

NURSING ANNUAL REPORT Guthrie Robert Packer Hospital

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RN

INSIDE THIS REPORT

Greetings from the CNO1
What is a Professional Practice
Model (PPM)?2
Nursing by the Numbers4
Transformational Leadership5

Ownership

Shared Governance	8
Guthrie Culture of Safety	10
Radiation Therapy Nurses	12
Thinking Outside the Box in	
 Labor and Delivery 	13
At Guthrie, We Believe	
in Teamwork	14
Career Advancement Ladder	15

Beliefs and Values

Facilitator

Nurse-Sensitive Indicators	.24
Nurses Coming Together to	
Vaccinate Our Community	.25
Engagement and Nursing	
Retention Projects	26
Recruiting External RNs	
Newly Licensed RN Residency	29
Team-based Nursing Model	.30
Making a Meaningful Difference	.31

Moments of Fulfillment

Beating the Odds	35
When Words Aren't Enough	36
Reflections About Life and	
Nursing During COVID	38
Nursing Throughout the Year	

"It is my honor and privilege to now serve as your system Chief Nursing Officer."

– Deb Raupers, MSN, CENP, RN



Greetings from the CNO

First, I want to express how grateful I am to return to Guthrie, where I first began my nursing career 35 years ago. It is my honor and privilege to now serve as your system Chief Nursing Officer. As you know, Guthrie is a great organization that is made up of amazing people like you.

We are all here, working together to make a meaningful difference in the lives of our patients and the communities that we serve. Please know that I am also here to make a meaningful difference in your lives and provide you with the support that you need and deserve.

Together we can create a work environment where you can provide exceptional care, grow, and develop your skills and abilities to your fullest potential.



Deb Raupers, MSN, CENP, RN Executive Vice President, Chief Nursing Officer, Guthrie



MOMENTS OF FULFILLMENT **Making A Difference Intangible Rewards** High Quality Care Gratification Crifics SIONAL PRACTICE MODE High Quality Care

OWNERSHIP Pride Shared Governance

What is a Professional **Practice Model (PPM)?**

A Professional Practice Model is the driving force of nursing care and is a schematic description of how registered nurses practice, collaborate, communicate, and develop professionally to provide the highest guality care for those served by the organization, patients, families, and communities (American Nurses Credentialing Center, 2008). The Professional Practice Model aligns and integrates nursing practice with the mission, vision, values and philosophy of nursing.

Our Professional Practice Model was built utilizing focus groups of nurses who collected data regarding the attitudes, perceptions, vocabulary, ideas and thinking patterns related to nurse practice at Guthrie. Upon analysis of the data from seven focus groups, four constructs (groups of related concepts) emerged, which became the foundation of our Professional Practice Model. These four constructs – ownership, beliefs and values, facilitator and moments of fulfillment were developed from 34 themes that evolved from nearly 500 pieces of data collected from the focus groups.

The construct of **Ownership** is supported by the concepts of Pride and Shared Governance. Our nurses are empowered, through their voice, to own their practice and express a sense of pride and achievement regarding their accomplishments.

The construct of **Beliefs and Values** is supported by the concepts of Patient-Centered Care, Family-Centered Care, Foundations of Care and Professional Qualities. These concepts best portray how our nurses describe their profession. Patients and families are our top priority, and care delivery is based on principles of compassion, active listening and patient advocacy. This is how our nurses describe their practice.

The construct of **Facilitator** is supported by the concepts of Coordinator, Conductor, Mission Control and Teamwork. As strong patient advocates, our nurses possess a sense of personal ownership for the coordination of care they provide and work to ensure that all patient/family needs are not only acknowledged but met.

The construct of **Moments of Fulfillment** is supported by the concepts of Making a Difference, Intangible Rewards, High Quality Care and Gratification. This construct holds great value within the hearts of our nurses. It is in the moments of helping to save a life or holding a patient's hand that the ultimate reward is received.

NURSING BY THE NUMBERS



1,192 TOTAL NURSES 880 RNS • 312 LPNS



PERCENTAGE OF NURSES WITH BSN

Guthrie Robert Packer Hospital 69% • Guthrie RPH, Towanda Campus 57% Guthrie Medical Group Care Coordinators 100% • Guthrie Corning Hospital 22.6% Guthrie Troy Community Hospital 70% • Guthrie Cortland Medical Center – In Process



SPECIALTY CERTIFICATION RATE

Guthrie Robert Packer Hospital 45% • Guthrie RPH, Towanda Campus 18% Guthrie Medical Group Care Coordinators 27% • Guthrie Corning Hospital 14.5% Guthrie Troy Community Hospital 16% • Guthrie Cortland Medical Center – In Process



AREAS, PROGRAMS AND DEPARTMENTS SUPPORTED BY NURSES



TRANSFORMATIONAL Leadership

It is very important that we keep our nurses informed about changes, system updates, workplace happenings, and much more. Stay up to date by utilizing all our communication tools, including the Nursing Intranet Site, Workplace, and Friday Facts.



