicaid Services decided not to pay for hospital-acquired pressure injuries. It was felt that they could be prevented by evidenced-based practices. Pressure injuries are seen in high-risk populations such as the elderly, those with chronic illness, and critical patients.

We continue to focus on the prevention of pressure ulcers in the acute care setting with new resource cards available to bedside staff. In 2018, wound care resource books were developed, and all units were given large and small versions to place on carts. Education events were offered to staff with cafeteria posters, the Skin Diva party and the Wound Care Associate program.

Paola Richard, MSN, RN, clinical nurse specialist, helps us to track the locations and potential causes of all hospital-acquired pressure ulcers. Throughout the year the HAPI committee has worked on issues of medical device-related injuries and Stage 2, 3, 4, unstable to stage and deep tissue pressure injuries.

There were seven units with no DTIs: Orthopedics, Surgical, MSIU, Oncology, NIMU, NICU, and GMU. Three units had an impressive no DTIs for two years: MSIU, GMU, and Orthopedics.

This year, we began an exciting new role on 5East Pulmonary – that of the mobility aides. These aides are used to mobilize our patients, which will help prevent the development of pressure ulcers. During leader rounding, I always attempt to ask our patients how well they are moving.

Again, nursing makes all the difference in the preservation of skin integrity and prevention of pressure ulcers. How important is your daily work!

Joan Deal, MSN, MBA, NEA-BC
Vice President of Acute Care Nursing Services

The year 2018 was the first full year as an established critical care service line. We formally began work in September 2017, and impressive progress has been made in the advancement of care with our patients in the critical care and intermediate care setting.

Centra Critical Care Services officially rolled out an intensive care unit (ICU) liberation initiative. This program, endorsed by the Society of Critical Care Medicine (SCCM), aims to liberate patients from the harmful effects of pain, agitation/sedation, delirium, immobility, and sleep disruption in the ICU. The objectives of this project have resulted in improved patient outcomes and reduction of risk of long-term consequences from a prolonged ICU stay. In support of this program, the service line hired an energetic, passionate and forward thinking dedicated physical therapist, Garry Gellert. His leadership and inspirational style have fostered a culture of “can” in early mobility of even our ventilated patients.

As part of this initiative, Centra opened a post-intensive care syndrome (PICS) outpatient clinic serving patients that have had intensive care admissions. The clinic offers services from an interdisciplinary team yielding improved long-term outcomes for this population. A great deal of credit goes out to the ICU unit manager team and multiple engaged staff members from each unit for their leadership and hard work implementing this program. The team recently took part in the development and deployment of simulation experiences for all staff, hardwiring the components of the initiative and connecting nurses to the purpose and impact of the work. The program has many components including empowerment of the families and caregivers as part of the recovery team. Patient journals are being used to document the time in the ICU for patients who may not recall those days clearly. There is also a Caregiver Café educational offering at scheduled times in our waiting room to educate and embolden those closest to the patient to take part in their care.

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A second program was started in 2018 that enables a lifesaving therapy to be offered at Centra. This new program, under the direction of Christian Butcher, medical director for extracorporeal membrane oxygenation (ECMO), and Peter Martin, ECMO program coordinator, brings a treatment modality to the Lynchburg region. Peter best explains this service:

In early November of 2018, Centra launched a new adult comprehensive ECMO program at Lynchburg General Hospital. ECMO is a specialized form of life support for patients suffering from life-threatening illness that prohibits their heart and/or their lungs from functioning properly. Examples of conditions that benefit from ECMO include severe lung damage caused by infection or shock resulting from a massive heart attack. The ECMO machine can fully support the patient’s lungs and heart during the acute phase of their illness allowing time for the recovery. ECMO is very similar to heart-lung bypass, but instead of performing this therapy in the operating room, our specialist team performs ECMO at the bedside. Successfully building the new program required an impressive level of collaboration between many different healthcare disciplines as well as a number of different departments within Centra. That collaboration has proven to be the foundation for both the development of the ECMO program and the means for positive patient outcomes.

ECMO has historically been managed by certified clinical perfusionists. A common challenge associated with ECMO programs is limited availability of perfusion to sit at the bedside with patients requiring this therapy. Centra elected instead to utilize our skilled clinicians. Working closely with the leadership in the respiratory department, the emergency department, and each of our intensive care units, the ECMO program chose a team of registered nurses and respiratory nurses to comprise our ECMO specialist team. The team was placed in three separate phases of intense classroom and practical lab training that addressed topics ranging from machine operation to pathophysiology to patient selection and management. Critical care intensivists from Centra Medical Group also partnered with critical care physicians from Lynchburg Pulmonary Associates to serve as our ECMO managing physician team. The collaboration was only beginning. The ECMO program now encompasses personnel from many different areas of our health system, including switchboard operators, radiology, laboratory, blood bank, transport, operating room, emergency department, all intensive care units, Surgical Services, and the cardiac cath lab. The close partnership developed among all of these departments will continue to drive the success of this new program – a program that is already saving lives.

– Peter Martin RN, BSN ECMO Program Coordinator

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One last area of pride is in the practical operations of the unit for nurses and certified nursing assistants providing direct care at the bedside. Our cardiac intermediate care unit, under the leadership of Jacob Brumfield, unit manager, was the first to implement a block scheduling concept on a unit that provides coverage 24 hours a day, seven days a week, every day of the year. This innovative staffing model has proven to be a differentiator for our system compared to any other system in our region. The concept allows for:

- Stability of scheduling resulting in significant reductions in staffing shortages by shift and enabling reductions in reliance on contract labor
- Scheduling structure that allows staff to plan their personal lives well in advance
- Fostering teamwork among groups that work together on a regular basis, improving quality, safety, and experience for the team and the patients in our care
- Stability in skill/experience mix each shift
- Scheduling perks available in the different blocks, including reductions in weekend requirements and long stretches off
- Recruitment opportunity

A sister project was implemented at Centra with an enhanced weekend only option for employment that has set the block scheduling concept up for success. We continue to take pride in the quality of care and the culture of team that defines critical/intermediate care at Centra. The team members make the difference!

Michelle Cabell, BSN, RN, M.Ed.

Vice President of Critical Care and Neurosciences
The year 2018 has been a year of reflection. The Centra Medical Group (CMG) nursing team has evaluated where we have been and where we are going both in our profession and in the organization. The legacy of our profession is as rich and diverse as nurses are today. Florence Nightingale would be honored by the road we have taken. The accomplishments of 2018 are remarkable in the Centra Medical Group.

