



who we are: makes us stronger

WE ARE a Collection of Attributes.

WE ARE Diligent, Tenacious, Curious, Compassionate, Driven, and Professional.

WE ARE the Nurse Colleagues of McLaren Northern Michigan.

After 33 years working as a nurse in an Ann Arbor hospital, Janis Bishop, RN, MSN, CNL, decided to move north following her daughter's high school graduation. Bishop knew the area well: she vacationed here, her parents retired here, and she always remembered northern Michigan as her "happy place." But it was her professional criteria objectives that drew her to McLaren Northern Michigan. "I wanted to work at a Magnet® hospital," she says. Bishop has been at McLaren Northern Michigan since January, 2013, and is very impressed by the quality of care. "The nursing staff is among the best in the state, and they are embracing practices and protocols that are very sophisticated and not even seen in large metropolitan hospitals," she says.

"The nurses live and breathe shared governance every day; their Magnet® designation is a very big deal, and they should be very proud."

A Look Inside

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To the Nurse Colleagues of McLaren Northern Michigan

oday, nurses are empowered in ways that one could only imagine in the past. Your skills are recognized, your influence is accepted, and your opinions are regularly sought. The nursing profession has rightly earned the respect of the entire health care industry. Now, with the passage of the Affordable Care Act, nurses and the roles they play have moved beyond the nursing station into the heart of daily health care at every level. But, the evolving profession brings with it changes both positive and challenging. We must be diligent in our expanded roles.

The Institute of Medicine (IOM) Future of Nursing Report recommends that every organization work towards an 80% Bachelor of Science in Nursing (BSN) or more advanced workforce by 2020. This recommendation is designed to empower nurses, expand their roles as decision makers, and promote a climate of life-long learning and professional collegiality. Our individual progress as we pursue our degrees will guide and inspire us collectively. Frankly, the nurses of McLaren Northern Michigan have long shown an admirable willingness to further their professional education and gain new skills. I'm not at all surprised that, once again, this recommendation reflects nursing changes that you have already embraced.

Our Magnet® designation is another example of the proactive quest for excellence that defines the entire staff. Magnet® continues to be the motivation, the influence, and the reminder of what we value as professionals.

I am so proud of this organization and the colleagues who strengthen it. You are involved, committed, intellectually driven, and above all, endlessly compassionate. Every day, I see excellence at work. Thank you for all that you do.

Kindest regards,

Jennifer Woods, RN, MSN, CENP

VICE PRESIDENT OF NURSING, CHIEF NURSING OFFICER

McLAREN NORTHERN MICHIGAN



n my short time here at McLaren Northern Michigan, I have been consistently impressed by the skills of the nursing colleagues. Your dedication and professional excellence will serve you well in your expanded role as leaders and partners in the changing environment of health care. Nurses are a strong foundation of any health care system, and the staff at McLaren Northern Michigan are particularly involved and motivated. As you make your rounds, as you administer to your patients, as you lead by example, I see the best in compassionate care.

Congratulations on a great year for your profession, and thank you for your dedication to our patients and to our entire system.

David Zechman, FACHE PRESIDENT AND CEO McLAREN NORTHERN MICHIGAN



recent Gallup poll measuring the honesty and ethics of people in different fields in the United States reveals that nurses made the top of the list, at 82%. This national validation should come as no surprise; the nurses of McLaren Northern Michigan are fine examples of integrity in the workplace. Your high standards and professional code underscore what we here at McLaren Northern Michigan already knew — you are an amazing group of skilled professionals, and our patients are the beneficiaries.

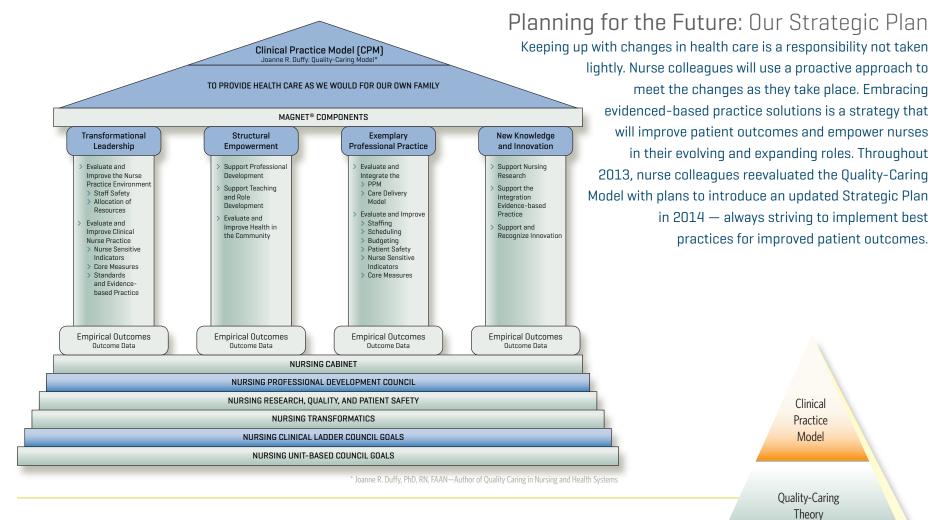
Please know that you are valued, respected, and most importantly, needed — truly needed — in the hierarchy of health care. In many ways, you are the conscience of health care, and we thank you.