Deb Raupers, MSN, CENP, RN EVP, Chief Nursing Officer



Sally Bennett, PhD, MS, BSN, RN-NPD Director, Nursing Professional Development



Cindy Whitaker, MSN, RN, CCRN VP, Chief Nursing Officer, Guthrie Corning Hospital



Jessica Newman, MSN, RN Magnet Program Director



Mary Wright, MHA, RN VP, Nursing Services, Guthrie Cortland Medical Center



Michelle Jelliff, MSN, MHA, RN Director Nursing, Guthrie Troy Community Hospital





Ownership at Guthrie

At Guthrie, we seek to promote accountability and drive our nurses to go above and beyond a job description. We encourage a sense of pride in everyday work and ownership of our culture that inspires initiatives and change.

Shared Governance

Guthrie Nursing embraces Shared Governance as a framework where staff members and managers work together, contribute equally to improve practice, and ultimately share ownership for the outcomes of their work. That means you care about your nursing practice and that your input is valuable in delivering the best care. Shared Governance is not the same as self-governance – instead, it is about having a voice and then choosing to use it. Each entity's progress toward Shared Governance is in a different part of its journey. Shared Governance can and should happen at the department level, the entity/ hospital level, and ultimately at the organizational level.

Guthrie Corning Hospital

Unit and hospital-level shared governance meetings are resuming after being derailed by the pandemic. The nursing team has also begun working toward its Pathway to Excellence designation. The Pathway to Excellence Program® recognizes health care organizations that demonstrate a commitment to establishing the foundation of a healthy workplace for staff. This project will take several years, but it will be exciting to see Corning nurses recognized for the excellent care they provide and to celebrate the hospital's culture.

Guthrie Robert Packer Hospital and Towanda Campus

Guthrie Robert Packer Hospital saw the transition this year from multiple hospital councils to one singular Shared Governance Council; this worked well to engage the Towanda Campus nurses and involve them in Shared Governance. Hopefully, this change will better support nurses to attend after all the stresses of this past year. Unit councils are also back up and running after many paused during COVID-19. As part of the focus on nursing and shared governance, RPH submitted the written document portion of their Magnet Designation Application on August 2, 2021. When a health care organization earns Magnet status, it demonstrates that it's an organization that recognizes the invaluable potential of nurses to lead health care change. RPH hopes to bring nurses the recognition they deserve through this designation and anticipates a Magnet Site Appraisal by January 2022.

Thanks to each of you who showed up and participated in Shared Governance. We want to continue to improve our Guthrie nursing culture, so if you have questions, concerns, or feedback related to Shared Governance, please reach out to Jessica Newman.

Guthrie Troy Community Hospital

While young in their journey, the unit councils and hospital council never slowed during the pandemic and they are working to engage more nurses in the process.

Guthrie Cortland Medical Center

The hospital-level Shared Leadership Group, off to a great start before COVID-19, paused during the pandemic and is now looking to refresh and refocus. Fortunately, unitbased meetings were maintained during the pandemic to keep nurses involved and a part of the work.



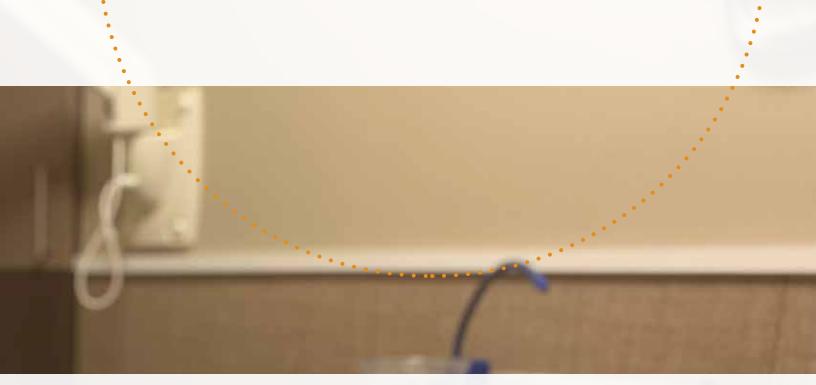
Guthrie Culture of Safety and a Just Culture

What happens at Guthrie when you make a nursing error? Often this is something that we don't talk about but it is something that we should all understand. In 2012 the Journal of Nursing Regulation published an article focused on improving patient safety and stated: "Disciplining nurses in response to human error does little to improve overall public safety. Nurses responsible for making reckless choices, however, must be held accountable. Finding a balance between learning from mistakes and using disciplinary action effectively is the regulatory goal of Just Culture." (Burhans et al., 2012)

Aligned with our Guthrie values of Patient-Centeredness, Teamwork, and Excellence, the Guthrie Patient Safety and Quality departments have promoted a Culture of Safety by adopting the Just Culture Algorithm.