Eighteen CMG registered nurses participated in the Centra Nursing Engagement Program and successfully achieved a ranking of Clinical Nurse III or IV. These nurses represented cardiopulmonary rehabilitation, The Wound Care Center, Stroobants Cardiovascular Center, general surgery, and Lynchburg Family Medicine Residency. With this advancement, the nurses showcased their own projects, participated in evidence-based article reviews, and volunteered in community events.

Nursing staff from the medical practices were heavily involved in the development, training, and implementation of the electronic medical record. CMG celebrated spirit week the week before “Go Live” to get teams engaged and excited for the Cerner journey.

Two CMG nurses were Daisy Award recipients. This recognition program provides ongoing recognition of the clinical skill and especially the compassion nurses provide to patients and families in CMG.

With the continued shortage of nurses across the nation, the nursing professional group worked together to focus on avenues to recruit nurses. CMG attended all recruiting events and displayed their newly created CMG banner and brochures.

CMG primary care navigators had an eventful year. Weekly team huddles were implemented, the group participated in the first 2018 Centra Navigator Retreat, added an FTE to CMG Brookneal through a grant, and obtained real-time identification of CMG patients upon discharge from any Centra inpatient acute care facility, emergency department or emergency observation department with Cerner implementation.

The nursing teams in CMG were instrumental in contributing their great work through the writing of Magnet articles. Several practices shared what they do every day to impact the patients and families entrusted to them.

Centra Medical Group’s service to the community and commitment to excellent care is demonstrated by the CMG nursing teams. Their commitment, investment, and involvement to patients and families are the foundation of their work.

Susan Brown, MSN, RN
Director of Clinical Care, Centra Medical Group
In 2018, Centra Lynchburg General Hospital, Centra Virginia Baptist Hospital and Centra Medical Group were focused on writing our Magnet document in preparation for our 2019 Magnet redesignation. Centra Lynchburg has been Magnet-designated since 2005 (LGH/VBH/CMG are currently on our third designation), and we are working toward our fourth designation. Magnet designation and redesignation is a tangible symbol of our commitment to nursing excellence.

The Magnet credential is the highest national honor for professional nursing practice. Only 8 percent of the nation's hospitals are Magnet designated. Even fewer achieve redesignation; only 2.4 percent of hospitals in the nation achieve a third Magnet designation and less than 1 percent achieve a fourth Magnet designation. That makes Centra LGH/VBH/CMG special.

With each redesignation, Magnet raises the bar and requires no less effort and commitment than the previous designation. Magnet eligibility requires that applicants (and those seeking redesignation) demonstrate outperformance of external benchmarks across the majority of indicators and units for eight consecutive quarters. As part of our Magnet redesignation process, we report RN satisfaction, patient satisfaction and nursing sensitive quality indicators. (We select which specific indicators we report based on a list provided by the ANCC). Our performance in each of these elements met or outperformed the Magnet benchmark. We were successful for all our reportable categories of data. We measure up!

Nurse Satisfaction (All Units – Choose four categories to report)
√ RN Satisfaction (RN Satisfaction Survey 2017) – 57.5 percent of nursing units outperformed the benchmark related to the four categories below:
  • Fundamentals of Quality Nursing Care
  • Autonomy
  • RN to RN Teamwork and Collaboration
  • Professional Development

Nurse Sensitive Quality Indicators (Inpatient – choose four)
√ Falls with Injury – 68.4 percent of nursing units outperform the benchmark
√ HAPI Stage 2 and Above – 71.4 percent of nursing units outperform the benchmark
√ CLABSI – 87.5 percent of nursing units outperform the benchmark
√ Device Related HAPI – 87.5 percent of nursing units outperform the benchmark

Nurse Sensitive Quality Indicators (Ambulatory – choose two)
√ Falls with Injury – 100 percent of nursing units outperformed the benchmark
√ Door to Balloon Time – 100 percent of nursing unit outperformed the benchmark

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Patient Satisfaction (Inpatient – choose four)
√ Patient Engagement/Patient Centered Care – 10 of 19 (52.6 percent) units outperformed the benchmark
√ Responsiveness – 52.6 percent of nursing units outperformed the benchmark
√ Pain – 72.2 percent of nursing units outperformed the benchmark
√ Careful Listening – 58.8 percent of nursing units outperformed the benchmark

Patient Satisfaction (Ambulatory – choose four)
√ Patient Education – 75 percent of nursing units outperformed the benchmark
√ Safety – 100 percent of nursing units outperformed the benchmark
√ Courtesy and Respect – 80 percent of nursing units outperformed the benchmark
√ Careful listening – 60 percent of nursing units outperformed the benchmark

Magnet designation reflects our continuous pursuit of excellence not only for the care of our patients but for professional nursing at Centra; the practice of nursing and the satisfaction of the nurses who practice here. Our Centra nurses are amazing, and our Magnet journey reflects their commitment to the profession, to our community and to our patients – from our robust research program to our innovative and forward-thinking nurses who work to improve care on a daily basis. I am proud and honored to showcase their work.

Caryn Brown, MSN, MHA, RN-BC, NEA-BC
Magnet Program Coordinator, Patient Engagement Coordinator
Women and Children’s Services Update

Central Women and Children’s Services established teams to ensure that all the elements of the maternal safety bundles recommended by the Council on Patient Safety in Women’s Health Care were implemented to ensure our mothers and babies received evidenced-based care.

The obstetrical hemorrhage team worked to ensure immediate access to the hemorrhage cart and necessary emergency medications. The team also ensure unit-based drills with post drill debriefs. The team also determined how to obtain quantitative measurements of cumulative blood loss and developed an obstetrical hemorrhage emergency management plan.

Another team addressed safe reduction of primary nulliparous cesarean births and developed a comprehensive plan for labor comfort measures to increase the likelihood of a vaginal birth and adopted provider education and training methods to promote for labor progress. Our Nulliparous, Term, Singleton, Vertex (NTSV) Cesarean birth rate was 19 percent, well below the benchmark of 24 percent.

The maternal mental health team established an evidenced-based mental health screening tool (PHQ-9) across all obstetrical providers and developed a protocol to ensure that women received follow-up care from mental health providers. This screening and the collaboration with our mental health department has helped establish a nonjudgmental culture of safety with a multidisciplinary approach. A regional mortality review coordinator was established through a grant from the Centra Foundation and allowed for a systematic review of all maternal morbidity events, including monitoring of outcomes and process metrics.

