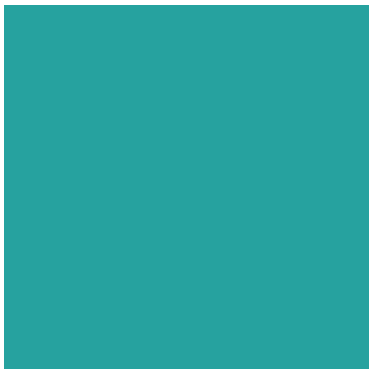




VISIONS

2018 REPORT



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"Kaiser Permanente Northern California is widely recognized for its national leadership in disease prevention, early intervention and world-class medical treatment, and our dedicated and compassionate nurses play a vital role in helping us to achieve this success. Each and every day, our nurses work closely with our excellent physicians and staff to provide a superior level of personalized, coordinated, and technologically advanced care that helps our 4.3 million members live healthier, happier, and longer lives. Thank you to our nurses for the tremendous contributions you make every day to improve the health of our members and the communities we serve."

Richard S. Isaacs, MD, FACS
CEO and Executive Director of The Permanente Medical Group



Together

It is our pleasure to welcome you to the 2018 VISIONS Northern California Nursing Report. Each year, our editorial team works relentlessly to find the right stories, develop the narrative, and send photographers around our 18,000 sq. mi. geography. It takes more than 6 teams working together to create this report. So, why do we do it? We believe it provides a small but essential glimpse into the incredible contribution nursing makes every day to Kaiser Permanente and the broader community.

Every Northern California nurse plays an invaluable role in the delivery of high-quality, affordable care to our members and patients, whether they are in a hospital, medical office, call center, or continuum setting. Together, our nurses provide compassionate, skilled, extraordinary nursing care in nearly every setting across our integrated health system. We believe that joy and meaning in work is essential for each of us to give our best, and we have an ongoing commitment to make Kaiser Permanente, Permanente Medicine, the best place to practice nursing.

Inside this year's report you will read about our 12 extraordinary nurses from 2018 Nurses Week. We review the Nurse Scholars Academy successes including incredible growth as they approach 600 scholars. There is an article on how 2 medical centers collaborated to share best practices and improve their pediatric immunization rates. Our continuum partners explain how they improved patient follow-up and communication through a process improvement project. We continue to follow our progress with both Enhanced Recovery and Advance Alert Monitor, 2 projects that are transforming care delivery and saving lives. Finally, we take time to celebrate the transformational leadership of our nursing leaders.

Thank you to our more than 24,000 dedicated and skilled Kaiser Permanente nurses. Together, we continue to deliver on our promise of extraordinary patient care, every patient, every time.

Camille A. Applin-Jones, MBA, RN
*Regional Nurse Executive and Managing Director
Medical Group Support Services
The Permanente Medical Group*

Michelle J. Gaskill-Hames, MHSA, RN
*Interim Regional Chief Nurse Executive and Vice President Clinical Integration
Senior Vice President and Area Manager Greater Southern Alameda Area
Kaiser Foundation Health Plan and Hospitals Northern California Region*

Marty J. Ardron
*Vice President Continuum of Care
Kaiser Foundation Health Plan and Hospitals Northern California Region*

National Extraordinary Nurse and Northern California Regional Nurse Honorees

Content from insideKP Northern California

In celebration of Nurses Week, May 6-12, we introduce 12 Kaiser Permanente Northern California nurses who are representative of the breadth and depth of nursing excellence within the organization.

The National Extraordinary Nurse Award has been given by Kaiser Permanente National Patient Care Services for more than 6 years. This award recognizes 2 to 3 nurses from each region who have achieved outstanding contributions as nurses in the organization.

This year, we introduced a new award process that recognizes more than 24,000 extraordinary nurses at the regional level. Selected from more than 100 submissions in 2018, these 9 nurses represent the incredible care delivered across the continuum of Kaiser Permanente Northern California Nursing. We are proud to share with you the stories of the 9 regional and 3 national honorees.

NATIONAL EXTRAORDINARY NURSE AWARDEES

Bea Anne Lynch, RN

Staff RN IV,
San Jose Behavioral Health

As a pediatric psychiatry nurse, Bea Anne Lynch serves a population that is often overlooked and misunderstood: children with anxiety, depression, autism, and developmental disorders. Colleagues say she has a special ability to connect with these kids and make them feel safe. Bea Anne has been a nurse for more than 40 years, in a career that has included case manager, infection-control specialist, employee health coordinator, and advice nurse.

Exemplary Professional Practice

“Nursing is the hardest job you will ever love. Every single day, I have the opportunity to make a difference in people’s lives for the better, whether it be for patients or their families. It is such an honor and a humbling experience, and I am so grateful and blessed this is my life’s work.”

Bea Anne Lynch, BSN, RN
Staff Nurse IV, Child Psychiatry, San Jose Medical Center



Catherine Parsons-Goudberg, RN

*NICU Clinical Nurse Specialist,
Roseville Medical Center*

Catherine Parsons-Goudberg has cared for some of our tiniest patients during her 42 years as a neonatal intensive care nurse. No matter how small, every patient benefits from her vast nursing knowledge. She even stays in touch with families from the NICU, and is delighted when her patients thrive. Catherine is equally talented as an educator. She has said that one of her favorite roles is training and mentoring staff.



Linda Ackerman, RN

*Patient Care Services Program Director,
Regional Offices*

As director of the Caring Science program for Kaiser Permanente Northern California, Linda Ackerman encourages nurses to incorporate that philosophy in their practice by honoring the unique needs of each patient and supporting decisions that nurture their well-being. A nurse for 37 years, Linda works with nurses at 21 medical centers to help them incorporate the Caring Science philosophy into their practice by being authentic, kind, and present.

Edward Salarda, RN

Staff RN IV, Fresno Medical Center

The word “leader” is applied to Edward Salarda, RN, and when it comes to his patients, he is a strong advocate who ensures that anyone under his care understands their treatments and feels comfortable. Additionally, Edward has strong technical knowledge and is a mentor to his colleagues. Kind, hard-working, and helpful, he can work through any obstacle in a positive fashion. The hallmark of his workday is that he always puts the patient at the center.



Loretta Stroh, RN

Staff RN III, Sacramento Call Center

An experienced advice nurse, Loretta Stroh, RN, is passionate about teaching and sharing her best practices in ergonomics, as well as her clinical knowledge with her peers during team meetings and huddles. Loretta is a caring and compassionate nurse who is a role model in her professionalism, positive approach, adaptability, and work ethic. Additionally, Loretta shares her knowledge by writing articles for other clinicians at the call center, on topics ranging from telephone triage to patient advice tips on the topics of coughs and colds.



Robin Alfred, RN

Staff RN II, San Francisco Medical Center

Ranging from her “big smile” to her ability to provide care to our most critically ill patients, Robin Alfred, RN, inspires others with her integrity, calm, and focus. Robin has been described as providing the most sensitive and respectful nursing, for which she receives compliments from her patients. In addition, she is just as dedicated to her colleagues. She often stays to help out during emergencies, when other clinicians rely on her calm and focused energy.





Roshni Gladson, RN
Staff RN II, San Leandro Medical Center

“Honest, respectful, and reliable” are words used to describe Roshni Gladson, RN, who is consistently recognized by her peers, patients, and their family members for her caring bedside manner. Roshni has been acknowledged as a shift leader who can get others through difficult times and who utilizes her clinical skills to educate her peers. Roshni has been described as bringing positivity during stressful situations. A humble team player, she goes out of her way to help.



Tim Schlatter, RN
Home Health RN II, The Landing, Union City

Tim Schlatter, RN, regularly receives praise and thanks from his patients, particularly for his attention to infection control, his calming manner in explaining diseases or symptom management, and his ability to collaborate with other clinicians. Whether demonstrating best practices for IV and wound care, or coordinating care for a patient, those who work with Tim have described him as organized, dedicated, a patient teacher to other nurses, having a vast knowledge of diseases, and “a true patient advocate.”



Lilibeth Jimenez, RN
Staff RN IV, San Jose Medical Center

When asked to describe Lilibeth Jimenez, RN, her long-time supervisor wrote, “A finer ICU nurse and role model you will not find!” Just one example: A fellow nurse suffered a cerebral hemorrhage. Lilibeth rushed to the hospital to help the nurse, who is a close friend. Her supervisor said, “I will never forget what courage and professionalism it took for Lilibeth to care for this special patient that evening; she did it with such love and expertise.”

Tina Vitale-McDowell, RN
Staff RN IV, Oakland Medical Center

Tina Vitale-McDowell, RN, has been described as a force of nature who is driven and focused on improving the care of pediatric patients, especially those in Pediatric Hematology/Oncology. Tina has forged a strong relationship between the Emergency Department and the Pediatric ICU to improve care in the ED. She also attends Kaiser Permanente Oakland’s parent advisory meetings to better understand patient and parent needs. Tina represents the gold standard of nursing by inspiring others with her dedication and thoughtfulness.



Ruth Somera, RN
Staff RN III, Modesto Medical Center

Described as one of Manteca’s most ardent advocates for exceptional patient care, Ruth Somera, RN, also mentors student nurses and co-workers. Whether comforting and educating a newly diagnosed diabetes patient or studying for her Staff Nurse IV certification in clinical nursing, Ruth is making a difference in patients’ lives. After volunteering to provide health care in Puerto Rico in the wake of Hurricane Maria, Ruth even met with Congress to discuss the devastation.



Imelda Valenzuela, RN
Staff RN III, San Leandro Medical Center

Families say they feel valued and safe under the care of Imelda Valenzuela, RN, an experienced bilingual nurse. Imelda has also been described as embodying professionalism, representing a balance between clinical practice and leadership. She is a naturally gifted leader who takes opportunities to teach and advance the knowledge of her co-workers, patients, and their families. Imelda has been praised for getting to the root of each patient’s problems and involving a multidisciplinary team to intervene.



Nurse Practitioners: Champions of Preventive Care

By Margaret Good, NP, nurse practitioner, Modesto Obstetrics and Gynecology

At Kaiser Permanente, nurse practitioners play an increasingly vital role in the delivery of health care services and preventive care. Every day, we are presented with opportunities to think clinically, and make decisions that improve and even save patient's lives.

Our Commitment to Wellness

At Kaiser Permanente, we are relentless in our focus on prevention. We consider every interaction we have with a patient; whether in person, on the phone, or via secure message; as an opportunity to practice preventive medicine.

Nurse practitioners play a vital role in this effort, focusing on health promotion, disease prevention, education, and counseling to help patients improve and maintain their health, in addition to diagnosing and treating acute and chronic conditions.

Throughout their day, nurse practitioners work closely with physicians, nurses, and other providers in a wide range of specialties.