A Culture of Safety focuses on creating an environment where all employees feel safe and encouraged to report concerns, errors, and near-misses. Guthrie supports the Culture of Safety through policies and systems such as the incident reporting system and the Peer Review process. Guthrie has even become a Patient Safety Organization (PSO), requiring us to adhere to standards and support for non-punitive "feedback aimed at promoting learning and minimizing patient risk." (https://www.pso.ahrq.gov/faq, 2021)

Within the Culture of Safety lives the "Just Culture" and Peer Review process. This is not just for nursing but instead gives all health care professionals safe venues for their care to be evaluated by peers in a Just Culture. "Just Culture focuses on levels of risk, behavioral choices, and system design. The principle behind Just Culture is that discipline, when indicated, needs to be tied to individual behavioral choices and the potential risks to the outcome of actions. Effective public protection depends on learning from mistakes." (Burhans et al., 2012).



At Guthrie, when quality improvement is needed or when an adverse patient/ employee event or situation where there could be a potential learning opportunity occurs, we leverage the Culture of Safety in several ways:

1: Unit/Department Based

Quality Improvement – Using unit Performance Boards and the Plan Do Study Act (PDSA) model, departments leverage Shared Governance to problem solve and improve patient or employee metrics.

2: RCA (Root Cause Analysis) – Allows direct care nurses and staff involved in a situation to reflect and identify potential learnings or improvement opportunities to prevent the same problem from occurring in the future.

Reference

Burhans, L. D., Chastain, K., & George, J. L. (2012). Just Culture and Nursing Regulation: Learning to Improve Patient Safety. Journal of Nursing Regulation, 2(4), 43–49. https://doi.org/10.1016/s2155-8256(15)30254-4 **3: Peer Reviews** – For nursing, the peer review process uses the Just Culture Algorithm and the Nursing Council (Shared Governance) structure to decide how to improve and address patient safety events. "The Just Culture Algorithm (Outcome Engineering, 2008) developed by Marx is used to evaluate events and determine whether the behaviors of an individual reflect human error, unintentional or intentional at-risk behavior, or reckless behavior. This algorithm leads users through decision steps that facilitate incident evaluation with consistency and fairness and result in the opportunity to learn from mistakes and

opportunity to learn from mistakes and enhance patient safety. The algorithm also guides in determining if the actions of the individual warrant consoling, counseling, coaching, remediation, or punishment." (Burhans et al., 2012)

While each nurse or health care provider hopes to never make an error that harms a patient, it is essential to understand how our Shared Governance and Organizational Culture supports learning, growing, and improving the practice of nursing and medicine.

Radiation Therapy Nurses – An Important Part of the Cancer Care Team

Radiation therapy nurses have similar roles as other nurses, such as performing patient assessments, providing education, coordinating care, advocating, and providing psychosocial support to the patient and their family, but our close relationships with our patients make our job extra special.

Many people do not understand the world of radiation therapy. Radiation therapy may seem complex, but the basics of radiation therapy are straightforward. Radiation therapy uses high-energy x-ray beams targeted precisely at cancer to damage the cell's DNA.

Melanie Nittinger, RN, BSN, OCN



Once the damage is done, the cells can no longer grow and divide. Radiation therapy can be delivered in various methods. The most common practice is external beam. Normally, we treat 30-40 patients per day. Most are outpatients, some are coming from work, while others are retired. The typical treatments are daily, Monday through Friday, and are about 15 minutes long.

Advancements in radiation therapy now allow treatments to be shorter in duration, depending on their disease and stage.

Since radiation therapy is daily, the radiation nurses and staff can get to know the patient and their families personally, not just as cancer patients. Of course we talk about the weather, but our conversations can go deeper. Patients share their life stories, favorite vacation spots, milestone events, and future. They also share their worries, concerns, and fears when it comes to the cancer journey. Having these personal connections with patients makes our job more satisfying and helps us make a meaningful difference in patients' lives.

2021 NURSING ANNUAL REPORT

Thinking Outside of the Box in Labor and Delivery

This past year has brought so many challenges to our nursing practice and in our community. We went through the difficulties of visitor restrictions and have come to embrace it as a positive change as we have focused on the patients' needs and have developed better relationships. Our patients can rest and spend more quality time as a couple and with their new baby. We had to endure all the changes with PPE, infection control, isolation from others in the hospital to keep our moms and babies safe from COVID-19.

Meetings have been challenging, but we have learned the Teams way of life and adjusted to that. This past year has allowed us to think outside the box and implement processes to help keep everyone safe according to the guidelines we were given. Hospital workers saw how our community appreciated essential workers and showed their support. The many donations we received early on in the quarantine were so humbling and appreciated. Our team came together through short staffing, and we agreed to pick up extra shifts to cover due to numerous vacancies.

Mary "Beth" Fisher, RN



At Guthrie, We Believe in Teamwork

Nursing in the last year has shown us many things about the profession but has shown me the value of the team at Guthrie Troy Community Hospital. Since starting at TCH I have always felt we had a strong team. When I think of the members of this team in the last year, two words come to mind: flexibility and sacrifice.

Health care had to be flexible with the ever-changing guidelines, staffing issues, supply needs, and routine changes. Every department had to show extreme flexibility on all fronts, many were wearing hats they had never had to before, and I honestly found it amazing how everyone jumped in with both feet to care for our patients.