The Women and Children’s Services team continued its work treating women with opioid use disorder. The team introduced newly designed innovative “pods” in the intensive care nursery that incorporate family involvement, breastfeeding, pain management, and infant care counseling, education and resources. Our lactation consultants ensure breastfeeding and lactation support for all postpartum women on pharmacotherapy. Our team also worked to educate staff regarding neonatal abstinence syndrome (NAS) and worked to ensure non-pharmacological techniques were utilized such as holding, rooming-in in the neonatal intensive care unit (NICU), frequent feedings, and quiet environment. The team also worked to provide all obstetrical patients access to immediate postpartum contraceptive options (e.g. long-acting reversible contraception (LARC)) prior to hospital discharge.

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The medical surgical intermediate unit team hired (for the first time) LPNs to the unit and initiated the triad model of care. The RNs, LPNs and CNAs come together as one team to care for their patient group. Using this model, the patients have more hands-on care, and more time is spent with them at the bedside. Within this model, the RN focuses on assessments, education, and the plan of care for patients as well as managing the team while the LPN puts the focus on medication management, re-enforcement of education, management of IVs and care of dressing changes. The CNAs take on the activities of daily living and vital signs.

Our pediatric department focused on improvements in hospital discharge for our patients and their families by providing timely and efficient care. Timely discharge frees up personnel, space, and equipment with the enhanced benefit of incremental increases in revenue paired with cost reduction. It creates available beds that facilitate efficient patient flow through the emergency room and operating room. A quality improvement project was done to reduce time to discharge of pediatric patients to less than two hours (120 minutes), thereby increasing satisfaction among patients, families, and staff in addition to improving turnaround time. Interventions showed remarkable improvements in discharge time. Post implementation an increase of 18 percent was achieved in discharging patients within 120 minutes.

Lastly, the neonatal intensive care nursery at Centra Virginia Baptist Hospital is delighted to see a new neonatal ambulance launching soon that will allow our dedicated transport team to provide quick and skilled interventions around our region!

Kim Price, DNP, MBA, RN, NEA-BC
Managing Director of Women and Children’s Services
Structural Empowerment
In 2018, the professional nursing development (PND) department continued to focus on collaborative initiatives with multiple interdisciplinary teams across our organization. Our purpose for interdisciplinary work is to better align our knowledge, skills, and resources so we can collaboratively focus on improving patient outcomes with an emphasis on quality, safety, staff education and professional growth. This collaboration encompassed endeavors from multiple disciplines, including the professional clinical practice team, continuing education specialists, patient safety, infection prevention, The Virtual Learning Center and human resources.

Professional nursing development coordinates Centra’s Nurse Residency Program (NRP), which is a transition-to-practice program for new graduate registered nurses. The program curriculum has been jointly developed with Vizient and the American Association of Colleges of Nursing and is used by multiple healthcare systems in Virginia and across the country. The program focuses on retention and support for new nurses during their first year of practice. The Nurse Residency Program was first implemented at Centra in 2014 and since that implementation, our turnover rate for new graduate nurses has decreased from 19.4 percent to 3.45 percent.

For 2018, we have enrolled 154 new graduate registered nurses into the NRP program with a total of 409 new graduate nurses since 2014. Several NRP graduates were invited to present their evidence-based practice projects at the 2018 Virginia Henderson Research Symposium with one nurse residency groups’ project being selected as the top poster for 2018.

Professional nursing development provided new hire nursing orientation to 1,152 registered nurses, licensed practical nurses, nurse externs, and certified nursing assistants for all of our facilities, including Centra Medical Group and Senior Care Services. This is a collaborative effort with our human resource team, Virtual Learning Center team and many other interprofessional teams at Centra. Our survey results state that many of our travel nurses feel like we have one of the best orientations they have received!

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The organizational competency validation program for nursing was completely restructured throughout 2018 as we worked toward implementing the Donna Wright method for competency validation. This required multiple nursing teams working together with the nurse education specialists to review and redesign nursing competencies. We provided 387 registered nurses and licensed practical nurses with competency validation training in 2018.

The professional nursing development team collaborated on many organizational initiatives in 2018, including new products for CAUTI and CLABSI prevention, falls education and prevention strategies, Cerner initiatives and Magnet writing for our 2019 Magnet redesignation. Toward the end of 2018, we were able to grow our department and add unit-based educators to our team to support frontline staff and provide them with additional educational resources.

The professional nursing development team is proud of the collaborative relationships and progress made in 2018. Moving forward for 2019, professional nursing development will continue to focus on Centra’s mission of “Excellent Care for Life” by working collaboratively with other healthcare teams to enhance our great work on quality, safety, patient satisfaction, and employee engagement.

Holly Reynolds, MSN-Ed, RN-BC
Manager, Professional Development
The Centra Nursing Governance Board played a fundamental role in 2018 as the organization prepared for and transitioned to a new electronic health record. Many of the board members served as superusers and supported our frontline staff with this major change. We ushered Cerner in on September 1, 2018, and it was through staff dedication and support of each other that we faced this major change and remained focused on our patients.

The Centra Nursing Governance Board gathered feedback from the frontline staff in 2018 and continued the process improvement work with the CNEP program. The CNEP program helps to promote nurse engagement and professional development. The Nursing Governance Board worked in 2018 to create a CNEP Program for LPNs as well. This program rolled out, and our LPN colleagues submitted their intent to participate in September 2018. The Nursing Governance Board envisions that process improvement for these programs will continue year over year based on our staff feedback.

In 2018, 28 registered nurses achieved CNEP III, and 213 registered nurses achieved CNEP IV. The names of the registered nurses who achieved this advancement are listed on the following pages. Congratulations to all. Our RN and LPN colleagues will all celebrate their achievement and show their great work at our CNEP celebration May 7, 2019.

The Centra Nursing Governance Board supported the Daisy program and month over month we saw increases in the number of nominations of our staff. The board also saw the need for a similar program to recognize our nursing assistants. The team worked on the TULIP program, which has become another recognition program for our teammates that allows them to be recognized by our patients and patient’s families.

The Nursing Governance Board looks forward to serving as clinical leaders in our organization. We are looking at a focus on nurse retention based on staff feedback and how we work alongside our nursing leadership team to promote retention and a focus on our culture.