Robert Foster

CHAIR

McLAREN NORTHERN MICHIGAN BOARD OF TRUSTEES





More than a Designation

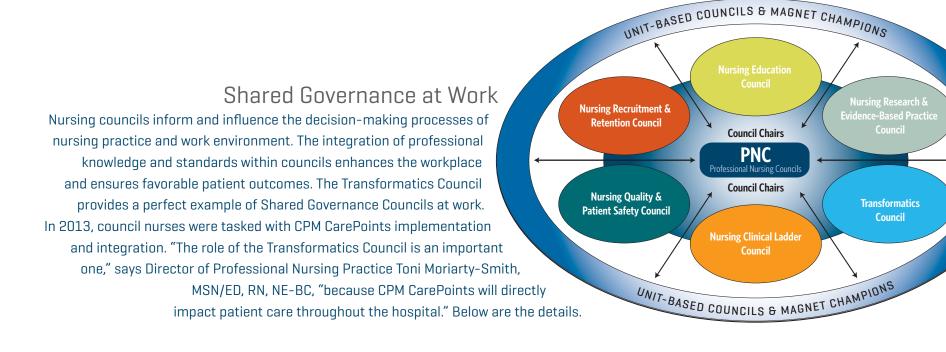
Our Magnet® designation was not the end of a quest, but rather, the touchstone for all that we do, day in, and day out. We live Magnet®.

We are Magnet[®]. And Magnet[®] guides our decisions.



Principles of American Nursing Association





CPM CarePoints: Integrating an Interdisciplinary Plan of Care

urse colleagues and other clinicians throughout the hospital will have enhanced technology that supports patient care. CPM CarePoints is an interdisciplinary care planning and clinical documentation system installed into the Electronic Medical Record (EMR). CarePoints provides evidence-based guidelines on a wide range of medical, surgical, and human response diagnoses, and it incorporates the tools to customize documentation.

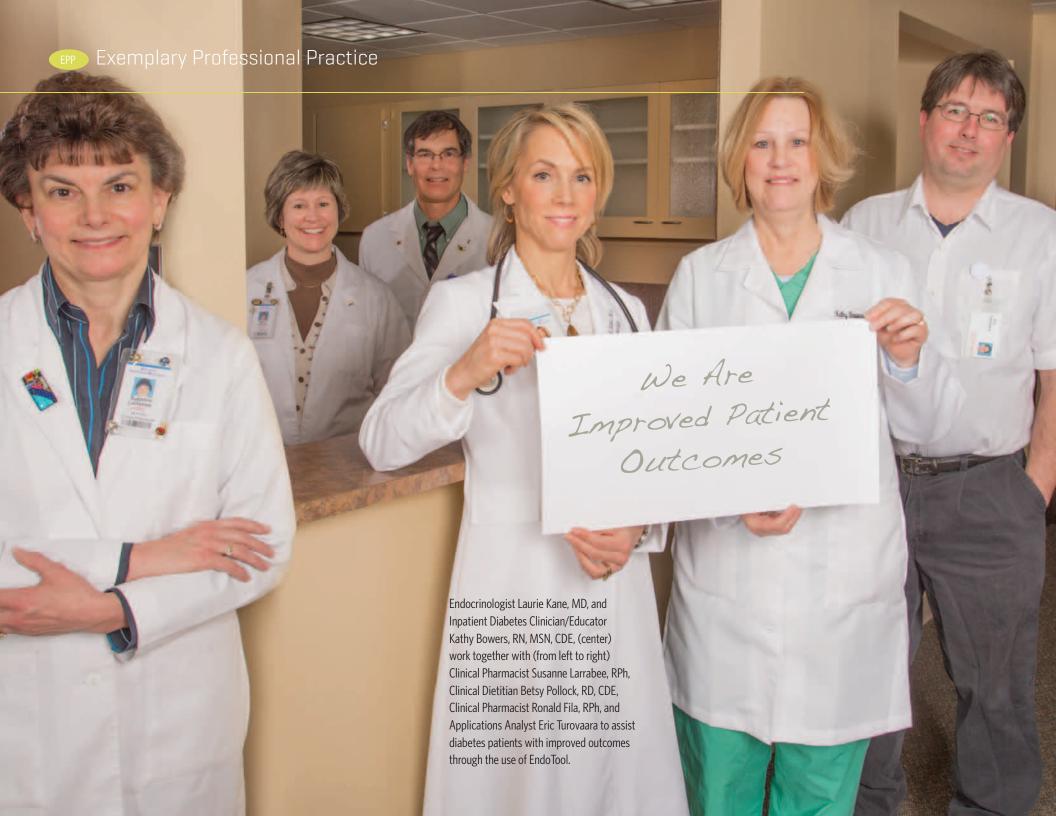
"CarePoints is an amazing multi-use tool," explains Director of Professional Nursing Practice Toni Moriarty-Smith, MSN/ED, RN, NE-BC. "It provides evidence-based care guidelines that automatically customize the documentation system for the clinicians and their particular areas of expertise." Through the use of this integrated and interdisciplinary technology, nurses will be able to synthesize information to gain knowledge, and the plan of care developed will be populated with evidence-based interventions. "Any tool that promotes collaborative understanding of the patient's story is going to markedly improve safety, efficiency, and outcomes," adds Moriarty-Smith.

CarePoints is designed to target five patient populations. Acute care clinical documentation tools, care plans, and evidence-based guidelines are specific to adults, obstetrics, pediatrics, intensive care, and newborns, in inpatient, acute rehabilitation, and emergency services.

CPM CarePoints FEATURES AND TOOLS

- Improves clinical outcomes
- Promotes critical thinking and skilled documentation
- Provides specific interventions for potential complications
- Speeds and standardizes documentation through reduced variability

- Promotes collaboration
- Complies with Magnet® and Joint Commission care models
- Meets requirements for meaningful use



ENDOTOOL:

Advanced Glucose Management for Diabetes Patients

atients with diabetes and their caregivers now benefit from a significant advance in insulin dosing. EndoTool Glucose Management System manages insulin dosage based on the specific needs of the individual patient. Significantly, EndoTool models, predicts, and adapts the insulin dosage to the patient's physiology and insulin response. "EndoTool increases patient safety and comfort to a high degree," says Kathy Bowers, RN, MSN, CDE, Inpatient Diabetes Clinician/Educator. "Glucose management has never been this accurate. It is fast and stable, even for patients with serious conditions and complex cases."