Within the last year, there has also been a tremendous amount of sacrifice. Staff faced months on end of worsening staffing shortages, and from that, we saw countless staff making sacrifices – days off, sleep, family time, breaks, and downtime to not only care for our patients but to lighten the burden on each other. One example was when many of our nurses sacrificed their "break" from taking care of COVID-19 patients so that our thenpregnant nurses didn't have to.

Flexibility and sacrifice were again shown when all clinical staff went to crisis 12-hour schedules. We had nurses who have never worked 12-hour nights doing so routinely, parents who were juggling remote learning and a new schedule, and everyone pitching in with overtime each pay period. It was a team effort.

As I am sure everyone would agree, we hope never to see these health care conditions again, but I am proud of how TCH staff worked tirelessly to support our patients and support each other.

Kellsie Dunham, RN
 Guthrie Troy Community Hospital

2021 NURSING ANNUAL REPORT

Career Advancement Ladder

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RN 🦕

Historically, clinical advancement ladders were reserved for nurses who worked at the bedside in an acute care/hospital setting. However, as health care changes, so have the ways and environments in which nurses practice. The GMG nursing team, Care Partner Council, and RPH Case Managers and Trauma Nurses were hard at work over the past year and a half (despite the pandemic), developing proposals and recommendations to support professional development for Guthrie employees who have not had an advancement ladder. We look forward to their continued progress and cannot wait to see the results of their work.

BELIEFS ANDVALUES FGUTHRIE

2021 NURSING ANNUAL REPORT

Beliefs and Values at Guthrie

Guthrie maintains a compassionate focus on people: our patients, our employees and our community.

Scholarship Recipients FY21 Nursing Scholarship Awards

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In June 2021, awards of monetary gifts were given to 20 RN recipients for nine nursing scholarships. These gifts are made possible by nurses, physicians, and/or their families, who felt it is important to support nurses in continuing their education or expanding their professional development.

During FY21, Guthrie awarded more than \$30,000 in support of nursing scholarships and department education.

2021 NURSING ANNUAL REPORT

KATHLEEN & WILLIAM RICH NURSING CONTINUING EDUCATION ENDOWMENT FUND: Donated by her family to honor her memory and support a nursing continuing education for a BSN. This year's recipients were Rachel Early and Elizabeth Hickey.

NURSING SCHOLARSHIP FUND: Generously funded by employees and community members. This year, scholarships were awarded to Janelle Craft, Melisa Gore, Elizabeth Hickey, Amber King, Stephanie Lynch and Faith McNeal.

MABEL LAMBERSON AWARDS: Awarded to RNs who are seeking to further their formal education or wish to attend a regional or national conference. This year scholarships were awarded to Charnell Stewart and Bethany Williams.

MARGARET HLYWA NURSING SCHOLARSHIP: Awarded to a Guthrie nurse pursuing a degree. This year, the scholarship was presented to Janelle Craft.

LAUREL J. SCHULTZ MEMORIAL FUND FOR NURSING EDUCATION: A gift from Laurel's family to honor her memory and support an LDRP staff member in continuing their education or obtaining specialty certification in OB nursing. The recipients of this year's award were Brandi Parlett and Erin Baskoff.

GUTHRIE ROBERT PACKER HOSPITAL DEPARTMENT OF NURSING– LINDERMAN-MCGLENN SCHOLARSHIP: This is a gift from Jean Marie Warpus, a Guthrie student of nursing alumna. This gift supports registered nurses actively pursuing a nursing degree. This year's recipients were Christine Beach, Rachel Early, Melisa Gore, Jennifer Orbin and Rachelle Schoultes.

JEANNE M. WALSH MEMORIAL CONTINUING EDUCATION FUND: Recipients are seeking to further their knowledge and skill by attending a regional or national conference and obtain specialty certification. Awards were given to Christine Beach, Kelly Coldiron, Abigail Sherwood and Leah Fleming.

DEB NOLE MEMORIAL SCHOLARSHIP FUND OF THE ROBERT PACKER HOSPITAL AUXILIARY: Honors the memory of the Guthrie ICU and Flight Team RN who died in the Guthrie One helicopter crash in 1991. This memorial was created in her memory and donated by the RPH Auxiliary to support nurses earning a BSN or MSN. This year the memorial was given to Janelle Craft, Melisa Gore, Jennifer Orbin, Rachelle Schoultes, Charnell Stewart and Bethany Williams.

ELWOOD F. SCHEITHAUER FUND: This award is given to support continuing education, specialty certification or conference attendance for a Guthrie Robert Packer Hospital, Towanda Campus nurse and was awarded to Christina Finlan and Melissa Townsand.

Young Professionals Network (YPN)

Nurses (and non-nurses) across Guthrie participate in the Guthrie Young Professionals Network. YPN is free and open to all regardless of role or age. This group collaborates to support employees through events such as free ice cream during hospital week. The group also supports the community through charitable giving and volunteerism. "I would like to take a moment to thank Guthrie's Young Professionals Network for partnering with Shores Sisters Farm Market to provide free meals to our students over the Christmas break. Your efforts in working with our school district are much appreciated.