Elizabeth Poole, BSN, RN, CCRN, and Kimberly Vess, BSN, RN, CNEP IV

2018 Nurse Governance Board Co-chairs
Centra Nurse Engagement Program (CNEP)

This program provides recognition for RNs who contribute to and participate in activities, projects, and committees in the categories of research, education, professional engagement, clinical expertise, and the Centra experience. There are two levels of recognition, CNEP III and CNEP IV. Points are collected for each level. Participation is voluntary, and nurses must participate each year and meet the requirements in order to maintain their CNEP level. Each of the nurses listed below met the engagement requirement for the level for which they are awarded. Congratulations to each of these nurses who achieved the corresponding CNEP levels.

The following individuals achieved level III in the CNEP program.

<table>
<thead>
<tr>
<th>Name</th>
<th>Department</th>
<th>Specialty</th>
</tr>
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<tbody>
<tr>
<td>Susan May</td>
<td>EDO</td>
<td>Maryanne Taylor</td>
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<tr>
<td>Alyssa Kurtz</td>
<td>LGH Main OR</td>
<td>Kathryn Dunn</td>
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<td>Regina Strange</td>
<td>LGH PACU</td>
<td>Jeffrey Martin</td>
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<td>Blair Collins</td>
<td>Pulmonary</td>
<td>Mary R. Brown</td>
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<td>Resource</td>
<td>Ashley Scott</td>
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<td>Amber Bryant</td>
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<td>Judith Powers</td>
<td>LFMR</td>
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<td>Anne Lewis</td>
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<td>Veronica Richerson</td>
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<td>Cindy Tweedy</td>
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<td>Stacy Dowdy</td>
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The following individuals achieved level IV in the CNEP program.

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<td>Lori Mason</td>
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<td>Ashley Mitchell</td>
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continued on page 22
The following individuals achieved level IV in the CNEP program.

continued from page 21

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continued on page 23
The following individuals achieved level IV in the CNEP program.

continued from page 23

Ashley Taylor  C and A Psych  Lauren Malott  ED
Crystal Cater  C and A Psych  Katelyn Adams  CTICU
Kaila Sledge  C and A Psych  Sharron Basso  CTICU
Virginia Blevins  Cardiac Cath Lab  Pearl Banks  CTICU
Sharon Connelly  Cardiac Cath Lab  Brittany Carter  CTICU
Amy Ellington  Cardiac Cath Lab  Anne Caylor  CTICU
Heather Jones  Cardiac Cath Lab  Kathryn Crabtree  CTICU
Cheryl Patterson  Cardiac Cath Lab  Jami Dunn  CTICU
Tracey Payne  Cardiac Cath Lab  Meredith Etheridge  CTICU
Mark Smith  Cardiac Cath Lab  Keith Grasser  CTICU
Chas Murray  Adult Psych  Cynthia Merritt  CTICU
Kimberly Frietas  Pediatrics  Michelle Norton  CTICU
Fran Concklin  Pediatrics  Jacinda Shin  CTICU
Pamela Leanne Cunningham  Pediatrics  Halla Swiney  VBH
June Kelly Mays  Pediatrics  Laura Collier  VBH OR
Patricia “Pachi” Decarvalho  Pediatrics  Leandra Lusk  VBH OR
Patricia Conroy  Pediatrics  Wendy Burks  VBH PACU
Karen Tucker  Pediatrics  Cynthia Tabaiian  VBH PACU
Paige Marks  Pediatrics  Kathryn Heidorn  NIMU
Tiffany Kidd  Pediatrics  Marjorie Riner  NICU
Audrey Johnson  Pediatrics  Jessica Womack  NICU
Jodi Zehr  Surgicare  Margo Kollman  NICU
Melissa Motley  Surgicare  Mason Tumas  NICU
Carla Howell  Surgicare  Jennifer Schenkel  NICU
Kimberly Martin  Surgicare  Kathy King  STICU
Rika Lee  Surgicare  Ashley Preusser  STICU
Charity Whorley  Surgicare  Laura Hienkle  STICU
Shirley Johnson  Surgicare  Erin Eagen  CIMU
Celeste Calloway  Surgicare  Ellee Rollins  CIMU
Susan Cheatham  Surgery Center  Karen Briggs  CIMU
Christy Masters  Surgery Center  Jian Thompson  CIMU
Jenny Candler  Surgery Center  Kristen Blackstock  CIMU
Sue Whitacre  Surgery Center  Ben Collurafici  CIMU
Monica Hall  Surgery Center  Mary Sparnroft  Geriatric Psychiatry
Stacy Sayre  Surgery Center  Jasmine Mason  Interventional Radiology
Melanie Cash  Surgery Center  Monica Tucker  Interventional Radiology
Becky Driskill  Surgery Center  Heather Pollard  Interventional Radiology
Katherine Campbell  ED  Kami Ashworth  GMU
Louraine Stegall  ED  Kaitlin Coleman  GMU
Jason Peters  ED  Gretchen Croft  GMU
Brittany Breen  ED  Gay Harvey  GMU
Cara March  ED  Molly Jones  GMU
Kelley Cash  ED  Brittany Robertson  GMU
Candice Craig  ED  Lanna Sprouse  GMU
Ruth Ann Smulik  ED  
Interprofessional Education Services’ (IPES) purpose is to provide high-quality, evidence-based educational opportunities that promote lifelong learning for the interdisciplinary healthcare team with expected results that change the healthcare team’s skill set, performance, and/or patient outcomes. In interprofessional education, nursing, pharmacy and providers all learn together. Centra completed the first of our six-year accreditation term with Joint Accreditation in 2018. This past year also was marked with significant growth in serving the healthcare team.

Education on interprofessional collaborative practice (IPCP) and the role of IPES was provided to the healthcare team through local and national presentations in 2018. This was achieved locally at the Nurse Residency Program Professional Development Fair, monthly provider orientation, and education champion meetings. The monthly IPES Education Update was initiated in 2018 and disseminated to the healthcare team. At the national level, Centra was represented at poster and podium presentations to share best practices related to the journey for Joint Accreditation.

In May 2018, IPES completed the roll out of Tracker, an electronic database for accredited continuing professional development provided by Centra. Tracker brings many benefits to the healthcare team in maintaining records, accessibility, and communication. The fall of 2018 brought the ability to award physician assistants (PA) their accredited credit type, as the American Academy of Physician Assistants joined the Joint Accreditation collaborative. At the end of 2018, IPES had authority to accredit continuing professional development for medicine, nursing, pharmacy, and physician assistants.