I have been a nurse practitioner since 2002, and have worked with Kaiser Permanente for a little over two years. Late one Thursday afternoon, I prepared for what I expected would be an ordinary women's health exam. Reviewing records, I noted the patient had no pressing gynecological concerns and was merely visiting for a routine pap screen.

Uncovering a Lurking Threat

During the visit, I talked with my patient about her mother's breast cancer. As I probed deeper, it became clear that she had a "red flag" cancer history, with more members of her family getting breast cancer at an early age than is typical, including a grandfather with the disease. I administered a clinical breast exam and discovered a dense and nodular thyroid gland.

I advised my patient to speak with one of Kaiser Permanente's licensed genetic counselors. Genetic testing would explore the possibility of an inherited predisposition to breast cancer. I also ordered a thyroid ultrasound and lab testing to evaluate her thyroid enlargement and possible mass. With Kaiser Permanente's integrated model, my patient was able to complete her imaging, blood tests, and specialty care appointments all in one location.

Sure enough, the patient's genetics testing revealed an inherited predisposition to certain cancers, and a surveillance recommendation was implemented. Lab testing and thyroid ultrasound confirmed her mass was thyroid cancer, and it was promptly removed.



Margaret Good, FNP-BC, nurse practitioner, with help from Jaqueline Lastra, MA, medical assistant, visit with a patient as part of their daily care delivery at the Modesto Ob-Gyn Clinic.

Wellness Champions

Today, my patient is sharing her story in the hopes that more women will take advantage of the benefits of wellness care. Neglecting her wellness checks may have left her in a much graver predicament. This patient encourages all women to stay vigilant, reminding them that even something as mundane as a routine exam "might save someone's life!"

Nurse practitioners use clinical thinking to make a difference in preventative care. According to the

American Association of Nurse Practitioners, more than 75 percent of nurse practitioners work in primary care practices, including adult and family medicine, pediatrics, and women's health. Kaiser Permanente's own team of nurse practitioners excels in preventive care, with quality of nurse practitioner wellness care is on par with that of physician-provided wellness care. Kaiser Permanente is proud to support nurse practitioners in their outstanding practice and daily contributions to preventive care, particularly in women's health.



Margaret Good, FNP-BC, nurse practitioner confers with Ly Truong, MD, Modesto Ob-Gyn practice

Leading the Way: 2018 Nursing Research, Awards and Accolades

By Daniel Linnen, PhD, MS, RN-BC, nursing research and data science program director

From national board appointments to awards, Kaiser Permanente nurses are recognized for pursuing excellence, going the extra mile, and moving the profession forward. Our accomplishments reflect the depth, breadth, and expertise of Kaiser Permanente nursing in Northern California.

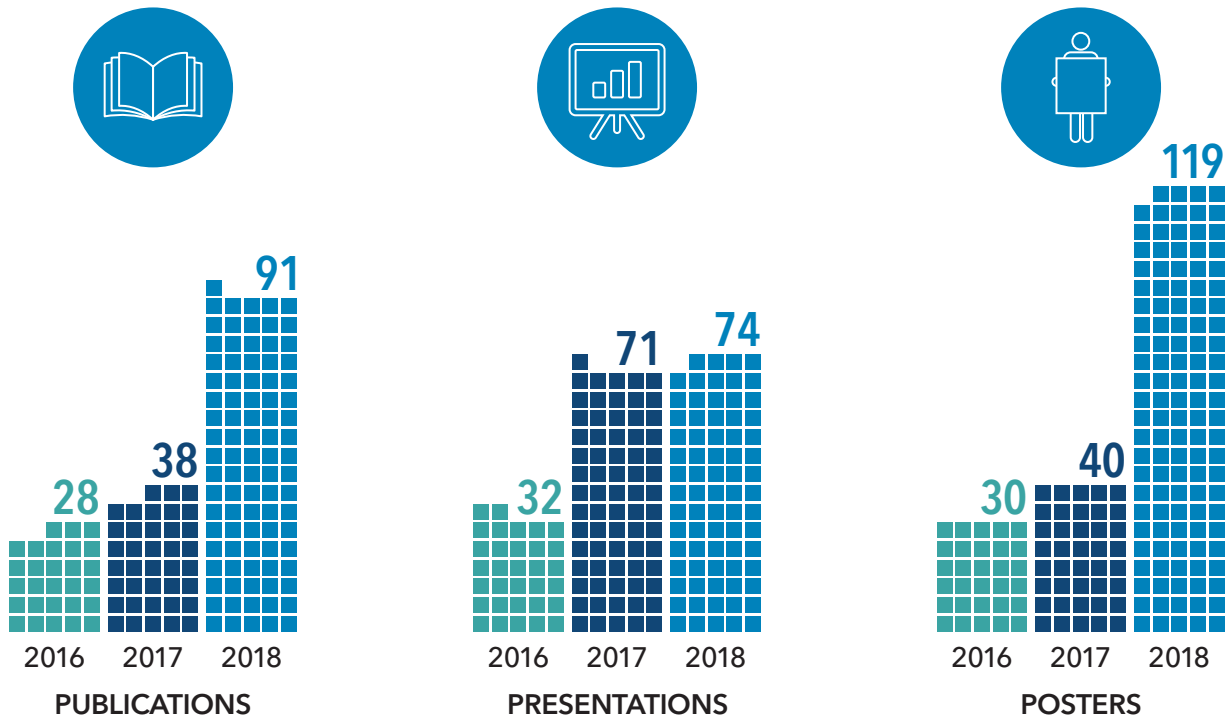
Accolades and Accomplishments

Nurses across the region are honored for their work inside and outside of the organization, reflecting a variety of practice settings, clinical fields, and passions. What we see in common among all 2018

nurse awardees is their passion for patient care and successful outcomes. Admired by many, our nurses don't just win accolades, their accomplishments move the profession forward.

Patricia Zrelak, PhD, RN, clinical practice consultant at Sacramento Medical Center is one among our many exemplary nurses. Her service has included board memberships on the American Heart Association and the American Stroke Association, the American Nurses Association, the Centers for Disease Control and Prevention, and the Agency for Healthcare Research and Quality, among others.

2018 awards included recognition for best practices (surgical smoke reduction in the operating room: Charlene Wade, PhD, RN, San Jose), exemplary leadership (Richard Kimbrel, DNP, RN, Walnut Creek), and dissertation awards (Michelle Camicia, PhD, RN, Vallejo), among many others.



2018 Nursing Knowledge Dissemination

SOME OF OUR 2018 KP NURSE ACCOLADES AND ACCOMPLISHMENTS

Michelle Camicia, PhD, RN
VALLEJO
Martha N. Hill New Investigator Award, AHA Council on Cardiovascular Disease and Stroke Nursing
Editorial Board, Rehabilitation Nursing

Anita Catlin, PhD, RN, FAAN
SANTA ROSA/VALLEJO
Lead Author, National Perinatal Association, Clinical Guidelines for Mothers with Pregnancy Loss in the ED, adopted by ANA Ethics & Human Rights

Daniel Linnen, PhD, MS, RN-BC
REGIONAL OFFICES
Carol A. Lindeman Award for a New Researcher, Western Institute of Nursing
Doctoral Class Commencement Speaker, University of California San Francisco, School of Nursing Graduation Ceremony

Lisa Massarweh, DNP, RN
REGIONAL OFFICES
Abstract Reviewer, University of San Francisco DNP Conference

Jessica Pemberton, MSN, RN
VACAVILLE
Trauma Quality Improvement Program, Trauma Registry TQIP Abstract Award

Stephanie Reggiardo, MSN, RN
SANTA CLARA
Educator of the Year Award, KP Santa Clara

Elizabeth Scruth, PhD, CNS, RN
REGIONAL OFFICES
Editorial Board, *Australian Critical Care*
Secretary/Treasurer, Board of Directors American Association of Critical Care Nurses (AACN)

Cynthia Sinogui, MSN, RN
SACRAMENTO
1st Place Poster Award – Depression Screening, KP Inter-Regional Stroke Conference

Gretchen Jones Summer-Gafford, PhD, RN
REGIONAL OFFICES
Section Editor: Nursing Research, *The Permanente Journal*

Charlene Wade, PhD, RN
SAN JOSE
Go Clear Award, Association of periOperative Registered Nurses (AORN)

Marshanell Wright, DNP, RN
SAN JOSE
Nurse Distinction Award, Alpha Phi Chapter Chi Eta Phi Sorority

Patricia Zrelak, PhD, RN
SACRAMENTO
Lead Author, American Association of Neuroscience Nurses, Clinical Guidelines for Traumatic Brain Injury
Member, AHRQ Quality Indicator Expert Workgroup

Together, We Achieve

Exemplary patient care, professional nursing, and nurse-led science at Kaiser Permanente influence healthcare across the nation. Our nurses provide thought leadership and expertise in practice and science in a variety of functions. These include

service on editorial boards, peer review, nursing research studies, and leading the adoption of clinical guidelines across professional associations, among other contributions.

Advancing Organizational Talent Through Cultural Innovation

By Jonalyn Wallace, DNP, RN, CENP, academic relations director
Priscilla S. Javed, DNP, RN, FACHE, regional director nursing professional practice
Ryan M. Fuller, MSN, RN, CNML, strategic initiatives director

The Nurse Scholars Academy was launched in December 2015 to transform our organization from the inside out. An unprecedented internal commitment of more than \$28 million was pledged to advance academic progression, professional practice, and the image of nursing across Kaiser Permanente Northern California. Now finishing its third year, the Nurse Scholars Academy has elevated the nursing profession across the region.

AACN Award for the Nurse Scholars Academy

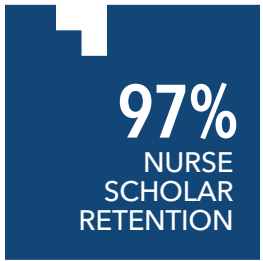
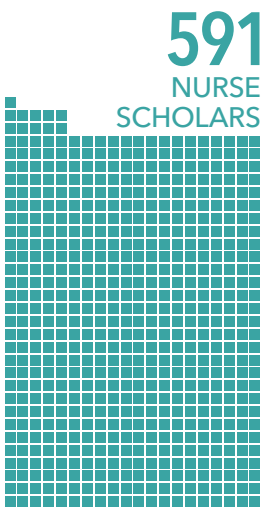
We are proud that the Nurse Scholars Academy and University of San Francisco School of Nursing and Health Professions were presented in October 2018 with the American Association of Colleges of Nursing (AACN) Exemplary Academic – Practice Partnership Award at AACN’s Academic Nursing Leadership Conference in Washington, DC.

Recipients of this highly competitive award are selected by AACN, which represents more than 800 schools of nursing in public and private universities. The award is presented annually to AACN member schools and their practice partners in recognition of advancing nursing leadership, leading the transformation and redesign of systems change to improve clinical outcomes, and creating healthy, respectful work environments.

