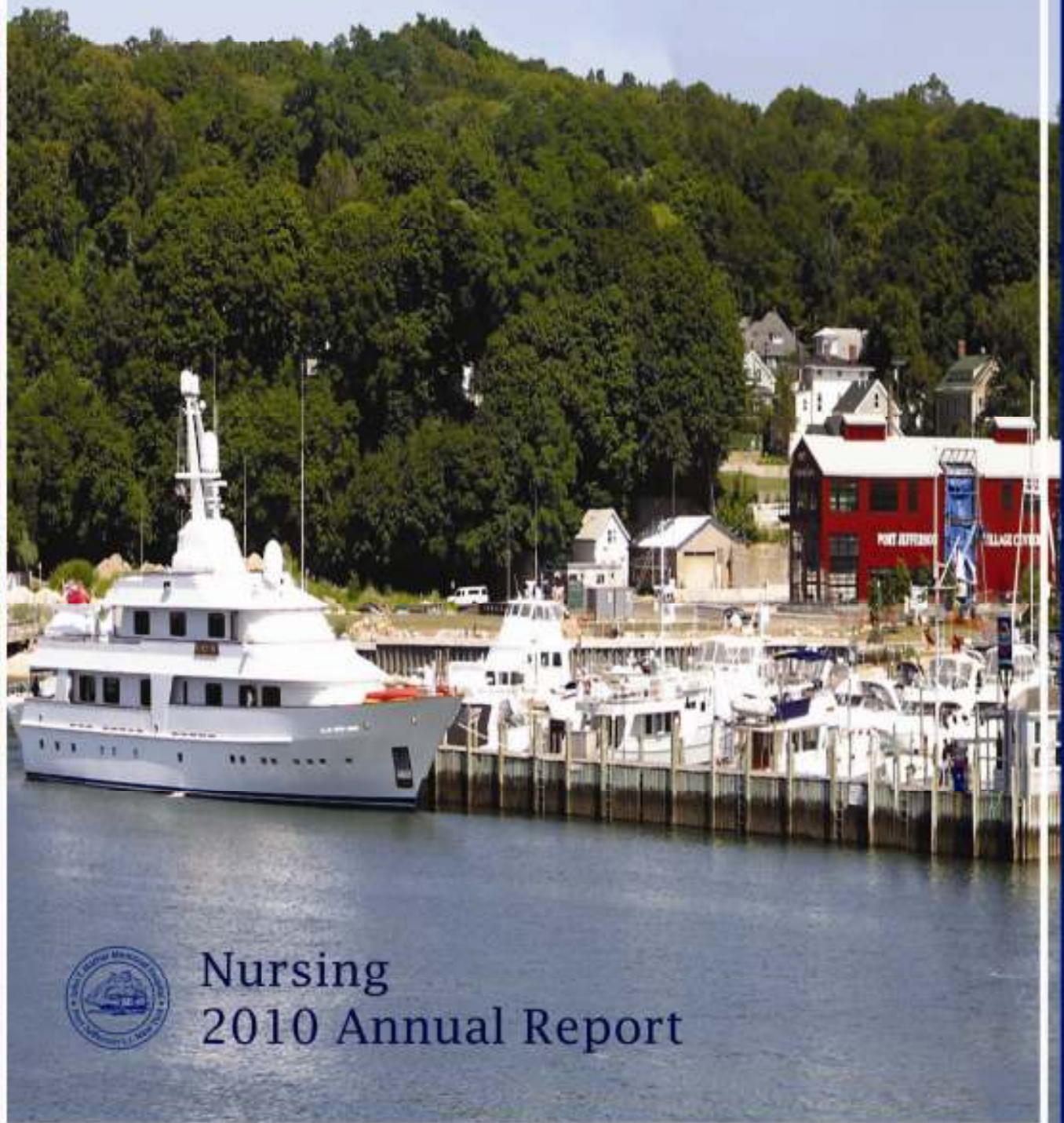


John T. Mather Memorial Hospital
Voyage to Nursing Excellence



Nursing
2010 Annual Report



Philosophy

The Department of Nursing Philosophy is consistent with the Mission, Vision and Values of John T. Mather Memorial Hospital. We believe in the provision of highly skilled, competent, nursing care that is essential to our commitment to excellence in clinical practice, education and nursing research.

The American Nurses Association’s Social Policy Statement, Code of Ethics for Nurses, Scope and Standards of Practice for Nurses, that support our professional practice of patient centered care and the New York State Practice Act are the cornerstones of our nursing practice and patient care.

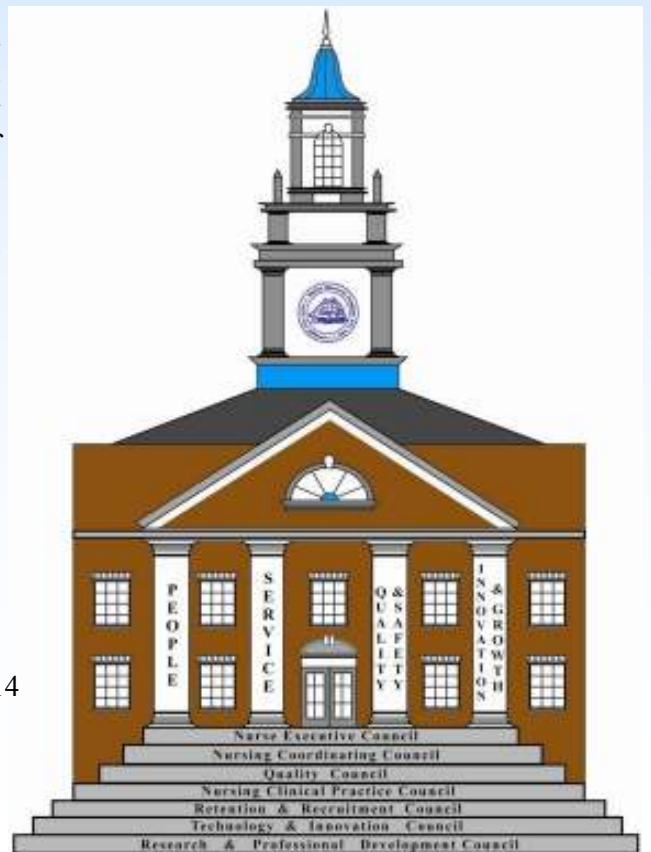
Professional nurses are accountable for providing the highest quality of nursing care to all persons based on human need with respect for dignity, regardless of race, religion, occupation, sexual preference, economic status or financial ability. Nursing care of the highest quality shall be provided to assist the individual, sick or well, in the performance of those activities contributing to health or its recovery or a peaceful death that they would perform independently if they had the necessary strength, will or knowledge.

The professional nurse assumes a leadership role in the coordination of care for the patient/family/community, collaborating with each other as well as other healthcare disciplines. The professional nurses assess the physical, emotional, social, spiritual and psychological needs of each patient utilizing critical thinking. The professional nurse defines problems, identifies goals, and preventative, curative, and rehabilitative plan of care is developed and implemented in collaboration with both the patient and his/her family or significant others, and evaluates the care provided by self and others in order to achieve successful outcomes.