Unlike other software management systems, EndoTool's accuracy allows patients to focus on other areas of their personal health, avoiding the complications that often affect those with diabetes. Alert notifications increase patient safety and let bedside nurse colleagues know when adjustments and extra care are needed. Clinical advisory notifications support best practices and safety, allowing patients to predict and adapt to their own needs while requiring fewer blood glucose readings. "EndoTool is a remarkable advancement for both patients and their nurses," says Bowers.

WITH FNDOTOOL

- **99.4%** OF PATIENTS EXPERIENCE GLUCOSE CONTROL.
- GLUCOSE LEVELS REMAIN WITHIN THE TARGET RANGE OVER **97%** OF THE TIME.

Clinical trials have shown that 99.4% of patients experience glucose control with EndoTool, and glucose levels remain within the target range over 97% of the time. Endo Tool's accuracy and efficacy reduces hospital readmissions, hospital infections, and other health conditions that are the result of poor glucose control. "EndoTool has passed very stringent clinical testing, and its accuracy and reliability are unsurpassed," says Endocrinologist Laurie Kane, MD. "This is the management system of choice for the majority of health care facilities in the nation."



RECOGNIZING GUARDIAN ANGELS

he Guardian Angel program allows grateful patients the opportunity to pay tribute to a caregiver or health system colleague who has touched them in a profound and meaningful way. By making a donation in the name of a caregiver, patients honor the compassionate work of our dedicated providers and help to fund future programs. Many colleagues have been recognized for their superior patient care. Award recipients receive a surprise visit from McLaren Northern Michigan Foundation, and a Guardian Angel Award is presented.

Above, Lisa Fitzpatrick, RN, is presented with a Guardian Angel Award. She was recognized by her patient, Carole Moore: "Lisa Fitzpatrick has been and still is an exceptional nurse. She treated me in the Everett Kircher Dialysis Area and has trained my husband and I to do home dialysis. In my lifetime, I've never had a more caring nurse."

- Rita Balistreri, FNP

- Jamie Booms, RN
- Doretta Brodin, RN
- Christine Bushman, RN
- Kathrvn Chanda, RN
- Jane Crain, RN
- Danette Cutler, LPN
- Melissa DeSimone, RN, BSN

- Lisa Gregory, LPN

- Katy Baynham, RN
- Dawn Behling, RN

- Monica Doctor, RN
- Claire Dupin, RN
- Lisa Fitzpatrick, RN
- Michelle Garms, RN
- Ashley Grover, RN

- Kristie Haalck, RN
- Benjamin Hamel, RN
- Natalie Hesselink, RN
- Laura Hill, RN
- Robin Hoffman, RN
- Deborah Holmgren, RN
- Mary Kafer, RN
- Chelsea Kaye, RN
- Christian Kessler, RN
- Kim Krieger, RN, BSN
- Debra LaLond, LPN
- Susan Ludgin, RN
- Michelle Lydick, RN
- Nathan Martin, RN
- Stephanie Mills, PSA
- David Moody, RN

- Katelyn Murray, RN
- AJ Nolan, FNP
- Jean Rittley, RN
- Mark Rothman, CRNA
- Lauren Salopek, RN
- Rebecca Sewell, RN
- Marie Spiewak, RN
- Lisa Stabile, NP
- Michele Sturt, DNP, RN, FNP-BC, CDE
- Ruth Ann Turner, RN
- Renae Vaughn, NP
- Cindy Wilson, RN
- Stacy Wilson, RN



COLLEAGUE SCHOLARSHIPS:

Assisting with New ACA Requirements

he nursing profession — three million members strong — is the largest segment of the nation's health care workforce. But, according to the Institute of Medicine (IOM) Future of Nursing Report, nurses currently face "barriers" that prevent them from responding effectively to rapid changes in health care. The IOM lists four objectives for nurses: to practice to the full extent of their education and training; to achieve advanced levels of education and training through a seamless academic process; to be full partners, with physicians and other health care providers, in redesigning health care in the United States; and to realize improved data collection and information infrastructure for planning and policy making. To address these concerns and to meet the objectives presented in the Affordable Care Act of 2010, new nurse hires moving forward will be required to have advanced degrees within five years of their hire date. The goal, referred to as 80:20, is for 80% of nurses to have attained their baccalaureate degrees by 2020. Currently, two Cheboygan Campus nurse colleagues have received scholarships that allow them to pursue advanced degrees in science and nursing. See the following page for a full list of McLaren Northern Michigan Foundation scholarships awarded for 2013.

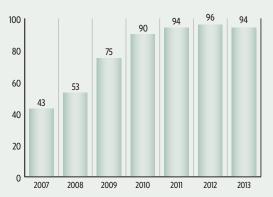
"I've been looking at the BSN program for a while," says Maggie Jakeway, RN (left). Jakeway's degree will prepare her for a future role in nursing administration. "I've always wanted to work in nursing leadership." Jakeway has worked on the Petoskey Campus as a surgical nurse since 2008; she moved to the Cheboygan Campus in September, 2013. "I hope to make a difference for the patients in Cheboygan," she says. "So many people just can't make the trip to Petoskey for many reasons, and the Cheboygan Campus allows residents to receive quality care in a community setting." Jakeway is pursuing her degree through Lake Superior State University with an expected graduation date of Summer 2015.

Michelle Fenlon, RN (right), has worked on the Cheboygan Campus for 26 years and is working towards her master's degree as a Nurse Practitioner through Walden University. "As a nurse practitioner, I will be able to provide quality and compassionate care to each individual patient." She says her scholarship will allow her to reach her goals and expected graduation date in 2016. Fenlon currently works in pre-op and recovery and is pleased with changes at the Cheboygan Campus. "McLaren Northern Michigan has been a great asset for Cheboygan and our community. They made the transition easy for the health care employees during a very stressful time," she says.

NEW OR RENEWED CERTIFICATIONS FOR 2013

Since 2007, McLaren Northern Michigan nurse colleagues have more than doubled the number of certifications held through their dedication, professionalism, and desire for improved patient outcomes.