Approaching 600 Nurse Scholars

In its third year, the Nurse Scholars Academy has now granted nearly \$13 million in tuition to help 591 Kaiser Permanente registered nurses return to school to pursue academic progression in their nursing careers. We also proudly celebrated the graduation of 188 Nurse Scholars, bringing the total number of graduates to 248.

Since its inception, the Nurse Scholars Academy has aimed to address the National Academy of Medicine’s 2010 *Future of Nursing Report* goals. These include increasing the percentage of bachelor’s prepared nurses to 80 percent, as well as doubling the number of doctoral prepared nurses. To date, we have advanced our workforce to more than 73 percent bachelor’s prepared, and more than doubled the number of doctoral prepared nurses in Northern California. From front-line nurse to chief nurse executive, degree programs enhance nursing at every level in the organization.



Structural Empowerment

“I can’t begin to describe the impact the Nurse Scholars Academy has had on my professional growth at Kaiser Permanente. In fact, I am now enrolled in a population health DNP program to continue to expand my potential as a nurse leader in our organization.”

David A. Ainsworth, MSN, RN, CNL
Regional Director Home Health & Hospice



Leadership from Kaiser Permanente's Nurse Scholar Academy and the University of San Francisco School of Nursing and Health Professions gather to receive a prestigious award from the American Association of Colleges of Nursing.



Nurses and interdisciplinary colleagues gather with Dr. Jean Watson at the seventh annual Kaiser Permanente Caritas Consortium.



Cohort 3 of the Master of Science in Nursing Clinical Nurse Leader program gathers at December 2018 graduation celebration.

Celebrating Another Successful Caritas Consortium

The Nurse Scholars Academy hosted the 7th Annual Kaiser Permanente Caritas Consortium at the San Francisco Airport Marriott Waterfront on March 20 and 21, 2018. More than 800 participants received training and had an opportunity to reflect on and renew their professional commitment to Caring Science. The keynote speakers included Jean Watson, PhD, RN, FAAN, American Academy of Nursing Living Legend, and BJ Miller, MD, assistant clinical professor of Medicine, UCSF. Participants engaged in healing art activities including resilience training, massage services, an art room, pet therapy, HeartMath demonstrations, and a guided exercise workout. The poster gallery featured 22 presentations from 8 medical centers.

Evidence-Informed Practice Event

Bernadette Melnyk, DNP, RN, was the keynote speaker for the 3rd Annual Illumination Seminar, a learning event designed in partnership by the Nurse Scholars Academy and the University of San Francisco (USF) School of Nursing and Health Professions. Grounded in scholarship, innovation, and Caring Science, the program reflects a shared strategy to inspire individual and health care system transformation. More than 150 nurse leaders, faculty, students, and friends from the community of nursing attended the seminar at the University of San Francisco. The event provided opportunities to

CARITAS CONSORTIUM
LEAD SPEAKERS

Interprofessional Caring Council

Ashley McDonald, BSN, RN,
South San Francisco

I Am Wise

Anh Khieu, RN, Santa Clara

Staff-Led Caring Council

Elizabeth Bigby, DNP, RN, Vacaville

Improving CHF Outcomes

Vanessa Martinez, MSN, RN, Richmond

Weaving Caring Science Theory into Daily Practice

Denise Laws, DNP, RN, Santa Rosa

Cultivating Gratitude Workshops

Raymond Dougherty, MSN, RN, San Rafael

Creating a Culture of Healing in the ICU

Julie Suarez, MSN, RN, Roseville

Building Culturally Aware Teams

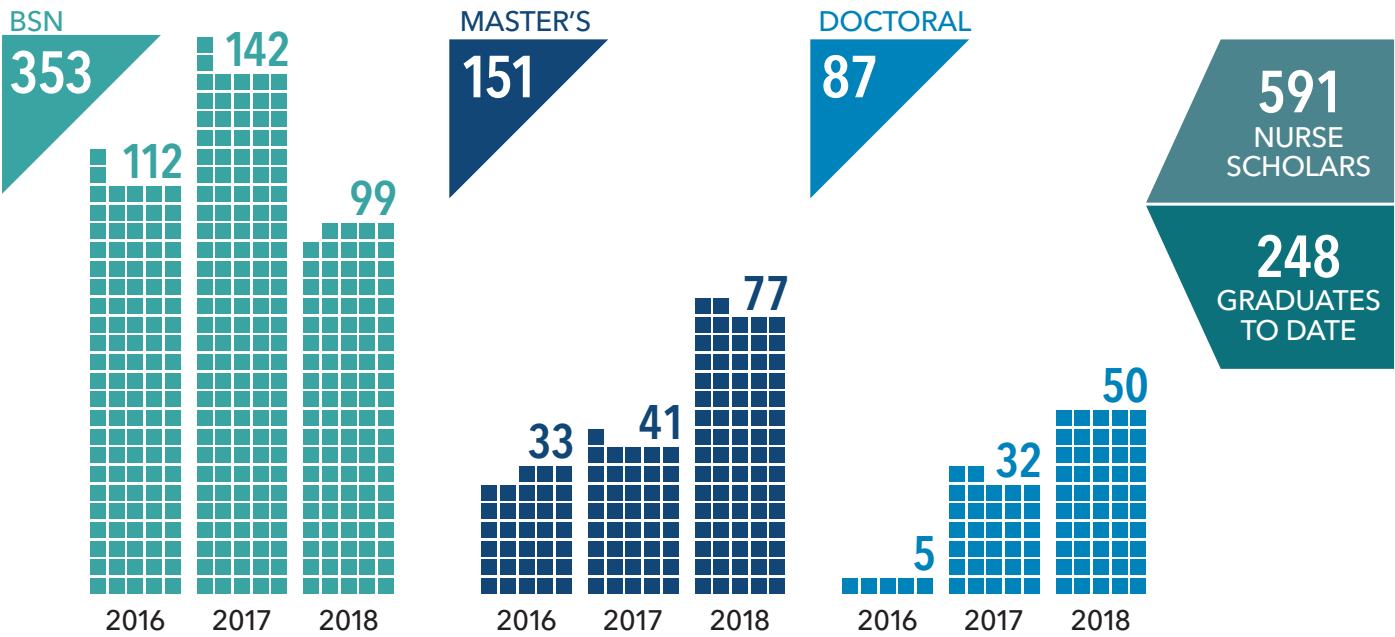
Ifeoma Nnaji, DNP, RN, Manteca

interact with and learn from nationally renowned nurse leaders representing diverse scholarly backgrounds. Participants also explored how to advance the integration of Caring Science into nursing professional practice, education, organizational leadership, and research.

Enhancing Our Culture of Caring

2018 commemorates Northern California's eighth year of integrating Dr. Jean Watson's Theory of Human Caring to guide nursing practice at our 21 medical centers. As the world's largest affiliate of

the Watson Caring Science Institute (WCSI), the region embarked this year on a new charter: to bring Caring Science and the HeartMath system into a combined curriculum. The curriculum was co-created by Northern California Caritas Coaches under the guidance of Jean Watson, PhD, RN, FAAN, and HeartMath leaders Robert Browning and Sheva Carr. This dedicated group produced an experiential education program of 4 modules, designed to deepen nurses' knowledge of Caring Science and HeartMath. These modules were initially taught in 2018 by Caritas Coaches at 8 medical centers and will be offered at additional medical centers in 2019.



Nurse Scholars Academy Enrollment

Enhancing Community Health Across Northern California

By Nikki West, MPH, health care management education fund co-director
Jonalyn Wallace, DNP, RN, CENP, academic relations director

To support Kaiser Permanente’s mission to improve the health of the communities we serve, our nurses extend their work beyond Kaiser Permanente. Several community programs were offered in 2018 to build a diverse pipeline to careers in nursing and health care, including a new effort to redesign an undergraduate nursing curriculum to address the growing need to close the gap between nursing academics and practice.

A Day Dedicated to Youth

Youth Career Day exposes students interested in pursuing a career in health care to a variety of opportunities through realistic, interactive scenarios and simulations. Held at Kaiser Permanente’s Garfield Innovation Center, the event provides a detailed look at a wide range of care settings and gives students an experience that goes well beyond a typical job shadow experience.

Youth Career Day events on October 23 and 24 drew 323 local youth from 14 schools and community-based organizations. More than 180 Kaiser Permanente and community volunteers assisted at the event.

Youth Career Day and post-event highlights further enhanced our Community Health strategy:

- Youth Radio presented its Mood Ring app, which addresses teen mental health and depression
- A social worker from the Veterans Affairs Outpatient Program spoke about her work caring for the homeless

“It was an honor to be part of this amazing day! Our future looks bright indeed, given the level of engagement and enthusiasm so many young people brought to this lovely event.”

—Karen D. Tejcka, MPH, BSN, RN,
chief operating officer/chief nurse executive,
Fremont Medical Center

- Follow-up sessions for 117 students were held at 3 participating schools and programs, offering deeper exposure to HeartMath as well as careers in mental health. Sessions were led by an interdisciplinary group that included representatives from Kaiser Permanente Patient Care Services and External and Community Affairs, and the Kaiser School of Allied Health, as well as Kaiser Permanente psychology and social work mental health trainees.

A Curriculum Shift: Caring for People and Their Total Health

The Nursing Prelicensure Curriculum Redesign grants are funded through the Kaiser Permanente Northern California Fund for Health Education at