At all times nursing is committed to exceeding patient/family/ community expectations.

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Welcome

As we came upon the close of the year 2010, we must reflect on many accomplishments that we achieved. It was an exciting year for nursing. We implemented two large initiatives: Journey to Magnet Designation and the selection and design building of our electronic medical record, Sunrise Clinical Manager.

This past year we have worked on developing the infrastructure to prepare and embark on our Journey to Magnet Designation. Nursing councils have been established which provide foundation for shared governance. The active involvement and collaboration of all nursing staff is an important investment in the advancement of nursing care here at Mather. The nurses' voice is heard at the unit level through practice, quality and research, professional development, and technology councils.

The Sunrise Clinical Manager Electronic Medical Record committees have been working diligently on process design development. There have been many sessions that involved detailed clinical content and process flow. Many staff members participated on these committees and dedicated many hours of their time and effort to ensure success of the project.

We are committed to ensure the best practice environment for nurses and to the delivery of excellence in quality care to our patients. We value our nurses at Mather Hospital; they are the heart of our mission. We are committed to lifelong learning and support professional growth.

Significant accomplishments were attained due to hard work, talent dedication and compassion for the nursing profession. I am honored to be part of Mather Hospital's nursing team, blessed with dynamic nursing leadership and skilled nursing staff which is the cornerstone of quality outcomes.



Marie Mulligan, RN, MSN, CNOR
Vice President for Nursing



Voyage to National Leadership

Theresa Grimes MN,RN-BC,FNP-BC,CCRN was elected to the American Society for Pain Management Nursing's (ASPMN) National Board of Directors in 2005, to election as President-Elect in 2008 and to Presidency in 2009. Currently active internationally in her ASPMN role as Nurse Practitioner in Pain Management, as well as Associate Vice President for Nursing, Grimes feels fortunate that Mather continually provides the support for nursing to impact treatment for people with pain and the international professional growth and development of pain management nursing.



Theresa's leadership in ASPMN began with co-authoring the *Scope and Standards for Pain Management Nursing*, a work that identified pain management nursing as a specialty in nursing. She shared the expertise of her position as an advanced practice nurse through editing and authoring publications for nursing certification and for the core curriculum in her specialty. Initiatives accomplished under her leadership include: co-sponsoring the International Year of the Nurse; establishing an International ASPMN Affiliate Designation for a Graduate Nurse Program in Ireland to allow grants for Pain Management Nursing; designation of ASPMN as a CEU Provider; provision of the Scope and Standards for Pain Management Nursing into international electronic Ovid, a database for health care; coalition with other pain organizations to lead the state of Washington to prevent the under treatment of chronic pain; coalition with the American Pain Foundation to provide video clips to educate patients for safety in pain management; liaison to several nursing organizations to integrate pain management into their standards; and testimony to the FDA to advocate for patients receiving appropriate patient education in pain management.

Community Training Center



John T. Mather Memorial hospital is proud to be an American Heart Association (AHA) center for providing professional and non-professional education on Basic Life Support, Advanced Cardiac Life Support, Pediatric Advanced Life Support and Heart Saver/First Aid. These programs are part of the American Heart Association's Emergency Cardiac Care program. The main goal of this program is to increase the survival rate of people who experience a cardiopulmonary arrest. Mather Memorial Hospital operates one of the AHA Community Training Centers.

The Community Training Center operates under the direction of Bernadette Brochard, Registered Nurse. Bernadette has been an active member of the American Heart Association for many years. She is a member of the National Emergency Cardiac Care Committee and holds the post of chairperson for the Mentoring Committee. Her continued commitment to emergency cardiac care and her clinical expertise has resulted in her being appointed to both regional and national faculty for the American Heart Association.

The Community Training Center at Mather hospital meets the needs of the community by providing emergency cardiac care education for professional staff at Mather and from the community at large. In addition, the center provides education to non-professionals in the Suffolk County region. We commend Ms. Brochard for her expertise and her accomplishments in cardiac emergency care.



Voyage to Transformational Leadership

Nursing Executive Council

The healthcare environment is experiencing unprecedented reformation. Senior leadership recognized it was essential to transform organizational values, beliefs and behaviors by creating a vision of becoming the “Best Community Hospital in New York and embarked on the “Voyage to Excellence.”

Our senior leadership team planned and created a vision for the future to ensure the system and environment is conducive to achieve our vision. We needed to guide the organization as to why change is necessary and to communicate each department’s part in achieving that change. In order to accomplish our goals and vision, we must listen, challenge and mentor our staff to affirm that Mather makes its way into the future.

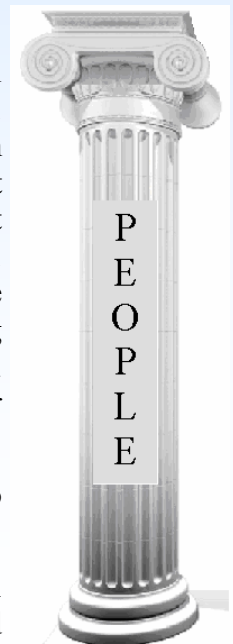
Comparing ourselves to a strong structure having to withstand stormy times, we acknowledged that in order to withstand turbulent times we must secure a strong foundation and infrastructure. This foundation and infrastructure was supported by our pillars: People, Service, Quality, and Innovation and Growth. Together each pillar represents shared weight of a structure thus securing the integrity and wholeness of the organization. One pillar alone cannot withstand the weight of an organization or structure. Together as supporting pillars, we must stand together to sustain strength and independence.

The strategic plan for nursing was developed and implemented in alignment with the organizational goals and of the Voyage to Excellence. The Department of Nursing is an integral part of the organization, and therefore contributes largely to the composition of each pillar. Recognizing this, support advocacy by nursing has been in place since the inception of the Voyage to Excellence in January of 2008. Strong nursing participation has been in place since the beginning of the initiative as evidenced by the assignment of nurse leaders as co-chair for each voyage team.

It was identified that the success of attaining our vision would be contingent upon cultural change. It can be perceived that it is relatively easy to lead people where they want to go. However, it is the transformational leader that must lead people to where they need to be in order to accomplish cultural change. Recognizing that transformational leadership must occur, it was agreed that it must begin at the top of the organization. It was determined that nursing leadership requires a stronger foundation to support the change that was imminent. Therefore, nursing leaders acquired additional resources to assist them to lead change. Since that time, there was leadership succession and several new leaders joined the Nursing Management team who required mentoring and enhancement of leadership skills. Educational training programs were identified and implemented to meet the needs of our culture and patient care environment.

Therefore, as part of the strategic plan for nursing, a new management design was created to ensure leadership and accountability needed to be hardwired to ensure best outcomes.

In February of this year, each nursing division developed and disseminated Departmental Vision and Blueprints based on the four pillars promoting the delivery of evidence-based patient care, organizational goals, enhanced patient care programs, increased Press Ganey/HCAHPS satisfaction, and increased physician and staff satisfaction utilizing a cost effective approach.