Nursing Certifications



- Michele Adaline, RN, BSN, MBA, CCRN, NE-BC NURSE EXECUTIVE CERTIFICATION
 - Tara Miller, RN, BSN, CCRN ADULT CRITICAL-CARE NURSING
 - Toni Moriarty-Smith, MSN/ED, RN, NE-BC NURSE EXECUTIVE CERTIFICATION
 - Kasey Peltier, RN, BSN, CCRN ADULT CRITICAL-CARE NURSING
 - Shannon Penfold, RN, CCRN ADULT, NEONATAL, AND PEDIATRIC ACUTE
 - Katherine Sharp, RN, BSN, CEN CERTIFIED EMERGENCY NURSE
 - Wendy Szymoniak, RN, CCRN ADULT CRITICAL-CARE NURSING
 - Tracey Wallace, RN, CSRN CERTIFIED SEDATION REGISTERED NURSE

CLINICAL LADDER ADVANCEMENTS Level IV Advancements for 2013

- Alicia Beebe, RN, BSN 💰
- Kelly Johnson, RN, BSN
 - Rebecca Sewell, RN
 - Rita Miller, RN, MSN :
 - Cindy Strong, RN
- Deb McConnel, RN, BSN, MS
- Deb Meconnel, MA, DSM, MS
- Ruth Terbush-Nelle, RN, BSN
 - Mina Neitzke, RN, BSN 💰

Level V Advancements for 2013

Patricia Dallaire, RN, BSN, CIC 💰

HEARTCODE BLS LEARNING OPTION: Increased Skills and Cost Savings



Nurses Savannah Hrenko, RN, and Patrick Hrenko, RN, came in on their day off to complete HeartCode BLS with their son. Beckett.

ince March 2013, nurse colleagues have been given the opportunity to obtain their health care provider BLS training through the HeartCode BLS program. The self-directed electronic program from American Heart Association (AHA) uses simulation technology with realistic patient scenarios to train students to properly respond to cardiac events with increased competence. Studies have shown that the quality of CPR affects resuscitation

outcomes for patients in emergency situations. "This program standardizes training and assessment so that every colleague will use a consistent protocol to save lives," says Rene' Bieganowski, BSN, BBA, RN-BC, Clinical Education Specialist. "HeartCode is a highly effective tool for our colleagues, and we will continue to work closely with Allied EMS to facilitate this service as part of the continuum of care."

Of student survey responses received March - October 2013 for HeartCode BLS Part I, 83 nurse colleagues noted the following:

- 100% FELT THE COURSE CONTENT WAS CLEAR.
- 100% WILL USE HEARTCODE BLS SKILLS.
- 97.22% WILL RESPOND TO AN EMERGENCY USING COURSE KNOWLEDGE.

In addition to educational benefits of the new teaching method, AHA estimates that the course will reduce costs by decreasing educator time from four to two hours per course. Coupled with educator time, actual nursing education hours are decreased, while maintaining the same educational credit benefit.

Nursing Education: Supported by Generous Donors

Through gifts to McLaren Northern Michigan Foundation, generous donors supported nursing scholarships for expanding skills in best practices, research, and professional development, as well as advanced degrees and certifications. In 2013, scholarship disbursements totaled \$120,092, with \$78,560 directed specifically to Petoskey and Cheboygan hospital nurse colleagues (listed below).

BAIARDI SCHOLARSHIP

- Jessica DeBord, RN
- Melissa DeSimone, RN, BSN
- Kim Fazio, RN

CATH LAB COLLEAGUE EDUCATION

Tracey Wallace, RN, CSRN COLLEAGUE CONTINUING **EDUCATION FUND**

- Denise Antonishen, RN, BSN, CCRC 💸
- Alicia Beebe, RN, BSN
- Shelly Bellmer, RN, BSN
- Janis Bishop, RN, MSN
- Barb Brown, RN
- Eileen Butler, RN, BSN
- Michele Casey, RN, BSN
- Erin Cowan, RN
- Kristi Dipzinski, RN, BSN
- Monica Doctor, RN
- Karen Doherty, RN, BC
- Mary Jo Dubas, RN, BSN
- Lance Edgerton, RN
- Holly Ehrke, RN, BSN
- Scott Farr, RN
- Michelle Fenlon, RN
- Elizabeth Govette, RN, BSN
- Leetrice Ann Hopkins, RN
- Louise Kabat, RN
- Melissa Karr, RN, BSN
- Janis Kendall, RN
- Susan Kinney, RN
- Kim Krieger, RN, BSN
- Amanda LaBrie, RN
- Joan Lafrinere, RN
- Mary Jo LaHaie, RN, BSN
- Penny Lewin, RN
- Laurie Logan, RN
- Saundra May, RN, BSN

- Jeanne Melton, RN
- Heather Morell, RN
- Lucinda Peebles, RN
- Barbara Pluister, RN, BSN
- Marsha Price, RN, BSN
- Jeanette Rokop, RN, BSN
- Colleen Ross, RN
- Gwen Sangeorzan, RN
- Rebecca Sewell, RN
- Colleen Shaw, RN, BSN Barbara Stone, RN, MSN
- Karen Sussman, RN, MSN
- Diana Tahtinen, RN, BSN
- Kathleen Van't Hof. RN
- Cheryl Wasserman, RN
- Alice Whennen, RN, BSN

DEVET/MUNSTERMAN FUND

Mary-Anne Ponti, RN, MSN DIABETES EDUCATION

Jill Moore, RN, BSN

- **ENDOSCOPY EDUCATION FUND**
- Tami Hightower, RN, BSN HANCE ORTHOPEDIC

EDUCATION FUND

- Linda Bentz, RN
- Judie Bricker, RN, BSN
- Amy Burns, RN, BSN
- Christine Bushman, RN
- Annie Cordova, RN
- Jane Crain, RN
- Chelsea Kaye, RN
- Sue Keith, RN
- Emelda Lafaive, RN, BSN
- Darlene Lockery, RN
- Jaime Mooar, RN
- RJ Neeland, RN
- Jillian Potts, RN, BSN