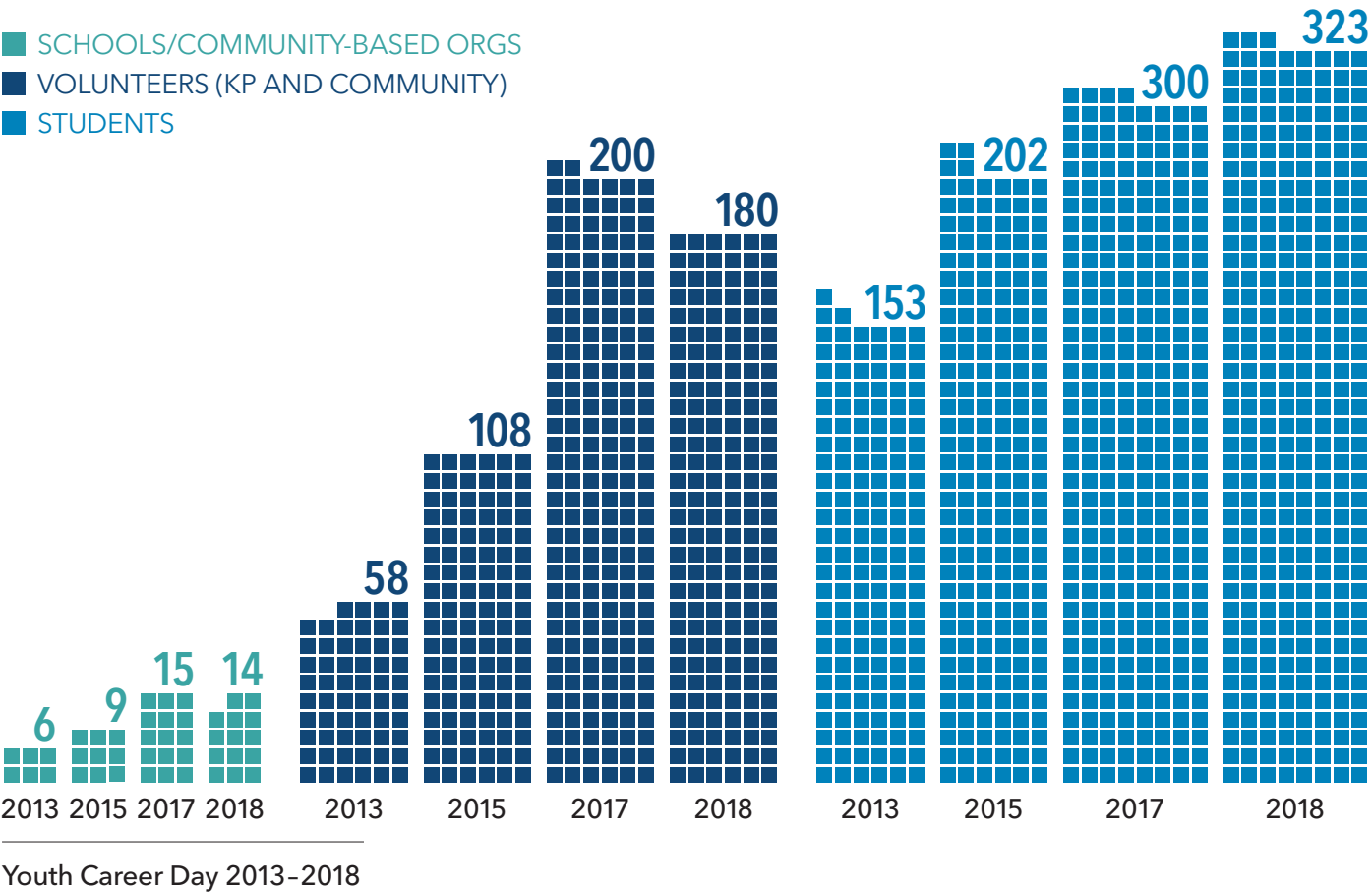
Youth Career Day students learn about labor and delivery nursing from Sarah Abdocalder, MSN, RN, San Francisco Medical Center clinical and informatics educator.



Youth Career Day students learn about HeartMath from Elizabeth C. Winstead, program lead consultant, Nurse Scholars Academy.

the East Bay Community Foundation. Four California prelicensure schools of nursing (California State University East Bay, San Jose State University, Hartnell College, and West Hills College) are participating in a process of curriculum review and revision, including virtual and in-person coaching and educational sessions. The project is designed to shift nursing curriculum’s traditional disease-based,

acute care-focus to one that emphasizes caring for people rather than patients. It promotes a culture of health while preparing students for the new and emerging roles of registered nurses. Participating schools are working closely with their Board of Registered Nurses consultants as they seek to expand clinical partnerships and discover new ways to educate students.





Robert Vega, nurse manager, Walnut Creek Medical Center, attended the National Council for Behavioral Health's mental health first aid training and shared key takeaways with his team of nurses.

Mental Health First Aid

This national training program, administered by the National Council for Behavioral Health, empowers healthcare workers and community members to recognize and respond compassionately to the signs of mental illness and substance abuse. In 2018, Kaiser Permanente provided funding for 6 training programs, offered at no cost to communities throughout Northern California. Each session was filled to capacity, with 69 Kaiser Permanente nurses and numerous community members in attendance.

Deloras Jones Scholarship Program

This program acknowledges academic excellence and promotes diversity among ADN, BSN, and masters and doctoral students. The scholarship was established in 2000 to honor Deloras Jones, who spent her more than 35-year career at Kaiser Permanente. She began as a student at the Kaiser Foundation School of Nursing in the 1960s and retired as a Senior Nurse Executive. Since its inception, the Deloras Jones Scholarship Program has provided approximately \$5 million in assistance to more than 2,000 nursing students in California.

In 2018, 98 nursing students from 14 Kaiser Permanente Northern California affiliate schools – community colleges, CSUs, UCs and private institutions – received a total of \$174,500 in scholarship funds. Kaiser Permanente Northern California hosted a reception in December to honor Deloras Jones, the scholarship recipients, and their families. Alumni from the Kaiser Foundation School of Nursing attended, and a welcome was given by Linda J. Knodel, MSN, MHA, RN, NE-BC, CPHQ, FACHE, FAAN, senior vice president and national chief nurse executive for Kaiser Permanente.

NURSING PRELICENSURE CURRICULUM REDESIGN EVENT

California State University East Bay (CSUEB) PROGRAM TYPE BSN

New curriculum at CSUEB focuses on mental health and community engagement/ experiential learning.

San Jose State University (SJSU) PROGRAM TYPE BSN

SJSU offers strong clinical partnerships and looks to develop more opportunities for students in population/community health settings.

Hartnell College PROGRAM TYPE ADN

Hartnell Community College meets the health care workforce needs of a rural area (Salinas) with a predominantly Hispanic nursing student body.

West Hills College PROGRAM TYPE ADN

West Hills Community college meets needs of a historically underserved area in California's Central Valley.



Four Deloras Jones Scholarship awardees gather with Deloras Jones as they receive their 2018 scholarships.

National Patient Care Update and Our Collective Work to Advance a Culture of Excellence

By Jim D'Alfonso, DNP, RN, NEA-BC, FNAP, executive director professional practice, leadership development, research, and Nurse Scholars Academy

The 2018 Kaiser Permanente National Nursing Leadership Conference took place in Anaheim in May, and focused on "Creating a Culture of Excellence." As leader of the conference, Linda J. Knodel, MSN, MHA, RN, NE-BC, CPHQ, FACHE, FAAN, senior vice president and national chief nurse executive of National Patient Care Services shared her vision to lead system-wide change and transformation through a shared national nursing strategic plan. A central theme of Linda's vision includes the creation of a cross-regional council structure that will help engage, inspire, and transform nursing across Kaiser Permanente.

New National Strategy and Council

Throughout 2018, Northern California Patient Care Services partnered with National Patient Care Services (NPCS) and leaders from other regions to formalize the Cross Regional Nursing Strategic and Operational Council. The benefits of the new council structure include broad representation of nurse leaders, educators, and clinical experts from across Kaiser Permanente. The council collaborated to form strategic workstreams and sub-streams to elevate nursing care, and support operational excellence. Key workstreams include quality, safety and care experience, evidence-based practice and research, professional development and talent management, and transformational leadership.

Northern California Nursing Strategy

The 2018-2021 Northern California Nursing Strategic Plan was developed this year to align operational strategies as well as to complement and support NPCS priorities, while allowing practice innovations to evolve and spread from Northern California to other regions over time. The Northern California Nursing



Cross Regional Nursing Strategic and Operational Council meeting in May 2018.



Presenters at NNLC represented nurses from many of our regions, including 2 from Northern California.

Strategic Plan identified 8 core areas of focus in order to continue to advance our culture of excellence across the continuum of care.

New NPCS Team

The newly formed NPCS team was announced in Q4 of 2018 and aligned to support the Kaiser Permanente Nursing strategic and operational plan. Anne Marie Watkins, DNP, RN, CENP, was selected as vice president for Strategy and Operations. Anne Marie was the chief nurse executive at Kaiser Permanente San Diego and Zion Medical Centers in the Southern California Region since 2014. We welcome her and wish her continued success in her new role.

We are equally pleased to celebrate 2 former Northern California nurse leaders and Kaiser Permanente Nurse Scholars who were promoted to support the expanded vision and lead defined NPCS workstreams. Join us in congratulating:

- Peggi Winter, DNP, RN, CENP – NPCS, senior director, Professional Development and Talent Management Workstream
- Julie Read, DNP, RN, NE-BC – NPCS, senior director, Transformational Leadership Workstream

Other members of the NPCS leadership team include:

- Catherine Dower, JD, senior director, Evidence-based Practice and Research Workstream
- Pamela Leonard, MS, RN, senior director; Quality, Safety, and Experience Workstream



2018-2021 NCAL NURSING STRATEGIC PRIORITIES



Grow

1. Leverage the Professional Practice Framework of Kaiser Permanente Nursing



Perform

2. Improve Nursing Professional Development and Retention
3. Cultivate Transformational Leadership
4. Standardize Quality Care Processes
5. Expand Integration of Nursing Evidence-based Practice and Research



Lead

6. Increase and Sustain Nursing Leadership Diversity
7. Improve Visibility, Recognition, and Branding of KP Nursing
8. Enhance Technology Deployment and Integration



Linda J. Knodel presents the opening address and welcome at NNLC.



Gregory A. Adams provides the keynote address at NNLC.

2018 NNLC

More than 500 Kaiser Permanente nurse leaders attended the 2018 National Nursing Leadership Conference (NNLC) in Anaheim, CA. Keynote speakers included Gregory A. Adams, national executive vice president and group president Kaiser Permanente, Linda J. Knodel, MSN, MHA, RN, CPHQ, NE-BC, FACHE, FAAN, senior vice president and national chief nurse executive, and Tim Porter-O'Grady, senior partner health systems, TPOG Associates, Inc. These dynamic leaders were joined by Kaiser Permanente speakers as well as other national experts. Northern California brought 5 posters to showcase the regional work on a national scale.

2019 NNLC IN ANAHEIM

Consider attending the 2019 KP NNLC on May 14-15, 2019 in Anaheim, CA. Look for more information on the Nurse Scholars Academy website ([KP.org/nursescholars](https://kp.org/nursescholars)).

New Knowledge, Innovations, and Improvements

"We empower our clinical teams to stay at the forefront of innovation and invest in their ability to impact positive change. Our Perinatal Palliative Care Program is just one example of how our teams are innovating to transform care delivery. Our efforts result in exceptional care, where we constantly strive to increase the emotional and physical well-being of both our patients and clinicians."