It is easy to take for granted that our young people have access to quality meals on days they are not in school. Your efforts assured that those in need were provided with another option.

Thank you again for thinking of our district and our students. It is reassuring that there are people and organizations like Guthrie that truly care and strive to make a difference in our communities."

- Sincerely, Dennis Peachey

2021 NURSING ANNUAL REPORT



FACILITATOR

 Guthrie nurses play a key role in establishing communication among other health care professionals. When our nurses facilitate the process of care, patient outcomes improve.



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Garrian

Registered Nurs RN

Nurse-Sensitive Indicators Continually Improve Year Over Year

Nurse-Sensitive Indicators (NSIs) are nursing quality outcomes that we track and monitor as an indicator of quality nursing care. NSIs are one way that nurses impact the cost of health care and the outcomes that patients experience. These NSIs are benchmarked or compared nationally. RPH has seen great improvement since 2018 in the number of NSIs.



Sources for estimated costs: CAUT1 – \$12,793 (AHRQ, 2017); CLABSI – \$48,108 (AHRQ, 2017); Falls wi Injury – \$14,056 (joint Commission, 2013); HAPI – \$10,700 (Society of Actuaries, 2010)

Nurses Coming Together to Vaccinate Our Community

Over the last year COVID has affected us in many ways, some of which were not anticipated. When it was announced that hospitals were expected to start vaccinating with very little notice, quick action needed to be taken. Nurses from the Guthrie Corning Hospital Education department, EPIC analysts and the Medical Office GMG came together to be part of a very important vaccination team. Two groups of nurses, along with pharmacist and PSS staff who had not previously been required to have much interaction, quickly worked together to support each other and the community. We are now a smooth working team helping to make our community healthier and safer.

 Rachel Roberts MS, BSN, RN
 Guthrie Corning Hospital Manager of Education and Regulation



Summary of Annual System Wide Staff Engagement and Nursing Retention Projects

For nursing and employee engagement, the top four strategies in Fiscal Year 2021 (July 2020-June 2021) were:

- "Promote Meaning in the Workplace"
- "Local Leader Development"
- "Improving Communication"
- "Capturing the Voice of Our People"

Under each strategy, several tactics were deployed. These tactics were developed from the previous year's Employee Engagement Survey results. Our team knew that "promoting meaning in the workplace" means something different to everyone, so we asked questions like "What does it mean to make a meaningful connection?" We searched the current literature to help answer our questions. Learning from a 2020 JAMA article on "Anxiety Among Health Care Professionals During the Pandemic" helped define a Pandemic TouchPoint tactic.

The article breaks it down into five categories: Hear Me, Protect Me, Prepare Me, Support Me, and Care for Me. Each month the engagement team, with the Guthrie Senior Leader Team (SLT), focused on a different category ensuring Guthrie was meeting the needs of staff.

- The "Honor Series" was created depicting photos and videos of staff working as the heroes you all are through the COVID-19 pandemic.
- "Hearing staff" was achieved with Paul Vervalin, our COO, recording Town Halls where staff could submit questions.
- Guthrie worked to "protect staff" by ensuring adequate PPE was secured and provided.

- "Preparing staff" was done with on-the-spot training on any new procedures and processes.
- "Supporting staff" focused on EAP COVID hotlines, virtual break rooms and doctors' lounges, and financial resources being offered to staff through the Mark Stensager fund.
- "Caring for staff" was attained by offering paid quarantine and flexibility with childcare and other needs staff had. In addition, with the Pandemic TouchPoint, the engagement team encouraged local leaders to reach out and check in with all staff both on-site and remote to ensure their needs were being met, both inside of work and at home.

The second strategy, "Local Leader Development," had several tactics, including leadership training such as Advisory Board and Guthrie Leadership Essentials, leader resources in Guthrie Learn, and a document of learning lessons from leaders who took their teams from Tier 3 to Tier 1.

Under the strategy "Improving Communication," the communications team developed Daily Briefings for COVID-19 updates. As information and cases changed quickly, the communication was sent daily and weekly throughout the pandemic. Also under this strategy was leader rounding and huddles for departments where the huddle process was not yet set up. The final strategy, "Capturing the Voices of our People," had a primary tactic of the Guthrie Pride Series. The Guthrie Pride Series went on for the six weeks leading up to the Press Ganey Employee Engagement Survey. They highlighted the voice of staff and providers around the organization, answering the six engagement questions on the survey. In addition, "You asked, We did" was also released by Nursing Leadership, documenting staff "asks" throughout the vear and what we could achieve as a nursing team and as an organization. Overall, the Guthrie Pride Series strategy was a success and helped us meet our goal response rate. A lot of the work done this past fiscal year will continue into Fiscal Year 2022. As the Engagement Team and senior leaders dive into the latest survey results, more tactics will be developed to address concerns that were brought up. The Engagement Team and Guthrie senior leaders are committed to staff and provider engagement and are working to make improvements that make a meaningful difference to all of you.