- LeeAnn Rasmussen, RN
- Rvan Waldron, RN, BSN NURSING HEALTHCARE

SCHOLARSHIP FUND

- Michele Beigle, RN, BSN
- Shelly Bellmer, RN, BSN
- Rene' Bieganowski, BSN. BBA, RN-BC
- Kathy Bowers, RN, BSN
- Amy Burns, RN, BSN
- Maggie Jakeway, RN
- Brenda Osterhout, RN
- Mindy Sears, RN
- Shauna Shipman, RN, BSN

HEART SERVICES COLLEAGUE **EDUCATION FUND**

- Jana Goldsmith, RN, BSN
- Val Jons, RN, BSN
- Lisa Schroeder, RN
- JOAN JENSEN HAUPRICHT MEMORIAL FUND
- Dawn Sager, LPN
- LACEY SCHOLARSHIP FUND
- Therese Cobb. PBT (ASCP)
- Murphy Gillespie, RN
- Shannon Gillespie, RN
- Michelle Metzger, RN

MEENGS HEART FAILURE FUND

- Kady Elkins, RN
- Joey Haderer, RN, DNP

NURSING/HOSPITAL WEEK SCHOLARSHIP FUND

- Kristi Dipzinski, RN, BSN
- Rene' Bieganowski, BSN, BBA, RN-BC
- Lance Edgerton, RN
- Kimberly Fazio, RN

- Murphy Gillespie, RN
- Josephine Krause, RN
- Michelle Metzger, RN
- Shari Schult, RN, BSN
- Mindy Sears, RN
- Sarah Shepherd, RN

REBERG NURSING SCHOLARSHIP **ENDOWMENT FUND**

- Patricia Soper, PCT
- S.T. KUTCIPAL SCHOLARSHIP FUND
- Michelle Cyr, RN, BSN
- Diane Hamlin, RN

TOM AND ANN STALLKAMP **COLLEAGUE EDUCATION FUND**

- Jane Armstrong, RN
- Robin Burke, RN
- Spencer Cross, RN
- Rhonda Fink, RN, BSN
- Tiffany Hornbeck, RN
- Josephine Krause, RN
- Linda Linari, RN, BSN Katie Morell, RN
- Michelle Rushing, RN, CCRN
- Sarah Shepherd, RN

Working — and Learning — Together: Improving Patient Outcomes

Nurse colleagues initiate, plan, and facilitate multiple opportunities for growth. From education programs with Continuing Education (CE) credits to scholarship fundraisers and seminars, patients and the entire system benefit.

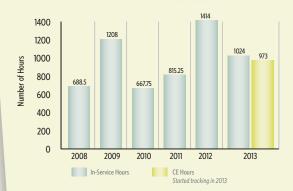
- ⇒ PEER REVIEW: FOR THE GOOD OF ALL The implementation of the peer review system, which was in the planning stages during 2013, will begin in 2014 according to Director of Professional Nursing Practice Toni Moriarty-Smith, MSN/ED, RN, NE-BC. "Peer review is a very useful system for maintaining our standards and procedures," says Moriarty-Smith. "The peer review process is a tool that will benefit all colleagues." All peer review information remains confidential. "Our Magnet® journey is an ongoing endeavor," adds Moriarty-Smith. "The pursuit of excellence in patient care never stops and must remain consistent. I think peer review will enable us to do that."
- ELECTRONIC JOURNAL CLUB: EXPANDING PROFESSIONAL DEVELOPMENT Monthly journal clubs provide educational opportunities and 1.0 CE credits through the Intranet format developed to encourage attendance and colleague interaction. Topics covered in 2013 were based upon best practices and current research findings including: delirium, bedside reporting, pain management, and Quality-Caring Theory.
- ➤ PATIENT CARE SUMMIT The 6th annual Patient Care Summit, themed Advancing the Art and Science of Patient Care, provided nurse colleagues up to 7.5 contact hours during the full-day event. Supported by McLaren Northern Michigan Foundation, participants heard keynote addresses and participated in educational seminars focused on technology, soy intake and breast cancer, bedside reporting, Hospital Consumer Assessment and Health Plans Survey (HCAHPS), and noise reduction, among others.
- > COLLEAGUE PROFESSIONAL SCHOLARSHIP BASKET RAFFLE Established to promote professional growth and development, the gift basket raffle dedicates monies raised to the nursing scholarships.
- HEALTHSTREAM HealthStream is an online educational tool dedicated to improving patient outcomes through training and learning management, performance assessment, credentialing, and managing simulation-based training programs.
 HealthStream provides valuable insight in meeting HCAHPS requirements, engaging nurses, and enhancing physician alignment.
- > EVIDENCE-BASED PRACTICE [EBP] FAIR The annual event provides a positive environment for nurse colleagues to display EBP findings through poster displays. The goal is two-fold: allow nurses to showcase their work and provide educational opportunities for others to incorporate useful findings into their own daily practices. For the 2013 fair, 30 posters were presented with over 70 people in attendance.
- NURSES NIGHT OUT A monthly gathering at Palette Bistro in Petoskey offers an off-campus environment for learning and socializing. "The social atmosphere has encouraged nurses to participate away from the standard educational settings and still receive CE credits," says Nursing Research Coordinator Linda Schofield, RN, PhD. "Our inaugural year of Nurses Night Out proved to be a success."



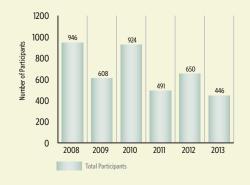
Preparing for the Unexpected

In addition to SimMan and SimBaby training, Clinical Education Specialists Rene' Bieganowski, BSN, BBA, RN-BC, and Jeanette Rokop, RN, BSN, CCRN, planned curriculum for simulations utilizing SimMan for chemical, biological, radiological and nuclear defense (CBRN).