In 2018, IPES collaborated with planning teams to provide:
- 3,700 hours of accredited continuing professional development opportunities (greater than 400 percent increase compared to 2017)
- 560 sessions of accredited continuing professional development (greater than 200 percent increase compared to 2017)
- 45,000 hours awarded to the healthcare team (greater than 500 percent increase compared to 2017)
- Six new accredited continuing professional development activities

As we look to the future, expansion is anticipated as additional professions join the Joint Accreditation collaborative. Interprofessional grand rounds will be reformatted with a focus on highlighting best practices of interprofessional teams where we can learn with, by, and from each other. Monthly rounding will be initiated at Centra acute care facilities to provide education on IPCP and why it is important. IPES will continue to partner with service lines to sponsor more specialty specific symposia that focuses on interprofessional collaborative practice.

Tina Cheek, BSN, RN-BC
Manager, Interprofessional Education Services

Dean Gianakos, MD
Director, Medical Education
In 2018, Centra worked to ensure that our team members had every opportunity to be engaged members of the Centra family, especially through the use of social media to communicate and engage with our clinical teams. Nurses often are bombarded by multiple emails a day, and they do not have the time to check their inboxes. The use of Facebook has become a great way to communicate information to our nurses and staff. It helps us stay up to date with everything that is going on in our nurses’ lives and helps to promote positivity. We had many fun and engaging activities in 2018:

- In September 2018, we partnered with our nursing leaders to engage our teams in fun activities to celebrate National Nursing Professional Development week. One of those activities was focused on developing professional relationships between our professional development team and our nurses. By encouraging nurses to take a more active approach in their professional development, they can greatly enhance their own careers, assist their colleagues, and make major contributions toward improving healthcare systems.

- In September 2018, we focused on the Daisy Award program. Studies show that meaningful recognition is vital to maintaining a healthy work environment, and it energizes positive attitudes. It is also extremely important for retaining high achievers, millennials, and experienced nurses. Clinical nurses Tamara Bryant and Dana Stinnett helped promote the Daisy program, which was advertised throughout the hospitals and medical centers. We created a sticker that has a QR code that makes it easier for patients, family members, and nurses to nominate individuals for the Daisy Award.

- In October 2018, we celebrated National Pediatric Nurses Week. Centra partnered with pediatric nurses Kelly Mays and Patricia “Pachi” De Carvalho to create a memorable Pediatric Nurses Week celebration. We presented Cathy Goad, pediatrics unit manager, with a framed write-up of her Virginia Nursing Association Award nomination story. We created an art-themed photo booth for the unit, and we participated in the Society of Pediatric Nurses social media contest. Centra’s submission was posted on the Society for Pediatric Nurses Facebook page as a runner up.

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• In 2018, we focused on positivity, using a Positive Post-it® Note campaign. We wrote positive messages on Post-it notes, enabling nurses, physicians, families, patients, and passers-by the opportunity to take Post-it notes with motivational sayings. That was a small way to spread positivity, and it benefited everyone. There have been positive Post-its spotted throughout the hospital. The campaign has been a great success and continues to this day. We have heard great stories about how this has benefited nurses, environmental services employees, family members, and patients.

• On Friday, October 19, 2018, the oncology department had a Pink Friday celebration in honor of breast cancer awareness month. Debra Poindexter, oncology unit manager, and Casey Bragg, clinical engagement coordinator, coordinated this event, which included food and a photobooth.

• In November 2018, we introduced large coloring sheets to several unit’s break rooms. Coloring has many therapeutic health benefits such as reducing stress, relaxing your mind, and creating mindfulness.

I, along with my nursing leadership colleagues, look forward to continuing the engagement excitement momentum into 2019. Watch for the exciting things that we will do in 2019 to promote nursing engagement!

Casey Bragg, M.Ed.
Clinical Engagement Coordinator
Centra supports to advance their education and achieve certification through various support mechanisms. Those support mechanisms include tuition reimbursement, Centra’s own RN-BSN program, and flexible scheduling. Centra supports nurses to achieve certification through providing PEARLS certification review programs, participating in SUCCESS PAYS through the ANCC (which allows nurses to take the certification test with no out-of-pocket expense), and certification reimbursement for both initial and recertification.

The following individuals advanced their education:

Amanda “Katie” Bradley, BSN, RN, earned her BSN
Amanda Jude, BSN, RN, earned her BSN
Amanda Marsh, BSN, RN, earned her BSN
Anita Floyd, BSN, RN, earned her BSN
Anne Ewers, BSN, RN, M.Ed, earned her Masters in Education
Brittany Bible, BSN, RN, earned her BSN
Bronwyn Harvey, BSN, RN, earned her BSN
Brooke Baldwin, BSN, RN, earned her BSN
Christie Knight, BSN, RN, earned her BSN
Christy Reynolds, BSN, RN, earned her BSN
Courtney Gilbert, BSN, RN, earned her BSN
Denise Fink, BSN, RN, earned her BSN
Donna Washburn, DNP, RN, CNS, ACNS-BC, AOCNS, earned her DNP
Erno Csaitos, MSN, FNP, RN, earned his MSN and FNP
Heather Blevins, BSN, RN, earned her BSN
Jason Peters, BSN, RN, earned his BSN
Kaitlin Rose, BSN, RN earned her BSN
Katie Campbell, BSN, RN, earned her BSN
Kayla Williams, BSN, RN completed her Masters in Christian Ministry
Latonia Townes, BSN, RN, earned her BSN
Lauren Davis, BSN, RN, earned her BSN
Lesley Palmar, BSN, RN, earned her BSN
Lexi Barber, BSN, RN, earned her BSN
Lisa Griffin, MSN, RN, earned her MSN
Megan Graves, BSN, RN, earned a BSN
Olena Zablotska, MSN, RN, earned her MSN and Adult Gerontology and Primary Care Nurse Practitioner
Sarah Hunt, BSN, RN, earned a BSN
Susan Clapp, RN-BC, MSN, earned a Post Masters Certificate in Adult Gerontology NP—Primary Care with Cardiology Specialty
Valerie Wall, BSN, RN, completed her post graduate certification in Health Services Management
Vicki Mclean, DNP, RN, CNS, CCRN, ACNS-BC, earned her DNP
Katherine Rice, MSN, RN, OCN, earned her MSN in administration
Ashley Scott, BSN, RN, earned a BSN
Laura Heinkle, MSN, RN, CCRN earned her MSN
Lori Dominie, MSN, RN, earned her MSN
Jennifer Younce, BSN, RN, earned her BSN
Corey Trent, BSN, RN, earned his BSN
Linda Burke, BSN, RN, earned her BSN
Amy Tyree, BSN, RN, earned her BSN
Susan Brown, BSN, RN, earned her MSN
Tiffany Dowdy, MPH-N, BSN, RN, earned her Masters in public health
Jillian Collier, MSN, RN, earned her MSN
Jennifer Jamerson, A.D.N., RN, earned her associates degree in nursing
Ashley Brown, BSN, RN, earned her BSN