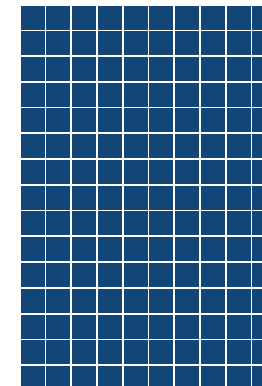
Terri Lamanna, BSN, RN
Staff Nurse IV,
Walnut Creek Medical Center

Kirsten Marasigan, BSN, RNC-OB
Assistant Nurse Manager,
Walnut Creek Medical Center

100%
HOSPITALS
PARTICIPATING

4.3%
PC-02
DECREASE

150
PARTICIPANTS
SVB TRAIN
THE TRAINER



Supporting Vaginal Birth: Perinatal Core Measure PC-02

*By Lisa Cowan, DNP, RN, WHNP, NEA-BC, FACHE, regional director
Maternal Child Health*

In May 2017, the Northern California Region launched the Supporting Vaginal Birth (SVB), NCAL PC-02 Collaborative, with 10 of our medical centers participating. PC-02 is a measure set defined as first-time mothers with an early to late-term, single baby in a vertex (head down) position delivered by cesarean birth. The purpose of the collaborative is to standardize best practices for cesarean procedures, reduce variation among Kaiser Permanente Northern California hospitals, and address a nationwide increase in cesarean sections performed without clear evidence of neonatal or maternal benefit.

SVB NCAL PC-02 Collaborative

In 2017, more than half of all hospitals in California had higher cesarean rates than the national recommendation set by The Joint Commission. In response to those trends, Kaiser Permanente Northern California developed the PC-02 Collaborative with all 15 medical centers that have Maternal Child Health services participating. Thanks to the SVB NCAL PC-02 Collaborative, the number of Kaiser Permanente Northern California medical centers surpassing the national target dropped from 15 (all of our centers) in 2016 to just 7.

SVB: Train the Trainer

The collaborative call to action included focused efforts to bring nurses back to the bedside to better support women in labor. Supporting Vaginal Birth: Train the Trainer (SVB TTT) sessions were developed in collaboration with certified nurse midwives and perinatal registered nurses. These sessions brought physicians, certified nurse midwives, nurse educators, and staff nurses together for a day of knowledge exchange and training at the Garfield Innovation Center. Participants learned new, evidence-based ways to support safe, vaginal births and later shared those skills with Labor and Delivery teams at their own medical centers. Sessions were well attended, drawing more than 150 participants and earning overwhelmingly positive reviews.



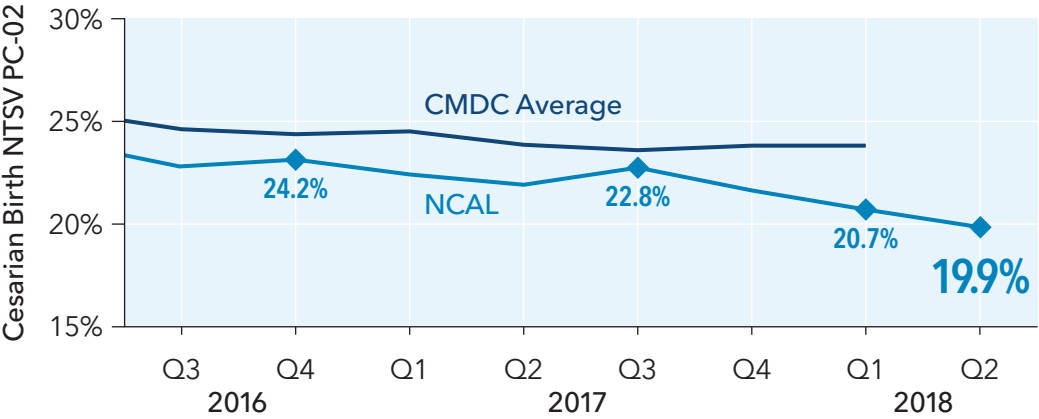
Katrina Cabalfin, RN, staff nurse II, San Francisco Medical Center practices a hands-on demonstration at the Supporting Vaginal Birth event in June 2018.

Strategic Focus and Methodology

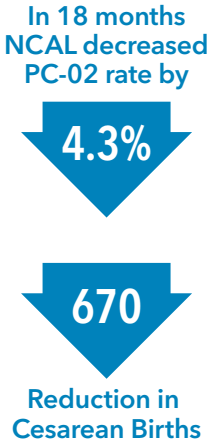
Kaiser Permanente Northern California nursing, physician, and midwifery leaders used standard performance improvement methodology, engagement, and multidisciplinary collaboration to identify key drivers of preventable cesarean sections and implement solutions to better support vaginal births. The initiative focused on 4 strategies: sharing of data, chart review, development and spread of protocols and checklists, and labor support skill-building.

Positive Results

Since we know the first cesarean section creates significant medical consequences for future pregnancies, we have shifted our culture to supporting vaginal births. As of October 2018, the NCAL Supporting Vaginal Birth PC-02 Collaborative has affected an overall reduction of the PC-02 rate by 4.3 percent. This equates to the prevention of approximately 670 cesarean births per year throughout Kaiser Permanente Northern California.



PC-02 NTSV C-Sections Results



Improving Care Coordination for Home Health and Hospice Patients

*By Danielle W. Franklin, MSOD, PMO, project manager, San Jose Medical Center
Susan Sanfacon, MBA, BSN, RN, service director, Santa Clara Home Health & Hospice*

When Kaiser Permanente Santa Clara Home Health and Hospice sought to streamline their workflow, project leaders Danielle Franklin, MSOD, PMO, and Sue Sanfacon, MBA, BSN, RN, launched a highly collaborative, inquiry-driven improvement process. In less than one year, rates for start of care within 48 hours climbed from 64 to 91 percent – an increase of nearly 30 percent.

involving many team members, multiple roles, and 3 different sites. Franklin and Sanfacon knew a successful outcome would come from open and honest collaboration, and input from every team member involved in the process.

Following an interactive kick-off meeting, they initiated 2 weeks of one-on-one interviews. The pair met with intake nurses, intake clerks, home health nurses, specialists, and site directors. Collectively, these ground-level professionals have an accurate view of the agency's daily workings. As those closest to the work, they also hold the key to a successful transformation.

Rising to Meet a Challenge

Kaiser Permanente Santa Clara Home Health and Hospice is a parent agency with oversight of San Jose, Redwood City, and Santa Clara home health and hospice patients. The center's intake department is responsible for processing referrals for all 3 sites in preparation for start of care (SOC) appointments.

For some time, Santa Clara Home Health and Hospice had struggled to keep up with growing demand for home health and hospice care needs within its service area. The persistent challenge met its match when project manager Danielle Franklin teamed up with service director Sue Sanfacon in early November 2017.

Drawing from her expertise in organizational development, Franklin worked with Sanfacon to launch an all-hands-on-deck investigation into the agency's workflow challenges. Every step of the process would be examined – from the moment referrals were received to first patient contact.

One-on-one interviews were followed by 2 weeks of observation. Workflow and work roles were carefully reviewed. The project team noted any workarounds that might have developed and collaborated with team members on what might make certain tasks easier or more efficient.

It Takes a Crew to Right a Ship

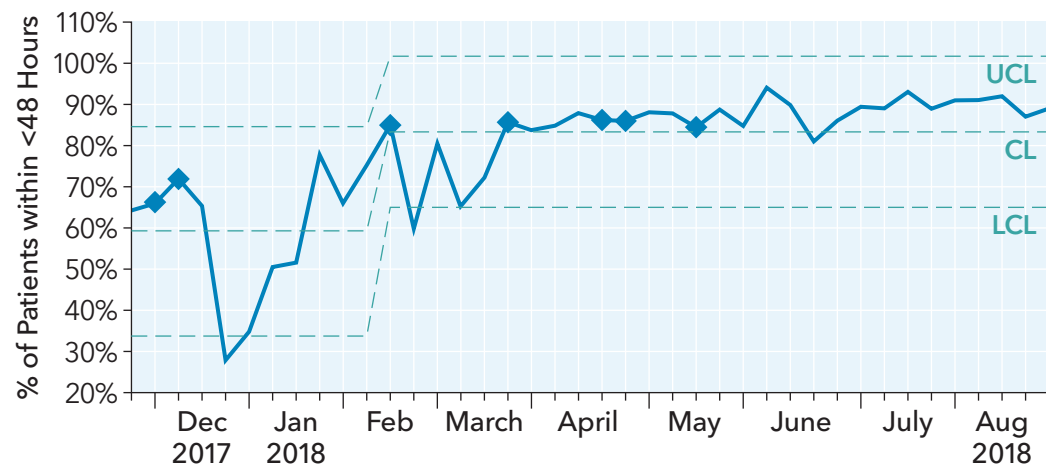
After 4 weeks of interviews, observation, and collaboration, the team proposed some dramatic workflow changes. First, the agency's single referral intake funnel was split into 3 tracks. This change accelerated site assignment and start of care.

In the new intake process, referrals were assigned immediately to their appropriate geographic site: San Jose, Redwood City, or Santa Clara. Dedicated intake clerks and intake RNs were assigned to each site, working side by side to process referrals and start of care. Metrics to identify areas for development as well as successes also were put into place.

Reception of the proposal were extremely positive. Everyone's voice had been included and they felt invested in the outcome. As the new processes took effect, the plan's positive impact quickly became apparent.

Investigation and Inquiry

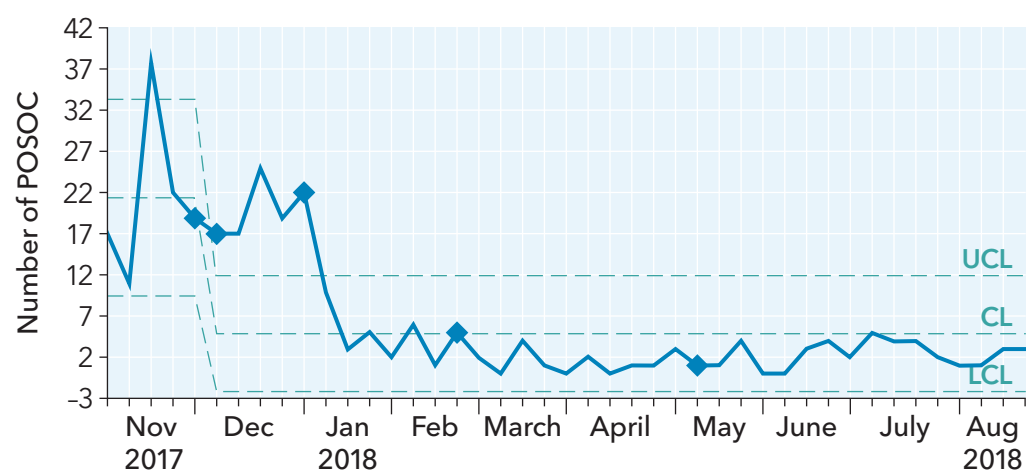
Santa Clara Home Health and Hospice's intake to start of care is a complex, multi-step process,



29.6%
Improvement

The number of SOC's <48 hours increased from 64% to 91% between November 2017 and September 2018.

Internal Starts of Care within 48 Hours (RWC, SCL, SJO) p-Chart



37/day
Decrease
≤5/day

Between November 2017 and September 2018

Internal Number of Physician Ordered Starts of Care (RWC, SCL, SJO) c-Chart

The Proof is in the Data

Within one year, Santa Clara Home Health's workflow improvement project's success is indisputable. Prior to kick-off, start-of-care appointments within 48 hours were at 64 percent. In just ten months, the rate of start-of-care within 48 hours climbed to 91 percent—a remarkable 27 percent improvement.