Like the Engagement Team, the Nursing Retention Team completed a literature review, examined historic "Brain Boards," and read current nursing feedback from the latest employee engagement survey to identify three "buckets:" Safety, Culture, and Leadership. Over the last year, the Retention Team worked to improve these three areas that drive nurse turnover.

Under "Safety," the team focused on Nursing Breaks, working with managers to develop unit-specific plans and expectations for staff to get a lunch break. For the categories of "Culture" and "Leadership," our standard Exit Interview workflow was refined and implemented to give nursing leaders insight into why employees resign and create action plans to address factors contributing to resignations. In addition, the Stay Interview process was expanded and enhanced to improve communication between Nurse Managers and their Nurses. The Retention Team also worked closely with Nurse Managers to understand common workplace satisfiers and dissatisfiers across the system and track themes throughout individual departments and the system.

Despite the challenging and ever-changing year in the health care realm, the Retention Team strived to encourage a continued positive culture among nursing teams and enjoy patient care through a closer alignment with Engagement Team tactics. Moving forward into the new Fiscal Year, the Nursing Retention Team will partner with the Engagement Team, Human Resources, and senior leaders to address nursing retention concerns and develop meaningful tactics for FY2022.

Jennifer Orbin MSN, RN-BCJerikah Holmes MSN, RN, TCRN

Guthrie's Commitment and Focus on Recruiting External RNs

The Guthrie RN Recruitment team was committed to finding new and innovative ways to attract and bring RN talent into the organization in FY21. The COVID-19 pandemic created even more of a need for nursing staff and more challenges that included nurses being unsure when the right time was to find a new career opportunity, nurse burnout, travel nurse career opportunities, or having to pivot to virtual interviews.

The team quickly adapted to these challenges and created virtual tours for interested RN prospects to see what each unit in our five hospital locations was like without coming in and doing an on-site tour. In studies done with current nursing leadership and staff, the team also identified differentiators in our organization and marketed career growth opportunities and partnerships with Physicians.

In addition, recruitment marketing tactics to attract RNs included an aggressive digital strategy utilizing Google AdWords, Google Search Words, Pinterest, Hulu, and remarketing campaigns. Sponsored advertising included Facebook, Indeed, Linkedin, and Ihire Nursing. Traditional media campaigns included targeted direct mail, email campaigns, text campaigns, billboards, bus wraps, newspaper ads, and radio ads.

The team also deployed a 50 Nurses in 50 Day initiative in the spring, resulting in 54 RNs and LPNs accepting offers to join the organization.

Guthrie's partnership with Avant International has continued into FY21. This year Guthrie welcomed 12 new Avant RNs from three countries: the Philippines, United Emirates, and Lebanon.

This year we were able to extend contingent offers to 45 of our current Avant RNs who are at least halfway through their contract with Avant and intend to convert to full-time Guthrie RNs.

As a result of all these initiatives:

- 481 offer accepts (243 external, 238 internal) *includes Cortland Nursing (RN, LPN) roles
- Opened a new Acute Rehab Center at Guthrie Robert Packer Hospital, Towanda Campus, with an RN complement of 10 full-time RNs and 2 per diem RN roles
- Transitioned Cortland RN recruitment under the corporate recruitment model
- Now Endoscopy Suite at RPH

2021 NURSING ANNUAL REPORT

New Endoscopy Suite at RPH



Guthrie Welcomes Newly Licensed RN Residency

Guthrie welcomed its largest class of Newly Licensed Registered Nurses (NLRN) to the Guthrie Nursing Family. These 55 Nurse Residents have all recently graduated from their pre-licensure nursing programs this past spring and have chosen to enter the nursing profession at Guthrie.

To help support these new nurses in their first professional role, they begin with a two-week, rigorous nursing orientation program that includes nursing skills, introduction to Guthrie policies and equipment, simulation sessions and EPIC training. During the first year, nurse residents from across the system gather in Sayre every four to six weeks for ongoing training, support, and simulation. This experience is known as COIN, or Continuing Orientation in Nursing. During this time, nurses also conduct evidence-based practice projects, which they will display as poster presentations at their COIN graduation in May 2022.

Team-based Nursing Model

Session Description

Partnering with the Press Ganey Employee Engagement Team, NDNQI quality reporting platform, and Patient Experience Team, Guthrie Robert Packer Hospital developed a pilot aimed at improving nursing engagement by changing the Nursing Staffing Model from Primary Nursing to Team Nursing.

Situation/Challenge

As a rural hospital, Clinical Nurse recruitment at Guthrie Robert Packer Hospital (RPH) is extremely challenging, especially recruitment of experienced Clinical Nurses. This challenge negatively impacts nurse-to-patient ratios, which in turn negatively impacts nursing satisfaction. Therefore, in April 2020, Catherine Mohr DNP, RN, NEA-BC, then EVP/CNO, initiated a Nursing Model Steering Committee and approached 5 Main Nurse Manager Jennifer Orbin MSN, RN-BC with the organizational need to explore evidence-based nurse staffing models.