RN SimMan Participants





Nurse Colleague Findings: Improving Outcomes and Decreasing Costs with Mucus Shaver Clearing Device

n a study conducted by nurse colleagues, the use of a mucus shaver to clear endotracheal tubes worked to reduce ventilator-associated events in ICU patients. The study compared the efficacy of the mucus shaver device with routine suctioning of the endotracheal tube. The study included 1,761 ICU patients who were ventilated for more than 24 hours. Of the group, 583 were given routine suctioning alone, and 1,178 were treated with the mucus shaver in addition to routine suctioning.

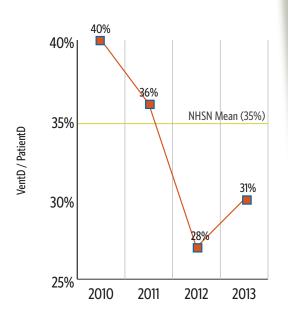
Data showed that patients given the routine suctioning were on mechanical ventilation for an average of 4.3 days, with an ICU stay averaging 5.2 days, and a total hospital stay averaging 9.3 days. The mucus shaver combined with routine suctioning reduced mechanical ventilation to an average of 3.2 days, ICU admission to an average of 3.7 days, and a total hospital stay averaging 8.0 days.

The impetus of the study was based on the risk factor of ventilator associated pneumonia (VAP), caused by partially occlusive secretions and biofilms in the endotracheal tube. Removing the adherent mucus from the inside of the endotracheal tube decreases airway resistance, eradicates potential VAP causing bacteria, and expedites weaning.

The first half of 2013 showed no ventilator associated events, including VAP, based on use of the mucus shaver. Additionally, Nursing Research Coordinator Linda Schofield, RN, PhD, and her colleagues concluded that the mucus shaver is a safe and effective way to remove secretions from the endotracheal tube as compared to routine suctioning alone. "We'd really like to see this become part of the daily protocol across the country," Schofield says.

In addition to patient benefits, data is showing a **cost reduction to the hospital of \$1.96 million** due to decreased ventilator and ICU
patient days. "Patient safety and improved outcomes are at the forefront
of this study," explains Vice President of Nursing and Chief Nursing
Officer, Jennifer Woods, RN, MSN, CENP. "The significant cost savings
demonstrate how advancements can also save costs.

McLaren Northern Michigan ICU Ventilator Utilization Four-year Comparison





Nurse Input Drives Design of Omnicell Medication and Supply Automation System.

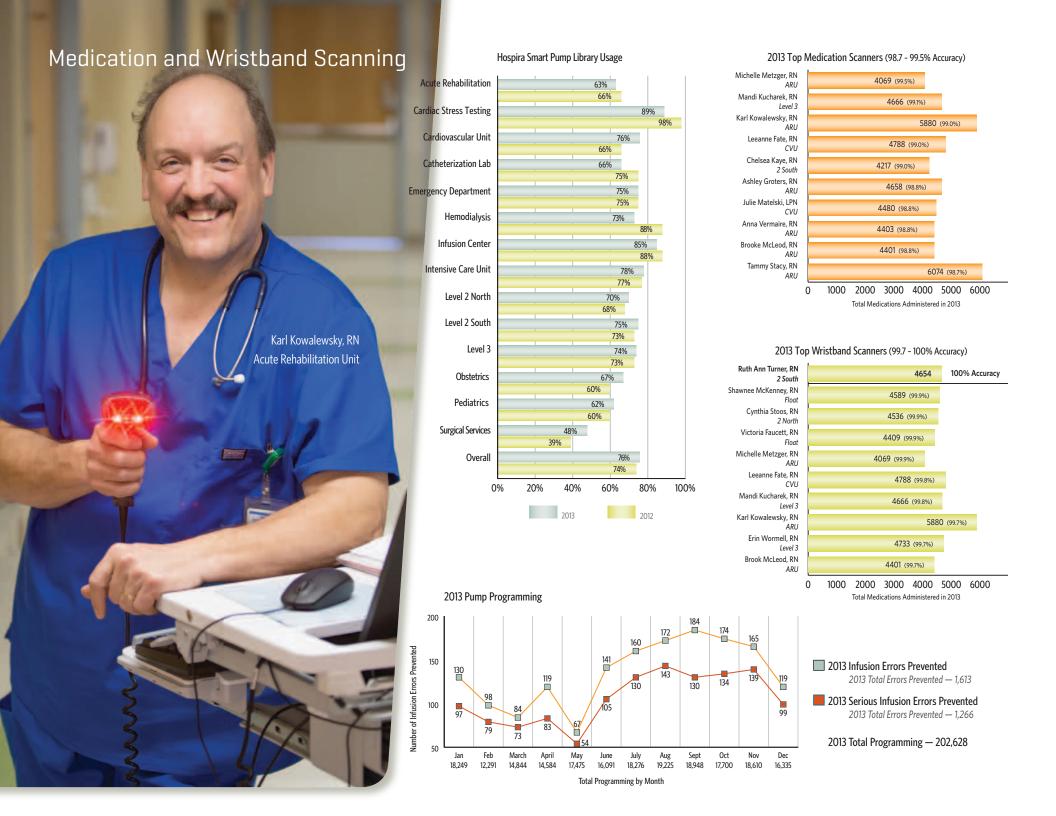
Beginning in 2013, nurse colleagues now have an innovative method to store, record, and administer medications: Omnicell® Medication and Supply Automation System is a medication dispensing system that enables health care facilities to acquire, manage, dispense, and deliver medications and supplies more safely and efficiently. The system, designed with the help of nurses, impacts patient safety, nurse satisfaction, and nurse efficiency. Omnicell operates with a simple fingerprint, allowing fast, secure, and easy access for nurses.