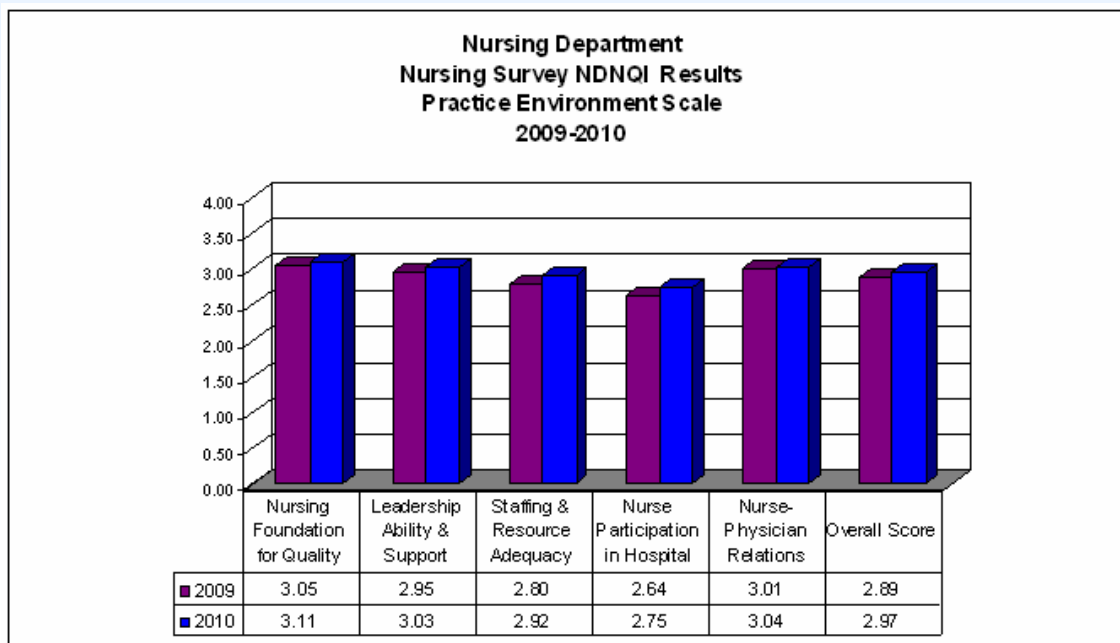
Voyage to Healthy Work Environment

Nursing Satisfaction

As part of the nursing strategic plan for 2009, the Nurse Executive Council made a decision to expand our process for evaluating nursing satisfaction to include the National Data Base for Nursing Quality Indicators: RN Survey with Practice Environment Scale.

In 2009, we had a 76% response rate that is a favorable completion rate compared to other hospitals. In addition, our T-Score, which reflects the degree to which RN's enjoy their job, was higher than the average in other hospitals. The results of the 2009 survey were communicated with the staff and with staff input, an action plan was developed and implemented to further improve the work environment for the nurses.

In 2010, the survey was repeated, and we improved in all areas of the survey. The participation rate went from 76% to 82%. The job enjoyment score improved by two full points to over 60 which indicates a high degree of job satisfaction. The five key elements on the Job Enjoyment Scale (see graph below) also improved. These key elements reflect that nurses are supported by leadership, involved in decision-making about patient care and have positive nurse – physician relations. The vacancy rate of one percent and the turnover rate of seven percent further reflects the satisfaction of the registered nurses at Mather. In 2011, the Shared Governance Councils will continue and strive to collaboratively improve the nurse's job satisfaction and environment of care.





Employee Health

John T. Mather Memorial Hospital is committed to providing a safe workplace environment. In 2010, there was a 33% decrease in employee injuries and a 54% decrease in lost days from patient handling.

In May 2010, the Grants Director and the Employee Health Service procured a grant from the Department of Health for Safe Patient Handling.

In November, ceiling lifts were installed in each ICU room to provide immediate and easy accessibility to lift devices to eliminate manual lifting and provide safe patient handling. Patients can be positioned side to side and up in bed as well as transferred in and out of bed. This unit will be used as a pilot to show the effectiveness of a no lift system.

In 2010, an e-learning program was developed and implemented to provide employees with a review on all safe patient handling equipment. Seventy five percent of the clinical staff completed the e-learning program.

A safe patient handling committee was also established in June comprised of staff from all clinical areas. The purpose and goals of this committee are to affect positive change towards safe patient handling through engineering controls, education, reinforcement and cultural change.

In 2010, there was a 10% decrease in total injuries and 8% decrease in worker's compensation reportable injuries. Patient handling, slips, trips and falls, and combative patients accounted for the events with the most frequent injuries. To reduce work related injuries, three committees were established to address each of these injury risks. Each committee comprises a multidisciplinary team to review these injuries and come up with preventive strategies to improve employee safety outcomes.





Voyage to Structural Empowerment

Critical Care

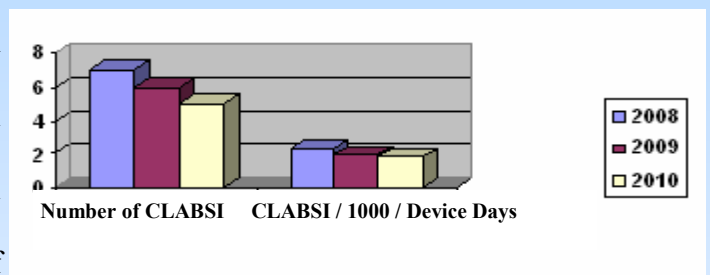
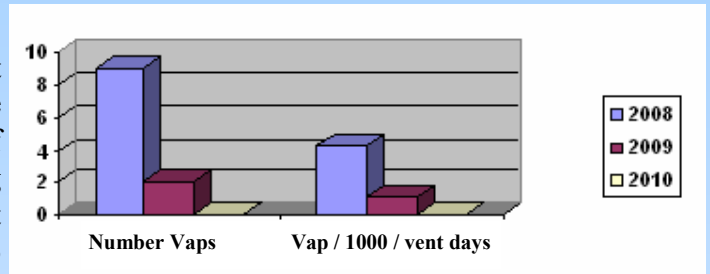
The nurse manager and the clinical nurse specialist worked in collaboration with the director of the Intensivist Program to analyze data to identify areas of improvement to achieve empirical outcomes. Nursing identified that interdisciplinary partnership in patient care was vital. Therefore, a team was formed to enhance continuity of care, effective communication, and ongoing staff and patient/family partnering in care.

The team members include: Intensivist, Nutritional Services, Nursing, Respiratory Therapy, Pharmacy, Physical Therapy, Social Services, Infection Control and Case Management. Each discipline contributes their knowledge and expertise in the delivery of patient care.

The team implemented a key process for improvement through the initiation of interdisciplinary rounds which is carried out twice a day. The team structure provides the venue to communication among caregivers to direct and prioritize daily patient care. During interdisciplinary rounds, the plan of care is reviewed and goals for the day are agreed upon. The patient status is re-evaluated throughout the day and goals are revised appropriately.

The implementation of the team concept has resulted in tremendous successes as evidenced by:

- Zero ventilator acquired pneumonia in the coronary care for 16 months and Zero incidences in the intensive care for 15 months .
- Central line infections decreased from a rate of 2.3 in 2008 to 1.81 in 2010.