Strategy and Approach

Literature Review: A literature review suggested Team Nursing (utilizing Clinical Registered Nurses (RNs), Clinical Licensed Practical Nurses (LPNs), and Care Partners (CP) as a team to care for a group of patients) as one of the only other viable models applicable to current practice outside the model of Primary Nursing.

Nursing Satisfaction: Nurse Manager Jennifer Orbin MSN, RN-BC reviewed questions and results from the April 2020 Press Ganey nursing satisfaction survey, identifying four key questions she felt would be impacted by a Team Nursing Model: My Department Works Well Together, I am Involved in Decisions that Affect my Work, The Guthrie Entity for Which I Work Provides High-quality Care and Services, and My Job Makes Good Use of My Skills and Abilities.

Clinical Nurse Input: 5 Main Clinical Nurses worked with the Nurse Manager to use a "Brain Board" to gather staff input on the current Role of the Clinical RN, Scope of RN Practices/Priorities, and Role of the Care Partner. Brain boards are large poster boards with a proposed question listed at the top, and space for staff to write their thoughts and feedback directly on the board. Go-Live & Post-Assessment: Clinical Nurse daily feedback was vital to the success of this pilot. The Nurse Manager asked questions after each shift focusing on ranking three key areas as either "red," "yellow" or "green:" Staffing, Delegation of Tasks, and Patient Load (acuity). This allowed for active coaching, timely follow-up, and process improvements.

To evaluate the effectiveness of Team Nursing in November 2020 the 5 Main clinical nurses participated in a Press Ganey pulse survey that was compared to the April 2020 Press Ganey Nursing Satisfaction Survey. 5 Main Clinical Nurses expressed through the pulse survey that unit teamwork, decision making, quality, and nursing practice had all improved since instituting the new Team Nursing model.

Stakeholders

- 5 Main Clinical Nurses & Care Partners
- Hospital Nursing and Operational Leadership
- Operational Excellence Department
- Continuous Improvement Program Facilitator II
- Savannah Gardner, RN Nurse Educator
- Kimberly Brenchley MS, RN Nursing Model Steering Committee

Measurable Outcomes

5 Main Press Ganey Survey Results 2020 EOS 2020 Pulse Survey:

- My department works well together.
 4.23 to 4.77
- 6. I am involved in decisions that affect my work. 3.86 to 3.92
- 7. The Guthrie entity for which I work provides high-quality care and service. 3.77 to 4.23
- 12. My job makes good use of my skills and abilities. 4.09 to 4.31

5 Main nursing quality as benchmarked through Press Ganey's National Database of Nursing Quality Indicators (NDNQI) - CAUTIS, CLABSIS, HAPIS, Falls saw no decline in performance with the move to the Team Nursing Model. Press Ganey Patient Satisfaction scores for 5 Main also have demonstrated improvement in the ANCC categories of Courtesy/Respect, Responsiveness, and Safety. Decreasing vacancy rate for nursing and decrease cost for the organization are the last two measurable outcomes that were impacted by this trial.



Making a Meaningful Difference: 5 Main Nurses Donate Mandolin to Patient

One New York man is feeling a little bit brighter today after a devastating couple of months. Back in December of last year, Rodney Dayton of Horseheads received the terrible news that he was diagnosed with cancer. Through his treatment at Guthrie Robert Packer Hospital, he lost the ability to indulge in his lifelong passion and career of playing the guitar.

"Since the mid 80s, I have played almost every weekend, somewhere," said Rodney.

Those weekends he speaks of? They were filled with Rodney enjoying the company of the band he still is a part of, named Still Kickin'. The nurses of the Hospital's 5 Main Unit came together to change this man's life, this time for the better, through a simple act of kindness. The nurses were Stacie Mayo, LPN, Christine Zalaffi, RN, and Julie Jayne, RN, who shared, "He mentioned the mandolin would help keep the fingers built up, to keep the muscles and the callouses on the fingers, and that's his passion and his love and he was kind of missing out on that for the last two months being in the hospital."

The nurses came together, purchased the mandolin, and presented it to Rodney. Rodney even played a little for the staff. Reminding all in the room of his band's name, his playing days are Still Kickin'.

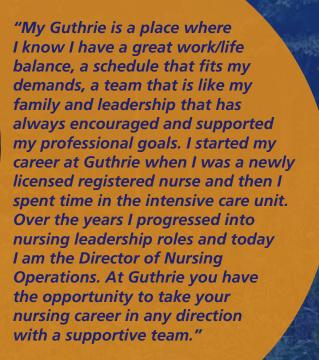
The nurses collectively continued, "We are blessed to be able to make that difference in your life. it is just the little things that make a difference. He really needed that perk."