FOR THE PATIENT:

Enhances patient safety through improved medication accuracy and prevention of errors.

FOR THE CAREGIVER:

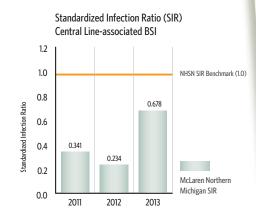
Improves nurse efficiency and time management, reduces medication errors, facilitates narcotic counts, streamlines inventory management, lowers medication supply inventory costs, increases revenue through charge capture and reimbursement, and supports compliance with evolving regulations.

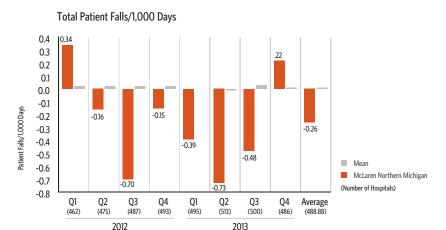


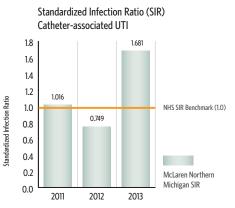
Taking Measure of Patient Care Indicators

ursing sensitive indicators reflect the structure, process and outcomes of nursing care. Patient outcomes, reflecting the quantity and quality of nursing care, are an important part of nursing sensitive indicators. Nurse colleagues at McLaren Northern Michigan collect and interpret data to guide their practice. "There are certain areas of patient care that only nurses can monitor effectively," says Infection Prevention Nurse Patricia Dallaire, RN, BSN, CIC. "These measures allow us to improve patient outcomes within the continuum of care."

Patients with Hospital Acquired Pressure Ulcers 0.4 Patients with Hospital Acquired Pressure Ulcers 0.2 0.1 -0.1 -0.2 -0.18 -0.18 -0.21 -0.22 Mean -0.4 McLaren Northern Michigar -0.39 (Number of Hospitals) -0.5 Q2 Q3 Q1 Q2 Q3 04 Q1 Q4 Average (467) (472) (482) (494) (481) (476) 2012 2013









Everything in Its Place:Making a Difference through Medication Recycling Program

Annually, an approved hazardous waste vendor accepts medications, and Petoskey police gather controlled substances in recognition of National Pharmacy Week. Since 2010, the drive-through drop-off has collected greater than 500 pounds of waste including medications and sharps, plus non medical items including eyeglasses, hearing aid batteries, cell phones, and shoes. In 2013 alone, over 50 community service hours for two drop-off days were spent by nurses, security personnel, pharmacists, and others to coordinate the event.



Continuum of Care:

The Focus on Desired Outcomes for All Patients

Tracking the patient from symptom outset to diagnosis, and from treatment to wellness, strengthens the delivery of quality care and enhances the overall patient experience. Attention to all stages of patient involvement within the health system yields significant data which informs future decisions and policies. The story of Betty Doherty (pictured left) is a perfect example.

Betty is 88 ½ and proud of it. Her life is active. Her attitude is positive. She makes a point of staying fit. Her motivation is very serious, indeed. Betty's wake-up call came in 2001 when she underwent triple bypass surgery at McLaren Northern Michigan, known as Northern Michigan Regional Hospital at that time. Years later, she was diagnosed with peripheral artery disease (PAD), and she hasn't looked back. Betty is dedicated to her cardiovascular rehabilitation; so dedicated, in fact, that she exceeded 1,000 visits before year's end. "She is the cheerleader for cardiovascular rehab and the official ambassador," says Karen Doherty, RN-BC, Clinical Supervisor Cardiovascular and Pulmonary Rehabilitation for McLaren Northern Michigan. In addition to medical care throughout the entire health system, "Betty has been in our cardiac rehabilitation program, our Medical Fitness program, and our Peripheral Artery Disease program," Karen Doherty adds. "She is a great example of working together to achieve the best outcomes."

COMMUNITY EVENTS: SPREADING THE WORD, INCREASING KNOWLEDGE

Educational events reflect the statistical measure of health and wellness for members of the communities. Community Health Assessment results allow planners to target the specific needs and deficits of the region's inhabitants. Nurse colleagues play an important role in outreach programs, including those noted below.

- Student Heart Screenings (featured right)
- Heart Month Community Education
- Project Connect
- Cancer Screenings
- Health Fairs

Leading Causes of Death/100,000 Residents

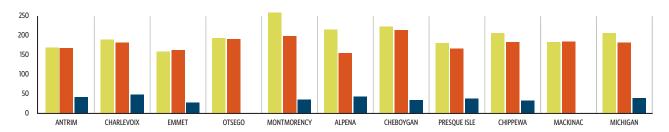
SOURCE: MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

Coronary Heart Disease Deaths

Cancer Deaths

Stroke Deaths

Data compiled through the Health Department of Northwest Michigan in cooperation with McLaren Northern Michigan and other health-related organizations with 10 counties assessed, more than 1,200 participants, and over 250 Health Indicators collected and analyzed.





Student Heart Screenings: Saving Lives at No Charge

Too often, heart abnormalities in teens and young adults go undetected. According to the Michigan Department of Community Health, from 1999 – 2009 approximately 137 high school-aged students in Michigan have lost their lives to what is classified as Sudden Cardiac Death of the Young (SCDY). In these cases, SCDY was most commonly caused by an exertion-related disease of the heart muscle called hypertrophic cardiomyopathy.

Most did not know they were even at risk.

McLaren Northern Michigan and Michigan Heart & Vascular Specialists routinely sponsor free student heart screenings for both athletes and nonathletes in grades 9 – 12 in Petoskey, Gaylord, and Charlevoix. Nurses, therapists, physicians, and other volunteers provide diagnostics and consultations, and when needed, arrange follow-up testing and appointments. In 2013, 118 students were evaluated; of those, 57 required additional testing and 14 required follow-up care.