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The following individuals became certified:

Alex Jaxtheimer, RN - Certification in psychiatric nursing
Amy Burnette, RN - Certified Emergency Nurse
Anita Floyd, RN, ACM-RN - Case Management certification
Ashley Mitchell, RN, OCN - Oncology certification
Camp Holcomb, RN, CCRN - CCRN certification
Cara March, RN - Certified Emergency Nurse
Carrie Greene, RN - CCRN certification
Carrie White, BSN, RN - CAPA certification
Colleen Flynn, RN - Certified Emergency Nurse
Courtney Tomlin, RN - Certified Emergency Nurse
Elizabeth Copes, RN - Certified Emergency Nurse
Hannah Beam, RN - CCRN certification
Hannah Swaby, RN, CMSRN,- Med surg certification
Heather Mayberry, MSN, RN, CNS, ACNS-BC, CCRN, RCIS – chemotherapy certification
Hillary Yeatts, RN - CCRN certification
Holly Reynolds, BSN, RN-BC - Nursing Professional Development certification
Jason Peters, RN - Certified Emergency Nurse
Jason Waller, RN - Certified Emergency Nurse
Lindsay Davis, RN - Certified Emergency Nurse
Michela Hund, RN - Certified Emergency Nurse
Jen Helms, RN - Certified Emergency Nurse
Jen Helms - Trauma Certified Registered Nurse
Jill Hennelly, RN - Stroke certification
Kait Mason, RN - Certified Emergency Nurse
Kaitlin Rose, RN - Certified Emergency Nurse
Karen Capps, BSN, RN, SCRN - stroke certification
Katelyn Pritt, RN - Certified Emergency Nurse
Katie Anderson, RN - Certified Emergency Nurse
Katie Campbell, RN - Certified Emergency Nurse
Kim Bowman, RN - Certified Emergency Nurse
Kim Kennedy, BSN, RN - CWOCN certification
Kristen Oakley, MSN, RN-BC - Nursing Professional Development certification
Krystalin Mays, RN - Certified in obstetrics
Laura Hienkle, RN - CCRN certification
Louraine Stegall, RN - Trauma certification
Maggie Ellis, RN, CNOR - OR certification
Melissa Inman, BSN, RN, SCRN - Stroke certification
Patti Winborne, BS, RN - CWOCN certification
Rebekah Long, RN - CCRN certification
Shannon Bussert, RN - Med Surg certification
Shannon Miles, BSN, RN - Maternal Newborn Nursing
Sharon Campbell, RN, VA-BC - Vascular Access certification
Sharon Elkins, MSN, RN, RNC-MNN, CNE- Certified Nurse Educator
Shelley Perdew, RN - CCRN certification
Susan Burnette, MSN, RN-BC - Med Surg certification
Susan Martin, BSN, RN-BC - Nursing Professional Development certification
Tiffany Lyttle, BSN, RN - PCCN certification
Tiffany Wilson, BSN, RN, CPHQ - Certified Professional in Healthcare Quality
Tina Cheek, BSN, RN-BC - CHCP certification (Interprofessional Continuing Education)
Tina Cheek, BSN, RN-BC, OCN - Nursing Professional Development certification
Trudy Neiderer, RN - ACMA Case Management certification
Terri Lewis, BSN, RN, OCN - oncology certification
Laura Heinkle, MSN, RN - CCRN certification
Chrys Blye, RN - SCRN certification
Marjorie Riner, RN - SCRN certification
Megan McLaughlin, BSN, RN - CHFN certification
Jennifer Gibson, RN - SCRN certification
Sarah Kurtz, RN - CPAN certification
Exemplary Professional Practice
The professional clinical practice (PCP) team primarily uses the functional care model of nursing to support the patients and nursing staff at Centra. In 2018, the professional clinical practice group was made up of five teams filled by 29 RNs and APRNs. The clinical nurse specialists, vascular access specialists, wound ostomy nurses, research consultants, and diabetes educators provide support to our Centra teammates to deliver care.

Services provided on average per month by the team:
- Wound ostomy team: 400 wound care treatments per month
- Diabetes education team: 600 diabetes consults per month
- Vascular access team: 800 IV or mid/central access line starts
- CNS Team: 800 occurrences of specific patient consultations/interventions, education, and quality metric activities recorded

The team participated in many other committees, projects, and teams to support Centra’s mission and vision, including the true north metric teams, product committees, policy and procedure committees, research and institutional review boards. In addition, you’ll often see students or nurses accompanying team members as they go about their day. The professional clinical practice team engages in active mentoring and education.

Highlights of some of the new products and solutions implemented and/or supported in 2018 include:
- Alarm fatigue committee formed to help reduce incidences of alarm fatigue
- Development of community collaborative for support of individuals with developmental and intellectual disabilities in cooperation with VPs to improve quality and safety of patient care as well as strengthening relationships with community partners in caring for this population
- VPS positioning system for PICC placement at Centra Southside Community Hospital to improve quality, efficiency, and patient satisfaction
- Complete redevelopment of the competency process with PND to improve quality, efficiency, and nurse satisfaction
- Two new Sonosite ultrasounds for Lynchburg to improve efficiency, patient satisfaction, and nurse satisfaction
- Approval of process to verify PICC placement to reduce costs, improve quality, safety, and patient satisfaction
- Glide sheets obtained to improve nurse safety and satisfaction and reduce HAPIs
- Multiple improvements in central line care with new kits and products to prevent CLABSI
- External female catheters and cleaning methods to reduce CAUTI
- Grant obtained to renovate Oak Lane for improved access to diabetes education
- CADD pumps obtained and inpatient coordination improved for PH patients

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- Clog Buster obtained and stocked for G-Tube unclogging to reduce cost of care and improve patient satisfaction
- New procedure for assessing function goals implemented as a result of doctoral project to improve patient satisfaction and mobility
- Veriflow and Prevena Plus wound vac therapy implemented to improve wound healing
- Ostomy supply conversion completed to improve “sameness” (efficiency) and quality of care
- ECMO program policy implemented to improve safety and quality of care
- Contract signed with Elsevier to provide new clinical skills and policy resource to improve safety, efficiency, and nurse satisfaction
- Agreements signed with Stryker to help reduce bed related falls, HAPI’s, and mattress rental costs, and improve patient satisfaction.