2021 NURSING ANNUAL REPORT



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- Kelly Coldiron, RN



Beating the Odds

PANDEMIC. A word that would instill fear in anyone but especially when taking care of patients in a hospital is your career. The first thing a parent thinks about is how do I protect my family. When my twins were four months old, they were diagnosed with Cystic Fibrosis, a genetic disease that affects the lungs and digestive system, which had a life expectancy of about 25 years of age. As a nurse, it became my mission to beat the odds and give them the best life possible by maximizing their preventative care. When the twins were 4 years old, I opted to stop working in the Intensive Care Unit to avoid germs that could hurt them and opted for a more administrative job to accomplish this. Since that time, 18 years ago, I have continued to work as a nurse in leadership roles. I still maintain my clinical knowledge and help in the ED and ICU but have not taken a true clinical assignment in that timeframe.

You can imagine my fear of the pandemic, especially with high-risk family who could die if they contracted COVID. I was terrified when I received the call from the CNO that I would have to work clinically several days a week in the hospital. As a clinical nurse, I knew that I could be useful somehow, but being away from the beside for that long, I knew it would be labor-intensive to get back there. When I heard that the vaccine was coming out and we would need to mobilize leadership and teams to distribute them efficiently, I knew immediately that this was a role I could do.

I immediately contacted the Vice President in charge of this endeavor and agreed to help lead the efforts. With a background in critical care nursing and trauma, organizing a vaccine clinic would be a new adventure. I partnered with an amazing leader from the Guthrie Medical Group, and we developed the process from the ground up. I learned many new things about the organized distribution of vaccines, including storage and reconciliation of counts, staffing the clinic, scheduling employees, documenting in the EHR, etc. I especially loved the education role of teaching staff the process and working with medical students and student nurses.

It was so rewarding, watching the fear and stress lift from my fellow health care workers as we distributed liquid hope during a very stressful time in health care history. The stories of fear, much like mine, were inspiring. So many people are still working despite their high-risk situations. When these folks would get their vaccine, it was not uncommon to see tears of relief in their eyes. At times, I would get to hold one of my co-workers' hands while they received the injection or cried tears of joy to receive such an invaluable gift of protection. Protection for them and for those they love.

I worked the clinic for about three months while also maintaining my full-time role as Trauma Center Manager. They were long days and weeks, but the rewards were great. I look back on it now and barely remember the exhaustion, instead treasuring my gift of leadership in nursing, which allowed me to offer the gift of protection to so many people.

 Lisa LaRock BSN, RN, CCRN, PHRN Manager, Trauma Center





When Words Aren't Enough – A Team Fighting Everyday with Care and Passion

I want to recognize the Guthrie Corning Hospital Team from bottom to top for maintaining and deploying a standard of excellence in patient care. Why do I make this statement? I am a COVID survivor. Truly among the lucky and blessed considering how sick I was. How sick was I? 31 days in the hospital, 18 of which were in ICU with Double COVID Pneumonia. The care partners, nurses, respiratory therapy team and doctors are both caring and passionate. They were all cheerleaders and on my side from day 1. I prayed, laughed and cried with many of these heroes. And they are one and all just that – heroes – that passionately care for those of us in situations where we need the attention, support and care to recover and return to our loved ones. In closing, a simple thank you does not seem adequate. If in some way this brings you a smile or some joy when you might be having a tough day, that would make me happy. God bless you all and keep up the great work.

Your grateful friend, Mike Ambrosone



Mike donated a sum of money that Guthrie Corning Hospital put toward a massage chair for the "zen den," a space for staff to get away.

Mike also visited the nursing staff to thank them in person and has built a lasting relationship with many of them. They are his angels and his gratitude toward them shines so bright.

Reflections About Life and Nursing During COVID

This last year has been about adapting and perseverance for everyone.

Last year I was still working as a nurse in the RPH Prep and Recovery Unit (PRU) and many trials came with COVID. We had to be flexible with the daily changes coming from work and home life. My son had started kindergarten during this time, going hybrid to school two days a week and virtual learning at home three days a week. I give all the credit in the world to our kids for working through their own challenges of kindergarten plus everything that came with the pandemic. Kids learning from home was not easy, especially with their limited attention span and distractions of home life. I knew that I had to make changes to do what was right for my family and this meant I needed 12-hour shifts. I had to change positions to continue 12-hour shifts and applied for a job in the operating room, which is a 6-month orientation.

Partway through my orientation, the COVID cases in Bradford County increased. This in turn limited how many OR cases would be done daily, which affected staffing. Many of the OR nurses were floated out to the floors. I went to 8NW cardiac med/surg, my old stomping ground. The manager and staff were incredibly welcoming and appreciative for the help and knowledge. It was somewhat nostalgic to go back to taking care of those types of patients and seeing many familiar faces. Some of my time was like riding a bike, but there is something to be said about "if you don't use it, you lose it."

I was on the floors for approximately two months. During that time, two of my grandparents passed away, which was of course difficult for our family. Shortly after I had the opportunity to go back to the operating room and finished out my orientation a few weeks early.

I look back at all the different roadblocks, speed bumps, curves, and thank God for keeping us on this crazy highway. I am hopeful for this next year and appreciate having a rewarding job, supportive wife, and a resilient kiddo.

– Joshua Loud, BSN, RN



Nicole Jones, RN

NURSING THROUGHOUT THE YEAR A LOOK BACK

Registered Nurse

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