Emergency Nursing Service

Improving the patient's Emergency Department experience is a component of clinical and patient satisfaction initiatives at John T. Mather Memorial Hospital.

As a means to address the patient experience, a multidisciplinary team was created and lead by Emergency Department leadership. The team, consisting of nursing, medical and clinical support personnel, embarked on a multiyear project to include patient satisfaction as a key component in the delivery of care, which lead to a positive patient and family experience.

As a result of these efforts, Press Ganey Scores for the Emergency Department began to rise from a benchmark rank of 76% in the first quarter of 2009 to 94% in the 4th quarter of 2010.



The ED Nursing staff played a major role impacting the ED ranking by increasing Nursing Press Ganey Scores to over 90%.

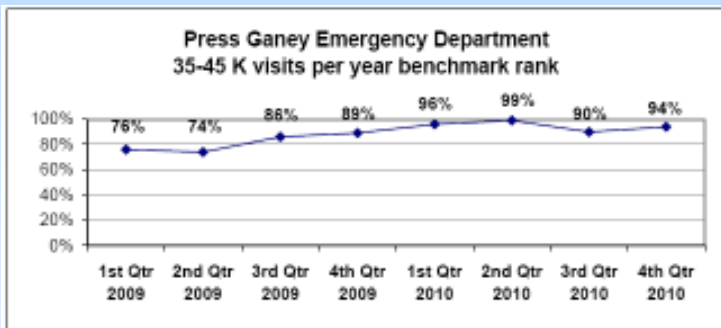
Nursing:

Courtesy > 93%

Taking the time to listen > 90%

Concern for privacy > 90%

Mather Hospital Emergency Nurses incorporate Emergency Nursing Practice with “collaborative and interdependent relationships with other health care providers and involve acknowledgment of shared values, mutual respect for others’ contributions to health care. Interdependent practice among emergency nursing, medicine, and other health care disciplines is vital to ensuring efficient department operations and quality patient care.”



The entire Emergency Department staff will continue the Journey in 2011 with a mission to provide the best Emergency Services of any community hospital in New York State.

Transitional Care Unit

Mather Hospital was one of five hospitals in New York State that received approval for developing a Transitional Care Unit (TCU) in 2005. The TCU is a skilled nursing facility that addresses the needs of the Medicare patient who requires additional medical, nursing, social and rehabilitative services. A patient centered model of care delivery is accomplished by the interdisciplinary team partnering with the resident and/or family to develop a comprehensive plan of care. The registered nurse coordinates the plan of care to ensure that all the resident’s goals are implemented, assessed and evaluated; the goal of which is to return the resident to their prior level of function and to discharge the resident safely to their home.

The design of the TCU is conducive to healing by providing a homelike environment. Residents have access to a formal dining area and recreational therapy activities that include pet therapy and computer access for personal use.

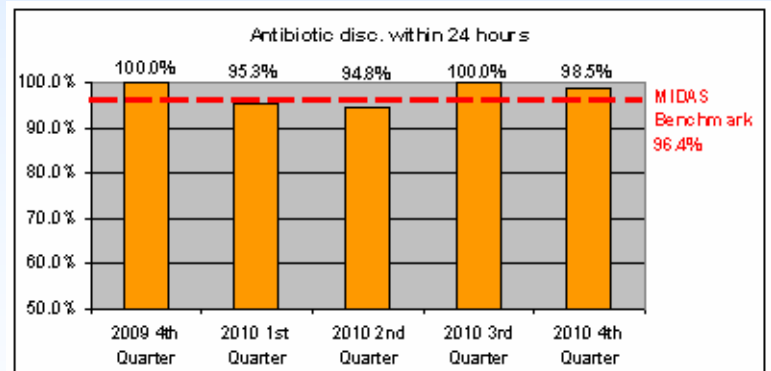
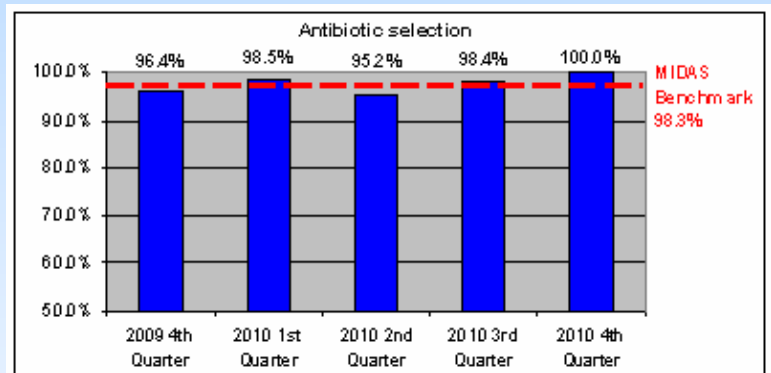
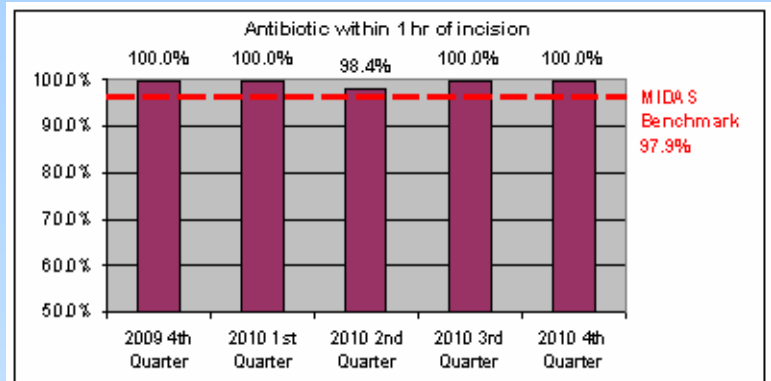
We are very proud of the interdisciplinary team and residents who accomplished an overall rating of 5/5 stars for Medicare’s *Nursing Home 5 Star Quality Rating*. This is a public reporting system implemented by Center for Medicare and Medicaid Services (CMS) for all Skilled Nursing Facilities across the country. Each facility is rated from 1 star (low) to 5 stars (high), based upon health inspection results, quality measures and staffing levels.

In 2010, Mather Hospital’s Transitional Care Unit was recognized by the *US News and World Report*, on their published list of one of **New York’s Top 100 Nursing Homes**. Furthermore, the TCU received the distinction of being the “gold standard” across New York State’s five demonstration sites, according to the NYS Department of Health.