A Commitment to Professional Excellence

he DAISY program was initiated in June 2009, at the suggestion of Pam Melisko, then Magnet® Coordinator, who saw a way to encourage positive nurse/patient relations. Now the McLaren Northern Michigan nursing department averages over 30 nominations per month. "DAISY has been an outstanding success and keeps the quality of care high," says Toni Moriarty-Smith, MSN/ED, RN, NE-BC, Director of Professional Nursing Practice. Congratulations to the 2013 award winners.

- Bridgett Antaya, RN
- Melanie Bork, RN
- Beth Compton, RN
- Mary Jo Dubas, RN, BSN
- Lance Edgerton, RN
- Ashley Grover, RN
- > Robin Hoffman, RN
- Maggie Jakeway, RN
- Heather Morell, RN (pictured above center)
- > David Sanderson, RN
- Janet Stutzman, RN
- Megan Vandernaald, RN
- Patty Vincent, RN
- Ryan Waldron, RN, BSN
- Heidi Wingerson, RN

Nursing Statistics

McLaren Northern Michigan nurse colleagues are represented by men and women with varied backgrounds and experiences, diverse professional achievements, and a wealth of specialized training and degrees.

TOTAL NUMBER OF RNs 482

- 2013 Direct Care 85%
- 2012 Direct Care 84%
- 2011 Direct Care 83%

GENDER: INCLUDING 482 RNs AND 8 LPNs

- Female 432 (88%)
- Male 58 (12%)

STATUS

- Full Time 371 (77%)
- Part Time 53 (11%)
- Per Diem/Temp 58 (12%)

NURSE COLLEAGUE AGE

- Average Age 45.8
- 30 and younger 69 (14%)
- 31-40 102 (21%)
- **41-50 117 (24%)**
- 51-60 155 (32%)
- ÷ 61+ 39 (8%)

DIRECT CARE RN VACANCY RATE

- 2013 3.99%
- **2012 3.20%**
- **2011 1.70%**

DIRECT CARE RN TURNOVER RATE

- **2013 7.65%**
- 2012 10.6% (National Rate: 13.5%)
- 2011 10% (National Rate: 14.6%)

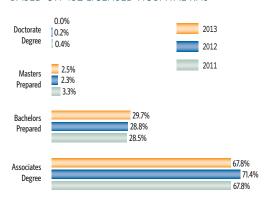
CONTRACT/TEMPORARY PURCHASED LABOR (IN HOURS)

- 2013 8,947
- **2012 5,650**
- 2011 0

NURSING SPECIALTY CERTIFICATIONS HELD



NURSING EDUCATION LEVELS BASED ON 452 LICENSED HOSPITAL RNs



NURSING EDUCATION HOURS

- Nursing CE Hours:
 - 73 CE Offerings
 - 159.4 Available Contact Hours
 - 696 Participants
 - 1,940 Contact Hours Awarded
- Mosby CE Hours 337.10
- Nursing Inservice Hours 11,158
- Total for 2013 11,495.10*
- Total for 2012 11,302.82*
- Total for 2011 10,420*

* Includes nursing
CE Hours, Mosby CE,
and Nursing Inservice Hours.

Awards and Accolades

The nurse colleagues of McLaren Northern Michigan work tirelessly to provide seamless patient care within the continuum. Congratulations to all who contributed to these honors.

Home Care Recognition

VitalCare, a home health and hospice affiliate of McLaren Northern Michigan, was recognized in 2013 as being in the top 25% for Patient Satisfaction by Fazzi Associates, which surveys patient experiences with home health care as part of the national Home Health Consumer Assessment of Healthcare Providers and Systems (HHCAHPS).

Cardiovascular Rehabilitation Program Certified by Industry Leader

McLaren Northern Michigan has earned a three-year certification by the American Association of Cardiovascular and Pulmonary Rehabilitation, signifying our organization as a leader in the field of cardiovascular and pulmonary rehabilitation, offering the most advanced practices available.

Get With The Guidelines® — Heart Failure and Stroke

The American Heart Association and American Stroke Association once again recognized McLaren Northern Michigan for achieving at least two years of 85% or higher adherence to all Get With The Guidelines® program quality indicators to improve quality of patient care and outcomes.

Most Wired Hospital

For the fourth time, McLaren Northern Michigan was named to the nation's Most Wired list of health care organizations by *Hospitals & Health Networks* magazine for excelling in the use of technology, including the PowerChart electronic medical record, the Bridge Bar Code system, and the features and functions on our website.

The 5-Diamond Patient Safety Program

McLaren Northern Michigan has been recognized for the second year in a row as a 5-Diamond Facility by the Renal Network of the Upper Midwest, Inc. for dialysis services. McLaren Northern Michigan has completed five of twelve modules of the 5-Diamond Patient Safety Program, which is designed to assist dialysis units in increasing patient safety through consistent improvements in specific areas.

Society of Thoracic Surgeons — Highest Rating for Heart Bypass Surgery

McLaren Northern Michigan earned the highest quality rating for heart bypass surgery as determined by the Society of Thoracic Surgeons (STS). Of the more than 700 hospitals across the country that were part of the study, McLaren Northern Michigan performed significantly higher than the mean score, placing it among the top 15% of hospitals nationwide. STS, in coordination with Duke Clinical Research Institute, analyzes data on heart programs throughout the country. Their comprehensive rating system allows for comparisons regarding quality, complications, pre-and post-operative medication administration, and outcomes. McLaren Northern Michigan received the highest recognition, the 3 Star Rating, covering the period from January 2012 through December 2012.

Quality Oncology Practice Initiative (QOPI)

The QOPI Certification Program provides a three-year certification for outpatient hematology-oncology practices that meet standards for quality cancer care. McLaren Cancer Institute – Northern Michigan, has been recertified for another three years. QOPI certification reflects a commitment to quality care, meeting core standards in areas of treatment including patient assessment, treatment planning, and staff education.



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