Franklin and Sanfacon credit their entire team's participation, ingenuity, and creative problem solving skills. Franklin adds, "The secret sauce to this project (and frankly any project) is...the complete trust of the team, leaders, and sponsors. We worked together to find the very best outcome, focusing on possibilities, not barriers."



The First 48 Home Health Initiative team gathered in redwoods for the project kickoff event.

SURGICAL SITE INFECTION REDUCTION

Bundle Improves Care Outcomes in Perioperative Cases

By Tammy Peacock, DNP, RN, NEA-BC, CENP, CPPS, LSSBB, surgical outcomes improvement manager
Jenny Mendenhall, BSN, RN, CHSE, clinical education and nursing practice consultant, Perioperative Services
Claire Spanbock, MSN, RN, CNOR, regional director Perioperative Services

According to a 2017 study, the incidence of surgical site infection (SSI) is approximately 160,000–300,000 cases annually in the United States. The financial burden of these infections is substantial and one of the costliest of all hospital-acquired infections. Estimated costs vary from \$3.5 to \$10 billion annually in the U.S. Moreover, SSI instances increase emergency department visits and hospital readmissions, and extend hospital stays by 9.7 days per infection. An estimated 60 percent of these cases can be prevented with the use of evidence-based measures.



“When you explain that the measures we take are designed to reduce the risk of infection, patients feel good about that.”

— Sherri Souza, RN, staff nurse IV, Fremont Medical Center

Introduction of the SSI Bundle

The Kaiser Permanente Northern California Surgical Site Infection (SSI) bundle was rolled out in October 2018. It was developed by an interdisciplinary team made up of clinicians and staff which included nurses and physicians from across the region. Components of the SSI bundle include:

- **CO₂ monitoring** to assess CO₂ levels prior to surgery
- **Hair clipping** outside the operating room, and only when needed
- **Pre-op chlorhexidine (CHG) wipes** applied by the pre-op nurse during a skin assessment
- **A warming device**, or normothermia, applied to all patients in pre-op, in intra-op, and to hypothermic patients in the post-anesthesia care unit
- **Surgical skin prep** applied in a standard, consistent manner
- **Antibiotics** administered as prophylaxis (and re-administered when needed) at the appropriate dose and timing
- **Surgical hand scrub** applied in a standard, consistent manner



Members of the Fremont Medical Center Perioperative Services team.

Meet George

George is not real – but his story is drawn from actual patient experiences. His experience, featuring 2 different surgical scenarios, illustrates the dramatic difference Kaiser Permanente’s SSI bundle can make.

George is 68 and lives on his own. His wife died 2 years ago after a long illness. He smokes, is overweight, and needs his right hip replaced after years of arthritis. George is scheduled for a total hip arthroplasty tomorrow, however, he is concerned for his cat Purdy. George’s neighbor Steve has promised to check in on the cat while George is in the hospital, but George remains focused on Purdy’s well-being.

Scenario 1: Pre-SSI Bundle Implementation

George was told not to eat or drink anything the morning of surgery, so he begins that day by smoking an extra cigarette. George did not shower last night or this morning, because no one has told him it is important to shower before surgery. Steve takes George to the hospital, and they smoke on the

way. It is blustery and cold this January morning, and George feels chilled. At the hospital the nurses are cheerful but busy, and George does not ask for an extra blanket. When the nurse comes to take George to the operating room, he is cold, hungry, unkempt, and worried about Purdy. George’s surgeon does not routinely prescribe weight-based antibiotics, and orders an insufficient dose.

Scenario 2: Post-SSI Bundle Implementation

The morning of surgery George has stopped smoking because he has been advised that giving up smoking, even for a short amount of time, will help his post-op recovery. He is concerned about his cat, Purdy, and wants to get home as soon after surgery as possible. He is told he should expect to go home the same day of surgery. George has showered the night before, and before dressing he cleans his hip with the CHG wipes provided to him by his medical team. George’s neighbor Steve takes him to the hospital, and knows that George has quit smoking, so they do not smoke. It is a cold

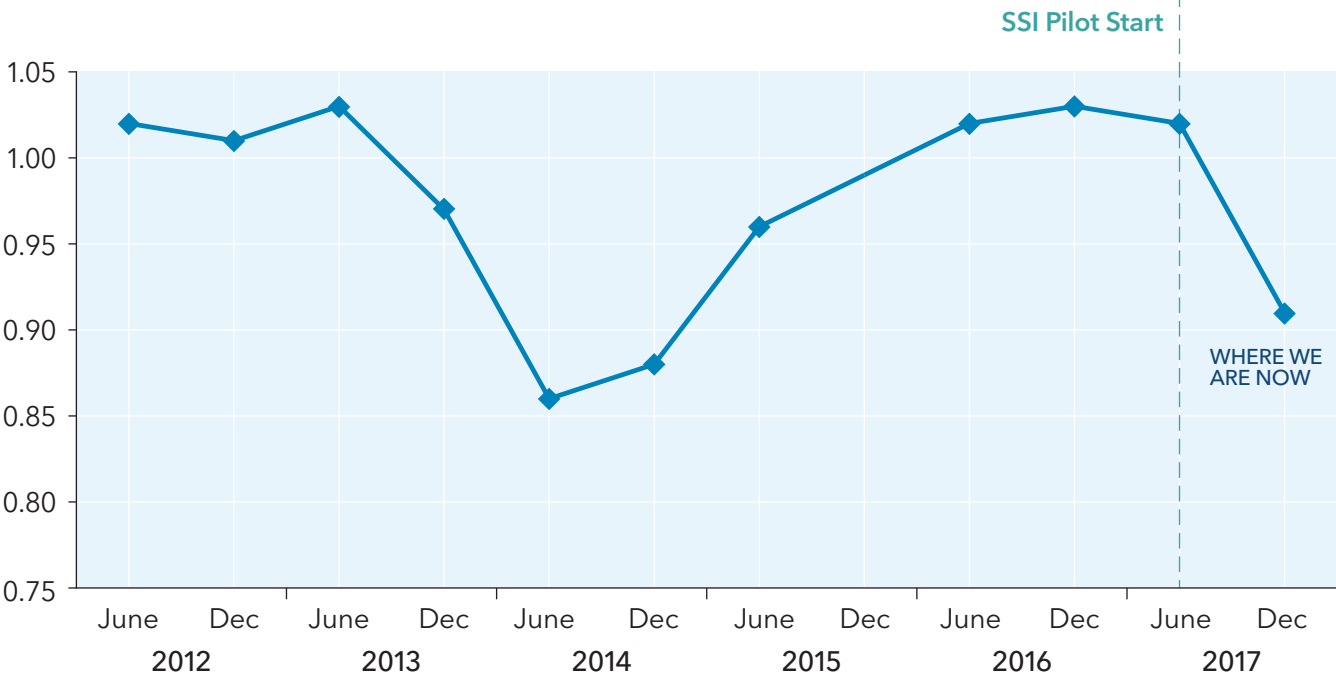
morning, and George feels chilled. The nurses get George ready for surgery. He is weighed, body hair on his hip is clipped and cleaned again with CHG wipes, and he blows into a CO₂ monitor. The nurse congratulates George on quitting smoking. He is covered with a warm, inflatable blanket, which the nurse explains will help prevent an infection post-surgery. The anesthesia provider explains that George will receive weight-based antibiotics before the surgery. He explains that this, too, will help with infection prevention. When the nurse comes to take George to the operating room, he is not worried about Purdy. He knows he should be home with her later that night.

The SSI Bundle Is Making an Impact

The SSI Bundle was tested at 2 pilot sites in June 2017 and significantly improved SSI rates at those facilities. As a result, the bundle was shared with all 21 hospitals in December 2017 and has resulted in a 22 percent decrease in SSIs in 2018. We continue to look at innovative and evidence-based practices that will help to continue to improve the care of our patients and members who receive surgical care in the Northern California Region.

“Yes, I have the tools I need. I used illustrations and demonstrations at our staff meeting to create awareness of the possible causes of SSIs and likewise how easy it is to keep them from happening.”

— Charlene Wade, RN, clinical and informatics educator, San Jose Medical Center



KP NCAL NSQIP Risk Adjusted Odds Ratios: All Cases SSI

Improving Immunization Rates

By Dawn Belardinelli, MD, chief of pediatrics, South San Francisco Pediatrics
Lee Ann M Wise, MS, RN, CNL, director of pediatrics and allergy, San Rafael Pediatrics
Errikka Richard, LVN, licensed vocational nurse, South San Francisco Pediatrics

As a national leader for childhood immunization delivery, The Permanente Medical Group knows immunizations are the cornerstone of prevention for all children. When working to increase immunization rates in a service area with historically high refusal, it’s important to look for opportunities throughout the entire delivery process, and never make assumptions. Following is one story of how a team of front-line nurses and physicians applied proven best practices to great success.

Look Past Perceived Obstacles

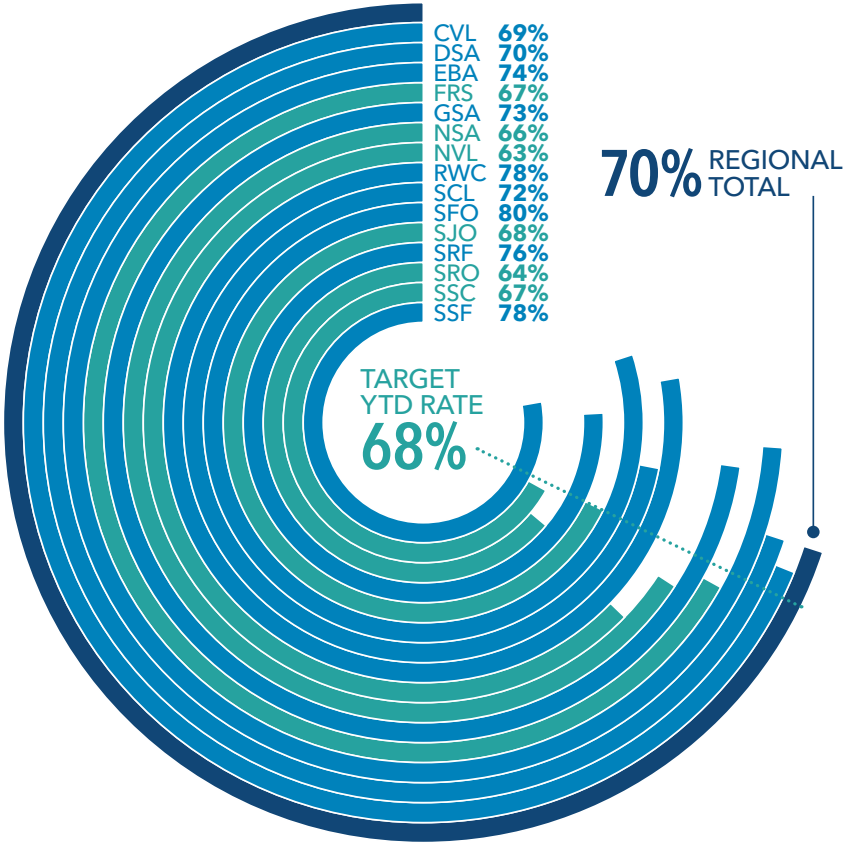
In 2015, Lee Ann Wise accepted the role of director of Kaiser Permanente San Rafael’s Pediatric Department. She brought with her more than 20 years of pediatric nursing experience in an inpatient setting.