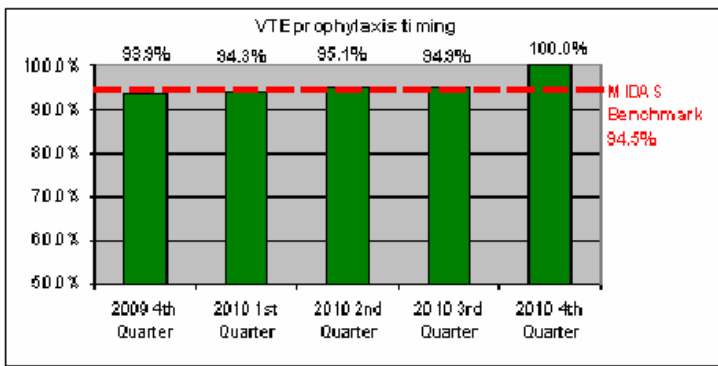
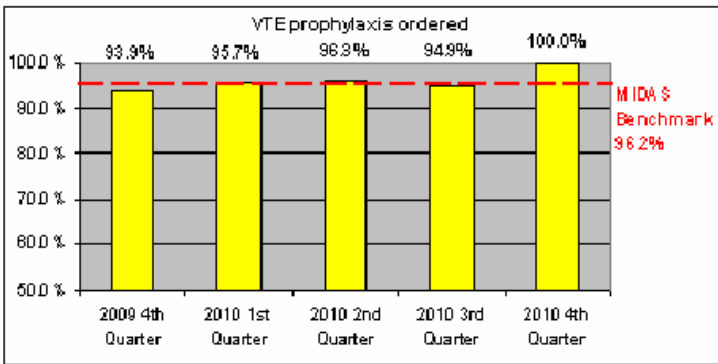


Surgical Services

Department of Surgical Services provides comprehensive care for patients undergoing surgical procedures. Cutting-edge technology, collaborative practice and a strong team spirit enable the Surgical Services team to provide exceptional care to over 16,000 patients annually. Registered Professional Nurses, Nurse Practitioners, Surgical Technologists, Physicians and support staff use a multidisciplinary approach utilizing comprehensive handoff communication as a means to deliver seamless “Patient Centered Care” throughout our patient’s hospitalization. We provide a vast array of procedures that include minimally invasive, diagnostic, therapeutic, curative and palliative procedures that are performed in the following specialties: General, Bariatric (Center of Excellence), Gynecology, Plastic and Reconstructive, Orthopedics (including Total Joint Replacement), ENT, Urology, Thoracic, Pulmonary, Vascular (including Endovascular), Endoscopy and Pain Management. Mather Hospital’s Peri-operative Registered Professional Nurses continue to deliver a high level of care in their specific specialty utilizing education through enrollment in higher degree programs as well as pursuing nursing certification in their specialty. It is through dedication to learning that nurses are able to render the highest quality of care to our patients.



The goal of Surgical Services is to render the highest quality of care through Exemplary Professional Practice. Through shared governance, staff Registered Professional Nurses were empowered to create and make decisions based on evidence based practice. The Peri-operative Nursing Unit Council utilized data to determine areas for improvement to enhance Surgical Care Improvement Project Core Measures (SCIP) outcomes. Analysis of the data demonstrated a need for improvement in communication and hardwiring of best practices. Therefore, process improvement was put in place to accomplish these goals.



Achieving excellence in patient outcomes is our highest priority within Surgical Services. The goal is to reduce surgical infections and other complications post procedures. Our focus is to execute best practice utilizing evidence-based practice in antibiotic selection, administration within one hour of incision and venous thrombus embolism (VTE) prophylaxis. Our success is due to our collaborative effort between all the departments within Surgical Services, which is initiated from the time the patients come in for pre-surgical testing throughout their peri-operative stay in the Ambulatory Surgery Unit, Operating Room, Endoscopy, Pain Management Center, Post Anesthesia Care Unit through discharge.



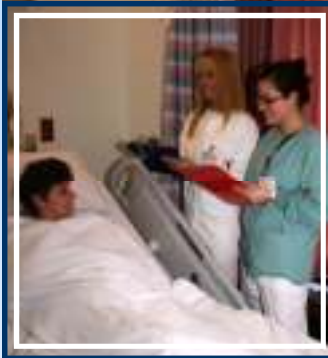


Medical Surgical Services

The Medical Surgical Nursing Division has embraced the Patient Centered Care Model. The nursing staff has adopted and implemented innovative practices to improve the quality of patient care by using the “Transformational Care at the Bedside” approach, Hourly "Intentional Rounding”, “Discharge, Phone Calls and Bedside Shift Reporting”. An Interdisciplinary white board was designed to include all the disciplines and activities that build the plan of care for the patient. Patients and families are encouraged and given the opportunity to

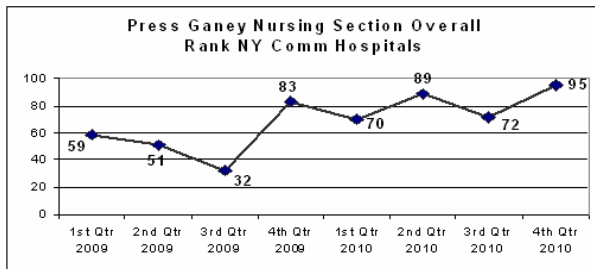


communicate with the interdisciplinary team. The nursing staff on the medical surgical units have created an environment for the delivery of quality patient care.



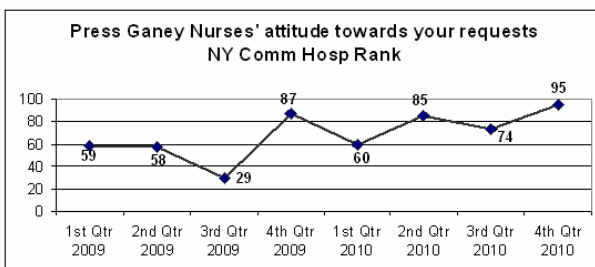
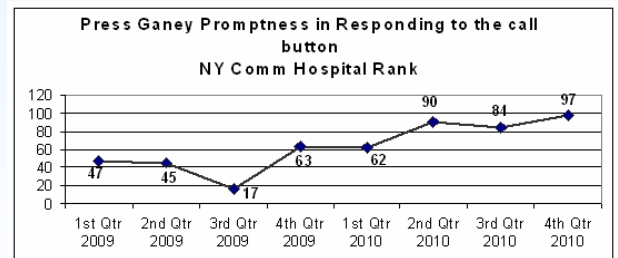
Transforming care through best practice initiatives has increased the effectiveness of communication and fostered a partnership between the staff and the patient. The strategies incorporate hourly visits to the patient addressing personal needs and providing the shift change report at the bedside, encouraging involvement of the patient and their families. The caring does not end when the patient is discharged; the nurse calls the patient when discharged home to be sure the patient understands their discharge and medication instructions.

Through staff engagement, these concepts have been hardwired into the nursing staffs’ practice. As a result, the overall inpatient patient satisfaction scores for 2010 have steadily improved.



The overall patient satisfaction nursing section rank increased from 59 in 2009 to 95 in 2010.

Promptness in response to call buttons increased from a rank of 47 in 2009 to 97 in 2010.



Nurse's attitude toward patient requests increased in rank of 59 in 2009 to 95 in 2010.



Voyage to Excellence in Community Health Partnerships

Total Joint Program - The Customized Approach

The Total Joint Program at John T. Mather Memorial Hospital has made great strides to become a premier total joint replacement program on Long Island.