In 2019, the PCP team looks forward to developing added support for our diabetes population and providing more education to staff in our specialty areas. Our team is thankful for the support that our Centra teammates provide, and we are dedicated to excellent care for life for our family, friends, and neighbors in the community.

Donna Washburn DNP, RN, CNS, ACNS-BC, AOCNS

Director of Professional Clinical Practice
Each year, Centra nurses select a small number of their peers to be recognized for their commitment to high equality patient care, interprofessional collaboration, professional skill, leadership and contribution to the organization. The 2018 winners are:

Kristie Napier, BSN, RN, CCRN
Excellence in Community Service Award

Aimee Strong, MSN, FNP, RN
New Knowledge, Innovations & Improvement Award

Jamie Dunn, BSN, RN
Exemplary Professional Practice Award

Debra Hamric, BSN, RN, CGRN
Excellence in Nursing Leadership Award

Wade Neiman, MD
Physician Collaboration Award

Katie Ritchey, BSN, RN
Rising Star Award

Stephanie Burleigh, CNA
Partner in Caring Award

Joyce Scott, RN
Structural Empowerment Award
2017 Nursing Excellence Award Winners

Brandi Creasy, BSN, RN, CCRN
Transformational Leadership Award

Glenda Proffitt, RN
Wisdom in the Workplace Award

Fran Concklin, BS, RN-BC, CRNI, VA-BC
Magnet Nurse of the Year

STEMI Team
Collaboration Team Award
In 2018, the Nursing Governance Board elected to bring the Daisy awards to Centra as a means to support nursing recognition by those we serve. The Daisy Award recognizes nurses for their compassion, clinical skill, and care that they provide to patients and families. Daisy awards are unique and special in that Daisy nominees and award winners are nominated directly by patients and families. This program honors the spectacular work that nurses do for patients and families each day.

**2018 Daisy Award winners are:**

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<td>VBH</td>
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<td>Elizabeth Vernon Johansson</td>
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<td>Katie Davis</td>
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<td>Pearl Banks</td>
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<td>Katie Ritchie</td>
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<td>Lynn Brunson</td>
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<td>Acute Rehab</td>
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<td>Regina Hawkins</td>
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</table>
New Knowledge, Innovations, And Improvements
Vicky Brunet, DNP, NNP-BC, was named the director of nursing research for Centra. Vicky graduated from Centra Virginia Baptist Hospital School of Nursing, earned her neonatal nurse practitioner degree from Georgetown University, and a doctor of nursing practice degree from Old Dominion University. She has practiced at the bedside for 37 years, including 27 years as a neonatal nurse practitioner.

Vicky’s nursing career at Centra has included 37 years in Women & Children Services; co-chair of the Nursing Research Council for four years and a member of the Institutional Review Board for four years. Vicky said she loves to read and learn. She is married and has six children and 14 grandchildren. Two daughters also have nursing careers, one of them at Centra.

“I love helping professional, point-of-care providers to promote safe, quality care to Centra’s patients and look forward to guiding Centra’s providers as they undertake, promote, and develop their evidence-based practices,” said Vicky. “I am excited to help providers design and implement processes and to evaluate the outcomes of their practice in Centra’s systems of care. All of these efforts will use the best research to improve care practices and patient outcomes.”

You can find Vicky in the Virginia Henderson Nursing Research office in the Centra Lynchburg General Hospital library. Vicky’s experience and skill related to nursing research is sure to be a catalyst for Centra’s research program.
The Virginia Henderson Research Symposium is an annual event that recognizes Centra’s nurses for their contributions to the excellent, quality care they deliver daily. The symposium sponsors keynote speakers to address current, evidence-based, and multidisciplinary approaches to conducting and disseminating nursing research. The 14th annual event featured Kerry Milner, DNSc, RN. Cindy Goodrich, EdD, MSN, CNE; Donna Washburn, DNP, MSN, CNS, ACNS-BC, AOCNS, RN; and Cindy Ward, DNP, RN-BC, CMSRN, ACNS-BC. There were 129 participants, including Centra nurses, local colleges’ staff and students, and other healthcare facilities staff.

Dr. Milner is an associate professor at Sacred Heart University. Dr. Milner’s professional interest is in cardiovascular critical care nursing, and she has published more than 35 peer reviewed articles. Her articles in recent years include the engagement and satisfaction of patients and families in the acute care setting.

Dr. Goodrich is assistant director of undergraduate honors at Liberty University. Dr. Goodrich’s research has included nursing issues around a clinical ladder and engagement; and patient issues around pain.

Dr. Washburn is director of professional clinical practice at Centra. She is a member of the faculty at Liberty University and has a background in both education and managing clinical research for the Centra Alan B. Pearson Regional Cancer Center. She has published several articles and most recently developed an evidence-based screening instrument to address barriers to medication adherence. Dr. Washburn and colleagues were the first recipients of the Virginia Henderson Excellence in Nursing Research Award in 2008.

Dr. Ward is a clinical nurse specialist at Carilion Roanoke Memorial Hospital, and she is member of the MedSurg Nursing Journal editorial board. Dr. Ward is the author or co-author of over 30 published articles. Her area of focus is on improving outcomes and decreasing the incidence of venous thromboembolism.

Nurses use their core values and voices to bring patient perspective and their expertise to the bedside; they continue to make positive impacts in the lives of patients every day. Nurses are involved in both nursing research and evidence-based projects that improve patient quality, safety, and experiences.

There were 19 poster presentations at the 2018 symposium. The authors and their project titles are listed later in this section. The participants voted for their favorite poster presented at the symposium and the winners were

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Virginia Henderson Symposium

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Jessica Ashwell, Brittany Robertson, Gretchen Croft, and Kami Ashworth for their poster titled “Preventing Falls: In-Room Alarm Checklist.”

The annual Virginia Henderson Excellence in Nursing Research Award was presented to Monica Hall, BSN, CGRN, Susan Cheatham, BSN, CAPA and Christy Masters, BSN, CAPA for their project on OSA/STOP BANG. These nurses work in the Surgery Center at Virginia Baptist Hospital. A new category this year recognizes the Advance Practice Nurse for contributions to profession. The Virginia Henderson Excellence in Nursing Research Award for advanced practice was presented to Victoria F. McLean DNP, RN, CCRN, CNS, ACNS-BC for her research “Implementation of Scripted Education on Comfort Goals to Improve Patient Perception of Pain Control”. Congratulations to all recipients.