At the time of Wise’s arrival, San Rafael had challenges meeting the HEDIS (Healthcare Effectiveness and Data and Information Set) measure for childhood immunizations. HEDIS is a national immunization benchmark, triple-weighted in TPMG performance measures.

Immunization rates were thought to be low because of Marin County’s historically significant rate of immunization refusal. Wise encouraged her team to look past external obstacles and collaborate to find internal solutions for improvement. As it turned out, San Rafael’s challenges had less to do with the area’s refusal rates than previously thought.

Collaborating with Leaders in Immunization Rates

Wise looked to pediatric departments throughout Northern California for inspiration. Knowing that Kaiser Permanente South San Francisco is a leader in childhood immunization, she reached out to Dawn Belardinelli, MD, chief of Pediatrics. Dr. Belardinelli also serves as Regional Immunization Performance Improvement Lead. Along with her team, including Errikka Richard, LVN, Dr. Belardinelli invited Wise and her department chief, Otto Von Franque, MD, to visit South San Francisco for a day of observation.



2018 Child Combo 10* Vaccination Rates

*National metric measuring % of children who by their 2nd birthday have received 10 recommended vaccination dosages.



Errikka Richard, LVN, Lea Ann Wise, RN, and Dawn Belardinelli, MD, discuss current immunization rate performance at the San Rafael Medical Offices.

From the moment they arrived, Wise and Dr. Von Franque noticed that South San Francisco’s team had internal systems in place contributing to their success. The department had effectively removed all internal obstacles to immunization: the injection schedule was open to families a full year in advance, there was a consistent process for “fail to keep” immunization appointments, and families were never turned away. Members were vaccinated in the moment, every time.

Improving What We Can Control

Back in San Rafael, obstacles were quickly removed. Wise and Dr. Von Franque followed South San Francisco’s lead and partnered with their LVN team to implement the best practices they had seen in action. “The most enlightening part of this journey,” Wise revealed, “was recognizing the opportunities for process improvement that were already available to us. Rather than referring families to upcoming flu clinics, we made vaccines available on the weekends and offered shots immediately upon request.

Success in Best Practices

Immunization rates immediately climbed as the entire San Rafael pediatric team worked together to mirror South San Francisco’s model. Not only did San Rafael’s rates dramatically improve, they have consistently surpassed the goal, achieving a sustained change in habits that will help prevent children from contracting a vaccine-preventable illness. Wise credits her team of front-line nurses. “Our success is 100 percent nurse-driven,” she adds. “They are completely invested in this important work and have embraced the changes, because they were equal partners on this journey.”

The partnership forged between San Rafael and South San Francisco continues today. The 2 departments are collaborating to improve pediatric immunization rates across the entire region. Dr. Belardinelli adds, “We’re working together to realize Kaiser Permanente’s vision that no Kaiser Permanente Northern California child is harmed by a preventable infection.”



Empirical Quality Outcomes

"I have worked for Kaiser Permanente in the Sacramento Call Center for 21 years. We have evolved over that time to become a great benefit for patients and employees. Call center nursing is more than advice nursing; it is really telephone triage nursing. We are able to triage, provide advice, determine if the member can be treated by phone, and get patients to the right place for care if needed. This is because of how connected Kaiser Permanente is with KP HealthConnect and the ability to conference with a call center physician for complicated or challenging calls."

Kathy Kerth, RN, staff nurse II
Sacramento Appointment and Advice Call Center

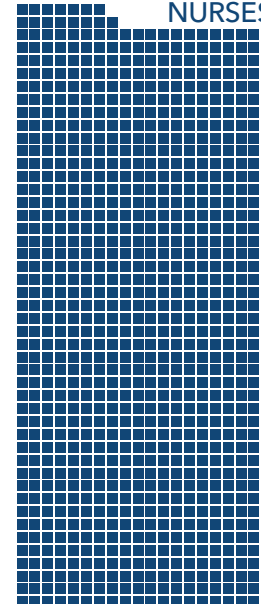
A Collaborative Approach Between Registered Nurses and Physicians to Provide Evidence-Based Exceptional Care

By Patricia Padilla, MD, clinical director Vallejo Appointment and Advice Call Center, and Family Medicine physician, Santa Rosa Medical Center

 **3.5**
MILLION
PATIENT CALLS

218,602
TELEPHONE
TREATMENTS

915
AACC
NURSES



The Permanente Medical Group's Appointment and Advice Call Center (AACC) increases access to consistent, high-quality care, supporting patients and physicians. In 2018, AACC nurses facilitated 218,602 telephone treatments for our patients. Member and patient satisfaction scores reflect high levels of satisfaction with this expedited level of care. Among the benefits of receiving care through the AACC, patients appreciate not having to drive to the medical center, miss work, or find childcare. They value the evidence-based, proactive, TPMG-approved clinical advice the AACC nurses provide.

Excellence in Telehealth

Kaiser Permanente Northern California has raised the bar for telehealth. Much of our success traces back to 1997, when we established the Appointment and Advice Call Center. This center leverages our integration and size to provide timely, consistent, and efficient services to members, around the clock, every day.

Today, the AACC manages clinical calls for all of KP Northern California's adult and family medicine, women's health, pediatrics departments, and international travel services, as well as most optometry and occupational health departments. Our innovative model allows nurses to provide advice, book appointments, or consult with a call center physician if necessary. In 2018, our 915 AACC registered nurses provided care for nearly 3.5 million patients over the phone.

The Call-In Experience

When a patient calls in to describe a clinical symptom, a nurse reviews the patient's electronic medical record. Open-ended questions are guided by physician chief-approved and evidence-based protocols to provide an assessment. Nurses use critical thinking to offer telephone treatments for common urgent medical complaints, including urinary tract infections and conjunctivitis. Call Center medical doctors are readily available on a virtual basis to consult when callers may require more extensive treatment or referrals.



Molly Malone, RN, staff nurse II, Sacramento Appointment and Advice Call Center.

“The doctor said the call center advice nurse [Kathy Kerth] saved my life.”

—Patient Daisy Award Submission

The Value of an Advice Nurse

A patient sent in a nomination for the highly coveted DAISY Award, for one AACC nurse, writing, “She saved my life.” This patient had a history of Coumadin use and had sustained a head injury. Kathy Kerth, RN, the AACC nurse who received his call, identified that something was wrong and urged him to act immediately. Convinced, the patient went to the ER that day, where he was diagnosed with a traumatic subdural hematoma.

“The doctor said the call center advice nurse saved my life,” he shared. “If I had not come in right away, I could have died. One should never underestimate the value of an advice nurse.”

MY MEDICATIONS MATTER

Improving Results in Medication Communication Across the Region

By Mary Linda Rivera, ND, RN, regional director Care Experience
Julia Loughlin, senior consulting associate, Operational Excellence

We know that communicating with patients about their medications is a critical part of a safe medical experience and improves overall outcomes. In April 2017, Kaiser Permanente Northern California assembled an interdisciplinary, multi-facility care team to establish a consistent, best practices-based approach for improving results in the region’s medical communication. The outcome was My Medications Matter, an initiative that optimizes communication among entire care teams and patients regarding the purpose and side effects of their medications.

My Medications Matter has had success in the Maternal Child Health service line, where the initiative contributed to an improvement in overall 2018 HCAHPS Medication Communication Composite score ratings. My Medications Matter was also expanded into Adult Medicine Units in early 2019.

What Is My Medications Matter?

The core of My Medications Matter is consistent communication from every member of the care team when medication is discussed. Consistent communication is encouraged through the use of practices, including Ask 3 Teach 3, Teach Back, and use of the term “side effects.” The intent is to open a dialogue with patients about their medications. The care team enhances communication with a medication side effects information sheet, creating a visual reminder for the patient.

My Medications Matter is one of the region’s first Exceptional Care Experience initiatives in our hospitals. It represents a broad, multidisciplinary

collaboration by physicians, nurses, and pharmacists to bring best practices to life.

Early Wins with My Medications Matter in Childbirth Units

In mid-2018, the regional My Medications Matter team partnered with Sarah Mandel, MD, and the Maternal Child Health Care Experience Collaborative to roll out the My Medications Matter bundle of practices across all Kaiser Permanente Northern California Maternal Child Health units.

Guided by a playbook the My Medications Matter development team created, medical centers took the following key steps: They established a multi-disciplinary team with nurses, physicians, and pharmacists; ensured the care providers are fully educated on the practices; and engaged in a test-and-learn period to refine the workflow.

The results speak for themselves: The entire Northern California Maternal Child Health program raised its overall 2018 HCAHPS Medication Communication Composite score from 4 to 5 (out of 5) stars. Five participating sites gained 1 star and 6 sites held constant at 5 star ratings over the previous year.

“The most exciting aspect of focusing on medication side effects during the last performance year was the strong collaboration our service line developed with both Pharmacy team members and our own front-line nurses,” said Pamela Emmert, a Care Experience practice leader from Kaiser Permanente South Sacramento. “This partnership was essential in maintaining the overall success of our performance year 2018 results.”

The South Sacramento staff were dedicated to raising medication awareness and consistently improving communication with patients/families during their stay, Emmert said. “Department leadership committed to consistently engaging with patients during rounding



Shea Alvarado, RN, staff nurse III, and Alisha Redhouse, RN staff nurse II, South Sacramento Medical Center.

to assess the level of staff engagement during their stay, confirming the presence and use of our tools, and providing performance coaching with staff if needed. Our physicians have also joined our movement and are implementing strategies to utilize the My Medications Matter platform to educate patients prior to delivery of medications in the clinic setting. Our goal in performance year 2019 is to continue to maintain the 5-star HCAHPS rating our team has worked so hard to achieve!"

Ashu Goyal, MD, Northern California physician lead for My Medications Matter, agreed. "I feel really proud that as an organization we have developed a body of work that encourages all of our physicians, nurses, and other team members to collaborate together in having effective conversations with our

"As a nurse and professional educator, I believe that the emphasis on engaging our patients on potential medication side effects not only fulfills our professional nursing responsibility to the patients we serve, but also contributes to both the highest level of quality of care and patient safety."