The program focuses on mobility as the cornerstone of independent living and joint replacement may be essential to maintaining independence. Mather Hospital initiated a customized interdisciplinary team approach to total joint replacement which includes nursing orthopedic coordinator, nursing staff, surgeons, physical therapists, medical social workers, occupational therapists, patients and their families. The Nursing Orthopedic Coordinator facilitates the process of interaction between health-care disciplines and departments, enhanced communication with ensuring quality care across the continuum. The interdisciplinary team maintained best practices, improved delivery of care, and optimized patient outcomes through clinical and educational expertise. The patients never feel alone with the Orthopedic Coordinator's guidance from the informational seminar through discharge. Patients and their families are provided with knowledge and information necessary to make informed decisions.

The Total Joint Education Replacement Program expanded during the year 2010 through the implementation of a computerized program. The patient and their families view this program in the comfort of their home. The patients acknowledged that viewing this information in their home decreased their anxiety toward this procedure.

Nursing, in collaboration with the nursing orthopedic coordinator, the orthopedic surgeons and allied health professionals, oversee the Anticoagulation Therapy Program for total joint replacement patients. The Nursing Orthopedic Coordinator facilitates the care of the patient after discharge. The goal is to prevent post operative complication related to deep vein thrombosis.

Stroke Center (for Treatment and Prevention)

A major component of the Stroke Program is community education. The stroke coordinator is a Registered Professional Nurse who develops and presents education to a wide variety of community organizations. The organizations that have benefited from this education include: Brookhaven Assisted Living, Cardio Wise Café, Bretton Wood's Women's Club, and the Medford DMV for blood pressure screening. Cardio Wise Café involved multiple presentations on healthy meals by local restaurants. Bi-annually the stroke coordinator provides stroke education to local Emergency Medical Services (EMS) units to improve the quality and timeliness of care that patients receive prior to admission to the hospital. The stroke coordinator recently wrote an article for the Port Jefferson "Patch" website highlighting "Go Red For Women", describing the prevalence of heart disease in women. We are in the process of expanding the size and scope of community education on stroke and heart disease which will include initiating a stroke support group. The stroke coordinator reaches out to organizations to offer stroke education and blood pressure screening on a monthly basis.



Behavioral Health



The Behavioral Health Services at Mather Hospital started with an inpatient 10 bed adult unit in 1977. The services expanded to include a 27 bed inpatient adult unit, a 10 bed inpatient adolescent unit, a Partial Hospitalization Program serving adults, adolescents and eating disorder clients, and a Chemical Dependency Clinic. With the opening of the Mental Health Clinic in May 2010, the Behavioral Health Services has achieved the goal of providing a full continuum of behavioral health care for the Community. Behavioral Health Services at Mather Hospital were further enhanced in 2010 with the deployment of an electronic health record that provides clinical information necessary to treat the

client seamlessly across all levels of care.

The behavioral health programs created a unifying vision that guides the delivery of patient care “To provide recovery focused treatment facilitating personal responsibility for change”. The interdisciplinary team identifies opportunities to improve clinical outcomes and facilitate patient recovery across the continuum of care. The team provides mindful, respectful and evidence based practice focused on the essential components of recovery. These components include the principles of self direction based upon patient strengths where the individual is empowered to assume responsibility for their choices. We provide care that is based on respect, is individualized, person-centered and holistic, utilizes peer support and acknowledges the non-linear path of a patient’s recovery process. Members of the team conduct community support groups for patients and their families for mental illness and eating disorders. As a result, our patients experience a culture inherent with possibilities, while growing in the ability to accept responsibility for personal change.

Infusion Center

Mather Hospital received a \$1.5 million grant from the New York State Department of Health’s HEAL NY program to assist the Department of Nursing to expand the Infusion Center to double capacity. This enables the patient to receive therapeutic infusion services on an outpatient basis and to reduce the length of inpatient stay. The clinical services include Oncology, Hematology, Rheumatology, Cardiology, Nephrology, Endocrinology, and Infectious Diseases.



Nursing was the leading force behind this innovatively designed center. The nurses incorporated patients perspectives related to the structural design and patient flow concepts to promote a positive patient/family experience.

The newly constructed Infusion Center opened in August 2010. The center was recognized for its positive patient care environment.



Voyage to Quality

Nursing Quality Management

The Nursing Quality Management Program at John T. Mather Memorial Hospital is the ongoing assessment and improvement of the delivery of patient care. The performance improvement framework consists of the three domains of quality: structure, process and outcome. The nursing staff fosters a commitment to the pursuit of quality at all levels of the organization in performance improvement efforts. The following is representative of the nursing quality endeavors for 2010 with a focus on our fall prevention initiative. These efforts demonstrate the excellent care that is delivered to our patients.

Fall Prevention

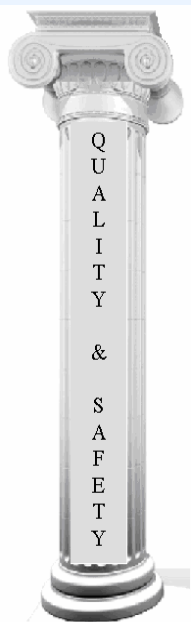
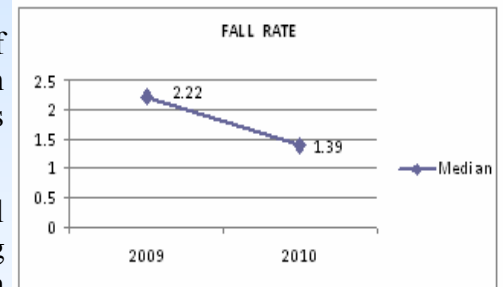
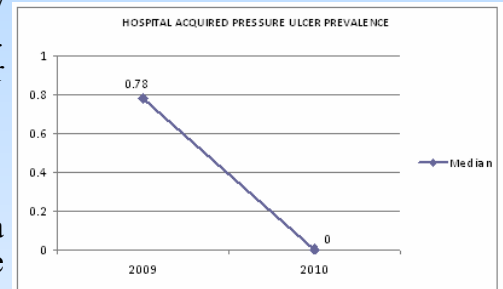
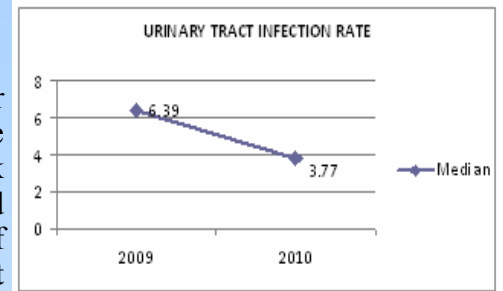
John T. Mather Memorial Hospital received a grant to address a collaborative effort across the continuum of care to reduce falls. The grant included Mather Hospital and four skilled nursing facilities.

The inter-facility team is comprised of administrators and directors of nursing from every facility. Baseline falls data was collected from each facility, including the fall rates as well as the severity of injuries related to falls.

Multiple inter-facility meetings were held, during which all participating facilities agreed upon the following interventions to be implemented across the continuum of care. The Morse Fall Scale would be utilized by all facilities to identify residents who were at risk for falls. To coincide with the implementation of the Morse Fall Scale, each facility agreed to modify their transfer forms to include the Morse Fall Score. This assisted the receiving facility to immediately identify a patient at risk to fall. The second care coordination mechanism implemented was extensive education to staff, patients and families, prior to care, during the patients stay in the healthcare facility and upon discharge home.