A special thank you to Dr. and Mrs. George Hurt for allowing Centra to honor Virginia Henderson yearly with the Nursing Research Symposium.
Ann Clark, RN, CMSRN, Pulmonary Unit, and former Centra nurse Mary Mills, BSN, RN, won an award from the MedSurg Nursing Journal for their nursing research that was published in the journal. Ann and Mary won the 2018 MedSurg Nursing Quantitative Research Writer’s Award for their article entitled “Can a Sleep Menu Enhance the Quality of Sleep for the Hospitalized Patient?” This research award was presented to Ann and Mary at the 27th Annual Convention in Lake Buena Vista, Florid, in September 2018.

The plaque reads:

MEDSURG Nursing
2018 Quantitative Research Writer’s Award
presented to
Ann Clark, RNC IV
Mary Mills, BSN, RN III
for the article
“Can a Sleep Menu Enhance the Quality of Sleep for the Hospitalized Patient?”

Ann Clark, RN, CMSRN, left, and Mary Mills, BSN, RN.
Katie Paige, CNM, MSN, won the American College of Nurse Midwives Journal of Midwifery and Women’s Health Mary Ann Shah New Author Award for 2018. Her article, entitled “Examination of the Pharmacology of Oxytocin and Clinical Guidelines for Use in Labor” was recognized for excellence.
Centra has a long history of ensuring that our good work is shared with other nursing professionals, locally and nationally. The year 2018 was no different, as we had a number of team members share their professional contributions and outcomes at local, state, and national conferences.

### Professional Presentations

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<tr>
<th>NAME OF PRESENTERS</th>
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<tbody>
<tr>
<td>Fran Concklin, BS, RN-BC, CRNI, VA-BC</td>
<td>Poster</td>
<td>Generating Change at the State Board of Nursing Level to Create Organizational Change</td>
<td>September 16-18, 2018</td>
<td>Association for Vascular Access Conference</td>
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<tr>
<td>Erin Baird, CNM, MS &amp; Katie Paige, CNM, MSN</td>
<td>Podium</td>
<td>Interprofessional Collaborative Maternity Models: The Virginia Baptist Story.</td>
<td>October 13, 2018</td>
<td>Midwifery Works!</td>
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<tr>
<td>Katie Paige, CNM, MSN</td>
<td>Podium</td>
<td>Interprofessional Collaborative Maternity Models in Virginia</td>
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<td>Katie Paige, CNM, MSN</td>
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<td>Normal Labor Progress and Reducing Primary Cesarean</td>
<td>March 10, 2018</td>
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<tr>
<td>Katie Paige, CNM, MSN</td>
<td>Podium</td>
<td>Happens When a Lawsuit Goes to Trial?</td>
<td>May 28, 2018</td>
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<tr>
<td>Katie Paige, CNM, MSN, Erin Baird, CNM, MS, Lisa Neumann, CNM, MSN, A. Cherian, MD, J. Pierce, MD, S. URay, MD, S. Baker, MD, Kim Price, DNP, Stacey Tribbett, MSN, RN, Stephanie Cowell, RN, Lisa Toms, RN, Denise Doss, BSN, RN</td>
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<td>May 22-23, 2018</td>
<td>American College of Nurse-Midwives 63rd Annual Meeting and Exposition</td>
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<tr>
<td>Jessica Ashwell ADN, RN, Gretchen Croft, ADN, RN, Brittany Robertson ADN, RN, Kami Ashworth ADN, RN</td>
<td>Poster</td>
<td>Preventing Falls: An In-Room Checklist</td>
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<td>Chasmen Murray RN, Leslie Bryant RN, Alex Holton, RN, BSN, BC</td>
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<td>Exercise in the Milieu and the Effect on Depression</td>
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<td>Shannon Miles BSN, RN-C, &amp; Heather May, RN</td>
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<tr>
<td>Tiffany Wells, MSN, RN-BC</td>
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<td>Using collaborative partnerships to address quality of care issues</td>
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<td>Tina Cheek, BSN, RN-BC, CHCP</td>
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<td>Sarah Kurtz, MSN, RN, CPAN; Wendy Burks, BSN, RN; Cynthia Tabaian, BSN, RN</td>
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<td>A Comparison Study on the Length of Stay (LOS) of Ambulatory Patients in the Postanesthesia Care Unit (PACU)</td>
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<td>Marilyn L. Graves, MSN, RN, CHPN, CWOCN</td>
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<td>Jim Emerson, DNP, RN, Cheryl Rogers, MSN, RN, and Holly Puckett MSN, RN, CMSRN</td>
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<tr>
<td>Cheryl Rogers MSN, RN</td>
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<td>Nicole Coffey, RN</td>
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<td>Mason Tumas, RN, Brittany Jones, RN, Katherine Gray, RN Lauren Richardson, RN MacKenzie Lipscomb, RN</td>
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<td>Victoria F. McLean DNP, RN, CCRN, CNS, ACNS-BC</td>
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<td>Implementation of Scripted Education on Comfort Goals to Improve Patient Perception of Pain Control</td>
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<td>Lisa Toms, RN &amp; Gaylene Doyle RN</td>
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<td>Coping or “Not Coping” as a new assessment of labor pain</td>
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<td>Jacinda Shin, RN, Halla Sweeny, RN, Kate Crabtree, RN, Hannah McFarland, RN, Jenny Bryant, RN, Jami Dunn, RN, Cindy Merritt, RN, Sharon Basso, RN, Keith Grasser, RN, Brittany Carter, RN, Camp Holcomb, RN</td>
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<td>Fran Concklin, BS, RN-BC, CRNI</td>
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<td>Integrating Technology: Creating Reform at the State Board of Nursing Level to Implement Organizational Change for PICC Tip Confirmation</td>
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<td>Debbie Cheatham, RN, CAPA</td>
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<td>Brennan Sutton, RN, BSN, Nicole Hackett, RN, Lakisha Ferguson, MSN, RN, Brittany Fix, RN, Tiffani Wright, RN</td>
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<td>Understanding Staff Empathy Related to the Care of Mothers with a History of Illicit Drug Use</td>
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<td>Tiffany M. Wells, MSN, RN-BC</td>
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<td>Pearl Banks, BSN, RN, CCRN, Meredith Etheridge, BS, RN, Heather Jones, BSN, RN, Bethany Good, BSN, RN</td>
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<td>Stacy Sayre, BSN, RN, Becky Driskill, BSN, RN, Jenny Candler BSN, CMSRN, Melanie Cash, RN, CAPA, Sue Whitacre, RN, CAPA, Kim Parr, DNP, FNP-BC</td>
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