Complete implementation of all interventions was initiated as of 1/1/2010. Two facilities that have seen improvement in their fall rates to date include Mather Hospital and one skilled facility. Mather Hospital improved in both the fall rate and the severity of falls.

The project resulted in significant process improvements within the facilities, as well as improved coordination across the continuum of care, that will continue to result in positive outcomes for residents and patients at risk for falls.





Infection Prevention

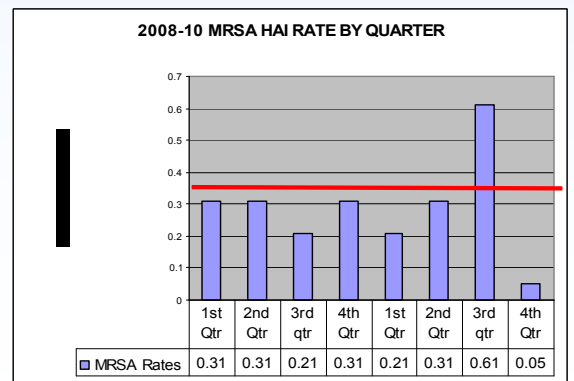
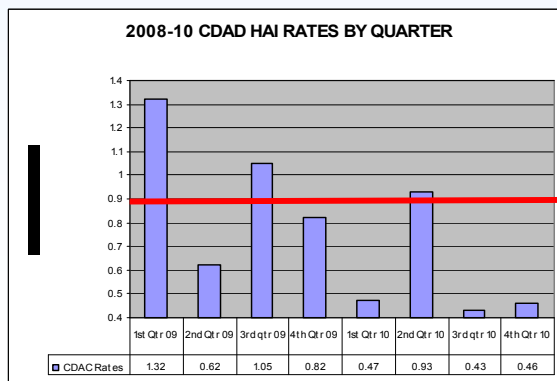
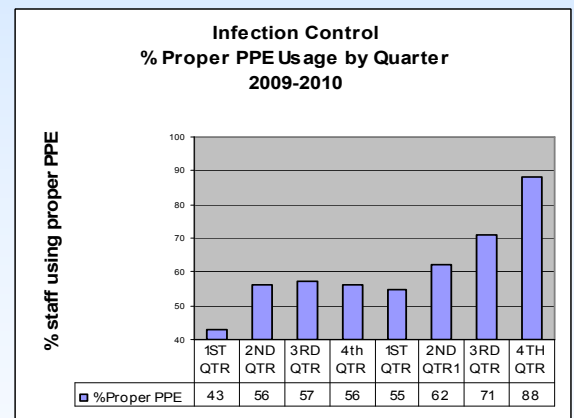
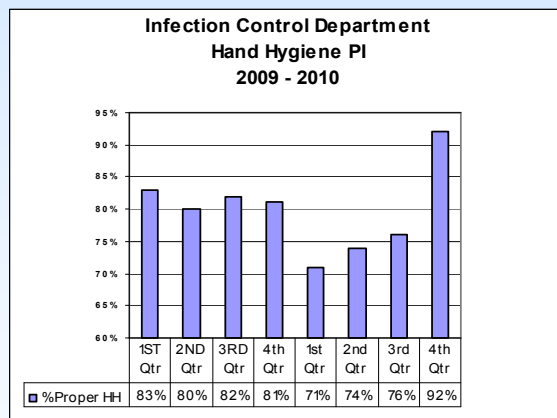
Mather Hospital has a commitment to patient safety and quality. The Infection Prevention Department, under the direction of the multidisciplinary Infection Control Committee, is responsible for developing policies, educating staff, performing surveillance for significant infections and implementing procedures to prevent spread of infections.

Hand Hygiene and appropriate Personal Protective Equipment (PPE) usage

The success of any Infection Prevention Program relies on hospital staff performing appropriate hand washing and barrier protection to prevent the spread of infections from one patient to another. In 2010, the infection prevention staff continued their campaign on proper hand hygiene. Mather Hospital utilized direct observations to measure compliance with proper hand hygiene standards. By the fourth quarter, the hospital's hand hygiene rate exceeded 92% compliance.

MRSA and Clostridium difficile Surveillance

The success of the staff performing proper hand washing and barrier protection (personal protective equipment) resulted in a decrease in infections. Two of the most nationally prominent infections are MRSA and Clostridium difficile (C. diff). Infection prevention staff conducted daily rounds to assure that all patients are appropriately isolated and personal protected equipment was being utilized. The MRSA rate dropped 17% in 2010 and our C. diff infection rate dropped 40% in 2010. Rates for both infections were below benchmarks (the red line).





Voyage to Innovation and Growth



Mather Hospital's Nursing Department embraced the use of electronic medical records over 18 years ago when the nursing staff on the medical surgical units developed initial nursing assessments, daily nursing reassessments and flow sheets in the hospital's clinical information system.

A hospital wide initiative was implemented to seek and select a new advanced clinical information system. Members of nursing leadership and nursing staff participated in multidisciplinary teams to assist in the identification and selection of the vendor of choice for a clinical information system. Staff nurses, nurse managers, nurse educators, nurse informatics and nursing administration came together to identify key clinical priorities and processes for the electronic medical record functionality. A unique functionality that brings evidence-based practice in the form of knowledge-based charting at the point of care was a deciding factor in the selection process.

In 2010, the Nursing Department embraced the opportunity to actively participate in the design and development phase of the hospital wide electronic medical record. The nursing department has assumed a leadership role in the design and implementation of Sunrise Clinical Manager system. Nursing leaders have been designated to chair four of the seven committees. Direct care nursing staff have been appointed to serve as members on all of the clinical informatics teams. The Department of Nursing is committed to the success of the development and implementation of the program. Through this process, the Nursing Department has established a strong foundation of interdisciplinary collaboration that will become the basis for implementation of electronic documentation of patient centered care.





Voyage to Advancing the Practice of Nursing

Mather Hospital supports advanced practice nurses: Clinical Nurse Specialists (CNS) and Nurse Practitioners (NP) provide a distinctive and comprehensive support to advance the practice of nursing while promoting and ensuring the very best outcomes are consistent for all patients. Through the expert knowledge and clinical skill of each of these nurses, Mather nursing continuously provides the most current and thorough patient centered care.

Our CNSs in Critical Care and Wound Care plan nursing programs to expand the depth of knowledge and clinical expertise of our nurses both in the classroom and on the nursing units. This ensures that our patients receive patient-centered care services at the unit level. The CNS role promotes best practices throughout our hospital as ready experts for new patient programs and where new graduate nurses practice as well as resources for experienced nurses.

Psychiatric Nurse Practitioners provide diagnoses and treatment of mental illness and chemical dependency in outpatient behavioral health programs which enhances the quality of care. Nurse Practitioners in Pre-Surgical testing oversee the assessment and prescriptive needs of the pre-operative patient. The nurse practitioners in the hospital's Employee Health Service report to the Department of Nursing and ensure that the health needs of the employees are met.

Our Nurse Practitioners (NPs) for the Chronic Pain Management Program provide advanced practice pain management consultation in a collaborative effort with our physician pain specialists, fostering a multimodality approach to relieving pain. The NPs uniquely provide nurse to nurse consultation for patient pain control to ensure that pain and symptom related issues are addressed throughout the hospital stay.

Overall, our advanced practice and specialty nurses ensure that our commitment to provide high quality, effective and efficient individualized patient care is sustained.





Voyage to Professional Development

Nursing Professional Development

Mather Hospital has a commitment to nursing education and lifelong learning. The clinical educators meet this commitment by offering an array of educational programs that address the educational needs of both the novice nurse to the clinically experienced nurse.

The education program encompasses orientation of new employees, inservice education activities, skill development, and continuing education courses.

Mentoring and Developing New Graduate R.N.'s

The Education Department offers a specialized orientation program for the new graduate registered nurse. The clinical educators play an integral role in achieving the strategic initiative of successful advancement of the new graduate from novice to independent practitioner.

The orientation program is a collaboration between the new employee, clinical educator, the preceptor and the nursing manager. The program consists of a combination of classroom lectures, discussions, simulation exercises, clinical mentoring and computer based learning. Simulation exercises, along with clinical scenarios, facilitate the correlation of theoretical knowledge and clinical skills to aid the new nurse in developing critical thinking. The program is six months in length but is tailored to meet the individual education needs of the new nurse.

The new graduate orientation program has been so successful that a bridge program has been developed for medical surgical to critical care nursing. The program is opened to new nurses who demonstrate the ability and desire to advance directly to this specialty. A structured program is led by the critical care clinical nurse specialist.

We are very proud of our 97% graduate retention rate.

Preceptors: The Bridge to a Competent Workforce

Preceptors play a vital role in the education and socialization of new employees to the hospital and specifically to the nurse's role. Preceptor's possess clinical expertise and serve as role models, facilitators, resource nurses, skilled communicators and educators. Through their role of mentoring colleagues, they meet the American Nurses Association's leadership standard for professional performance.

Mather Hospital offers a "Preceptor Workshop" that prepares the preceptor for their role. The program includes education on principles of adult learning, domains of learning, generational factors, and dealing with concerns that arise during the orientation program. The preceptor is actively involved in peer evaluation of the clinical and cognitive skill of the new employee. We are proud of our preceptors for their commitment to their patients, colleagues and the Nursing Department.



Certified Nurses

Evidence based practice suggests nursing certification increases a nurse's intrinsic value and empowerment, therefore, contributing to increased patient satisfaction and better patient care. Nursing specialty certification supports nursing practice and a sense of pride and professional accomplishment.

The registered nurses at John T. Mather Memorial Hospital who acquired specialty certifications were recognized at the annual Certified Nurses Day in March of 2010.

In the fourth quarter 2010, registered nurses who held certification specialty certifications increased by a remarkable 41%.

Congratulations to all Certified Nurses who are on the voyage to professional advancement!



Voyage to Professional Advancement

John T. Mather Memorial Hospital would like to recognize and thank all of our nurses for their professionalism and leadership in achieving and maintaining National Board Certification.

The following RN's and Advanced Practice RN's are being recognized for their achievement in Nursing Certification.

<p>Lori Accetta CCRN Joan Adams CNOR Lisa Ambrose CPAN Jean Arnold NE-BC Melissa Baranowski CGRN LaToya Bernard RN-BC Kathleen Blase RN-BC Susanne Bittner OCN Donna Blaskopf CRN Brianna Bonner-Layne CPHM Denise Bonneville RN-BC Christine Brandstadter RN-BC Anna Marie Braslow CCRN Catherine Breitenbach RN-BC Christine Brons CAPA Janet Buitenkant CNOR Indrani Burmanroy OCN Trisha Calvaresa CAPA Dana Cardello RN-BC Irene Cassata CPAN Maureen Chemosky CEN Jennifer Christofer RN-BC Jean Clark CPUR Donna Collins CPAN Elizabeth Conneally CGRN Elizabeth Contri RN-BC Victoria Cook APRN-BC Laura D'Amato CNOR Marianna David RN-BC, ONC</p>	<p>Janet DeAngelis CPAN Christine DeBernardo RN-BC Barbara DeMaio CPHM Susan Detorris CAPA Laureen Diot ANP-C Lillian Donnelly OCN Denise Driscoll APRN-BC, CARN, RN-C Christa Dwyer RAC-CT Lorraine Farrell FNP-BC Patricia Fernandez ANP-BC Renata Flagar FNP-BC LoriAnn Gersbeck CEN Nina Gervais RN-BC, CCRN Cameron Gittens BCEN Dina Giuliotti CEN Maryellen Glennon CCRN Joan Godbold RN-BC Maryann Goodman ONCB Margaret Gordon CWON Marina Grennen CEN Patricia Griffin-Bernstein CNOR Theresa Grimes RN-BC, FNP-BC, CCRN Susan Grover PMHCNS-BC Diane Gully CEN Laura Hamilton CPUR Guomei Hauan-Walsh ANP-BC Allison Heller ANP-BC, CEN Louise Hershberger CPAN Linda Hill PMHCNS-BC</p>	<p>Lisa Iulucci RN-BC Kathleen Jochen RN-BC Stacey Jolley OCN Ellen Kasprzak CPHM Vicki Kellher CNOR Nancy Kennedy ANP-BC Judith Kenny-Lourine RN-BC, CPUR Susan Kiernan CPAN Jeffery Kniffen FNP-BC Deborah Lamendola ANP-BC, CWON Vivian Langford CRN Andrea Lauckhardt CAPA Mary Lindner RN-BC Nanette Lindstrom CPUR Ray Luttinger CIC Julia Macauley CCRN Phyllis Macchio ANP-BC, GNP-BC Deborah Malle CIC Nita Malik FNP-C Kathy Manzi CNOR Thomas Manzi CNOR Mary Ellen McCarthy ANP-BC Shirlee McKenna CAPA Chris McManus CCRN Susan Morin PMHCNS-BC Marie Mulligan CNOR Theresa Murphy RNCB, CRNI Laura O'Brien CRN Jamie O'Hara CAPA</p>	<p>Karin Pape ANC-BC, COHN-S Leslie Parker APRN-BC Phyllis Parker CEN Nina Pellegrino CCRN Teresa Pickel CCRN Madeline Pieloch CPUR April Plank ANP-BC Emily Pozgay NP-C Lois Reilly CPUR Rebecca Roben FNP-BC Anne Roberts CCM, CPUR Nancy Rochler CCRN Elizabeth Rogers CNOR Katie Rush CCRN, CRN Karen Schwartz CEN Genine Schwinge ANP-BC AnnaMaria Savelion FNP-C Patricia Skokovitz ANP-C Suzanne Soltysik RN-BC Darlene Steigman RN-BC Faustina Stoebe CPAN Michelle Swensen CPAN Najmi Tanwir CEN Karen Tuzzolo CNOR Trudy-Ann Weekes-Roach CNOR Lynn Weiss RN-BC Andrea Wohlenberg CWON Patricia Woods CRN Michele Wyllie CWS Patricia Zarb RN-BC</p>
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We appreciate what you do to continue our growth as health care providers and to always build our skills together to contribute to higher standards of care and better patient outcomes.