—Alisha Redhouse, MSN, RN, staff nurse II
South Sacramento Medical Center

"One of the main benefits of the new My Meds Matter education focus is how it promotes improved communication between the caregiver and the patient, as well as ensuring that the patient is better able to manage their plan of care and overall health. Ultimately, as nurses, we feel more confident that our patients can go home and enjoy motherhood!"

—Shea Alvarado, BSN, RN, staff nurse III
South Sacramento Medical Center

patients and their family members," he said. "Patients knowing about their medications is a basic patient safety right, and it's rewarding to know that our physicians and nurses are partnering and taking the time to do the right thing and involve our patients more in their care."

Plans for Adult Services Expansion in 2019

Many other units are also seeing promising results. Amy Young, MBA, BSN, RN, chief nurse executive at Kaiser Permanente Redwood City, which was an early pilot site, reports My Medications Matter has contributed to maintaining their medication communication results.

"The positive feedback we have received from our patients and families is a testament to our Nurse Champions who have led this work, and to all nursing staff who continue using the evidence-based practices," Young said.

Baby Orsua, BSN, RN, nurse manager in Adult Medicine at Kaiser Permanente South Sacramento, noted "My Medication Matters starts the connection right away with patients and family when we talk about medications and medication side effects. Trust is solidified when staff takes the time to explain and listen during this trying time for our patients and their families."

Enhancing Patient Safety by Proactively Identifying Risk for Deterioration

By Shirley S. Paulson, DNP, MA, RN, NEA-BC, regional director clinical adult services
Elizabeth Scruth, PhD, MPH, RN, FCCM, CCNS, CCRN, clinical practice consultant
Laure Lisk, MS, BSN, RN, CPHQ, CPHRM, strategic implementation leader

Predicting today who will be in the ICU tomorrow is the premise of the Advance Alert Monitor (AAM) program. AAM is a predictive model that gives us a 12-hour lead time to identify patients who are at risk of clinical deterioration. Developed by the Kaiser Permanente Northern California Division of Research under Gabriel Escobar, MD, the AAM program has been implemented at all 21 Kaiser Permanente hospitals in Northern California.

AAM Leverages Clinical Experts

AAM enhances patient safety and outcomes by proactively identifying patients at risk for clinical deterioration. Patient chart data is scanned by critical care RNs at a secure command center, called eHospital. Data is reviewed on an hourly basis for alerts greater than or equal to 8 percent, indicating patients at risk of deterioration within 12 hours. When an alert greater than or equal to 8 percent is found, the eHospital nurse notifies the local Rapid Response Team (RRT) RN and communicates the alert and pertinent clinical information. The RRT RN then works with the primary RN to assess the patient, obtain a new set of vital signs, and call the physician for stabilization.

Success has been realized through the efforts of our regional team which consistently implemented AAM, worked with front-line staff to develop solid workflows and documentation, and involved social work and palliative care partners to proactively address our patients' wishes and decision making.

Because interventions are now occurring before rather than after patient deterioration, full Rapid Response and Code Blue calls have been avoided, and patient mortality rates have improved. Results also show that if a patient needs to be transferred to the ICU, their overall length of stay in the ICU is reduced.

RRTs in Action with AAM

Chelsea Carrera, RN, staff nurse III from Kaiser Permanente Santa Rosa, describes herself as a "Proud RRT/Code Blue RN" and relates this powerful story that converted her into an AAM believer:

"A patient diagnosed with bilateral Pulmonary Embolus (PE) and sepsis/pneumonia was admitted to my floor from the Emergency Department. As I helped her get settled and started her orders, I noticed she was awake and alert, with some dyspnea



Chelsea Carrera, RN, staff nurse III, and Paul Castaneda, RN, assistant nurse manager, Santa Rosa Medical Center.

on exertion. She was placed on our AAM list and I turned her over to the night AAM RN.

“When I returned the following morning, I learned that her condition had worsened and she was in severe respiratory distress. We contacted her primary MD and transferred her to the ICU. After less than 6 hours, she returned to us awake and oriented, breathing easy, and eating.

“I believe the AAM program contributed to saving my patient’s life. If she hadn’t been placed on the AAM list, it’s possible we may not have been as quick to identify her deterioration. The tool in general helps us quickly identify the sickest of the sick and give them a softer landing into our ICU.”

Alex Dummet, MD, clinical lead for AAM describes Chelsea’s story as “reflecting the positive impact of using predictive analytics to communicate a patient’s risk for deterioration within the team, rapidly re-assess their condition, and escalate care proactively, rather than reactively.”

e-Hospital RNs a Critical Aspect of AAM

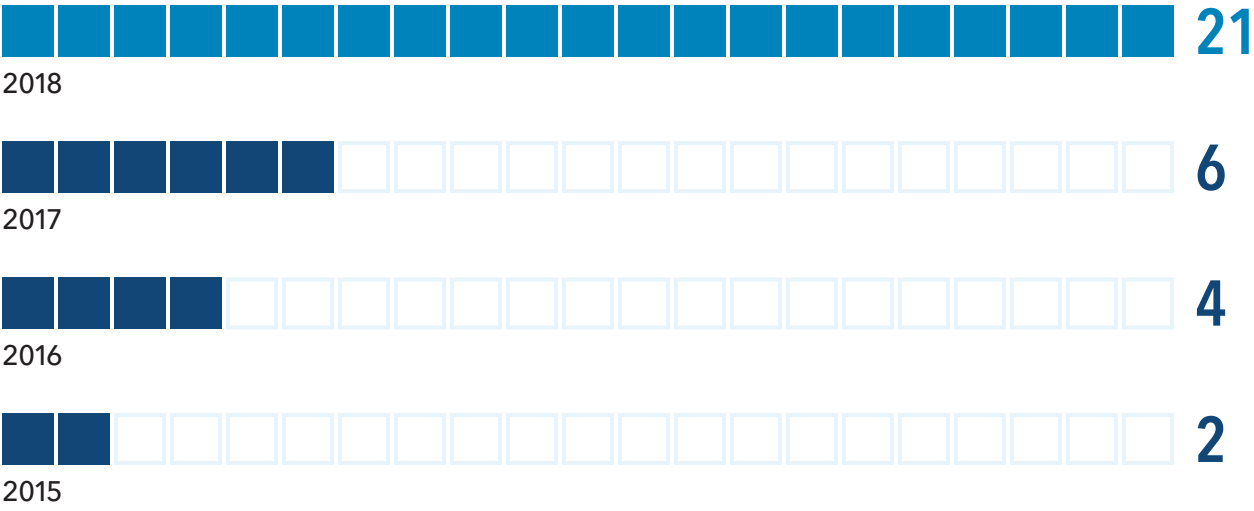
Elizabeth Scruth, PhD, RN, an eHospital nurse and member of the Regional Clinical Effectiveness team believes “the most important component an eHospital nurse can contribute is their clinical

background and aptitude for analytical inquiry. Their ability to navigate a chart, see through the lens of both the rapid response team (RRT) nurse and the provider, and clearly communicate analyses makes the collaboration a success.”

Michael Purnell, MSN, RN, CCRN, NVRN, CNRN is one of eHospital’s quality nurses and sees first-hand the impact that AAM has on improving patient care. “Each week I work as an AAM RN, it’s an experience like none other. At least once a week, I see patient care improved because Kaiser Permanente has invested in this system to provide early and advanced alerts to nurses and physicians about patients who are at increased risk of decompensation.”

169
PATIENTS
LIVES SAVED

Though AAM has proved an unqualified success, it does not replace clinical judgement. It relies on a multidisciplinary approach to save lives and help improve the care for the sickest members at Kaiser Permanente. With more than 169 lives saved thus far in implementation, early results are promising.



AAM Expansion Through 21 Medical Centers

ENHANCED RECOVERY

Transforming Surgical and Medical Care for Patients Across the Continuum

By Pearl Paras, MPH, BSN, RN, CNOR, CPHQ, clinical practice consultant, Enhanced Recovery mentor
Shirley S. Paulson, DNP, MA, RN, NEA-BC, regional director Clinical Adult Services

Kaiser Permanente Northern California’s Enhanced Recovery (formerly ERAS, Enhanced Recovery After Surgery) is a comprehensive post-operative recovery improvement protocol. This program – the only one in existence – improves surgical outcomes, reducing risk of harm to the patient by as much as 45 percent.

Streamlining Processes, Improving Outcomes

The Enhanced Recovery program reduces mortality rates, post-operative complications, and the use of opioid painkillers, while improving patients’ rate of recovery. From its inception in 2014, the program has grown from 2 pilot programs to include 90 percent of all Kaiser Permanente Northern California inpatient surgeries in 2017, tripling non-OB volume to more than 65,000 cases per year.

The program has consolidated recovery-related practices before, during, and after surgery into a “common pathway” for optimal post-operative recovery. The pathway focuses on practices such as pre-operative carbohydrates, multimodal analgesia rather than opioids, early nutrition and ambulation, and patient education. Each of these key elements support faster recovery, improved pain management, and patient satisfaction.

A Collaborative Effort

In 2014, the Enhanced Recovery team, led by Derrick Lee, MD, initiated an effort to streamline processes and improve post-operative outcomes. This team designed surgical pathways for 2 common procedures (hip fractures and colorectal). They

consolidated practices, combining them into a “common pathway” for optimal recovery.

The pilot was implemented at Kaiser Permanente Roseville and San Jose Medical Center. Then, in 2015 the pilot’s success prompted expansion to all total joint procedures. This was followed by C-sections, complex urological, gynecological-oncological, and thoracic procedures in 2016. By 2017, mortality rates had dropped, post-operative complications declined by 17 percent, opioid painkiller use decreased, and recovery time improved.

Over the past two years, the Enhanced Recovery team has partnered with subject matter experts from across nearly all medical specialties to consolidate best practices into a common pathway for surgical care. The common pathway was successfully piloted at Kaiser Permanente South Sacramento and Fresno Medical Centers. Today, 90 percent of all inpatient surgeries leverage the evidence-based benefits of the Enhanced Recovery program.

Outpatient Expansion

With the program’s success for inpatient surgeries, November 2018 also saw the expansion of Enhanced Recovery to Outpatient Surgical Services. This is the largest expansion to date, more than doubling the number of patients experiencing the program’s benefits. Implementing this significant milestone required examination of workflows, staff problem solving, and modifications to integrate an even more streamlined process.

Collaboration by outpatient nurses, staff, and leadership was also critical to the success of Enhanced Recovery. Special recognition goes out to program mentors Christina Keny, MHA, BSN, RN, and Pearl Paras, MPH, BSN, RN, for being the “boots on the ground” to support our outpatient physicians and nurses to make this expansion so successful.



Santa Rosa Medical Center interprofessional team members consult with a patient in intensive care.

Next Steps for 2019

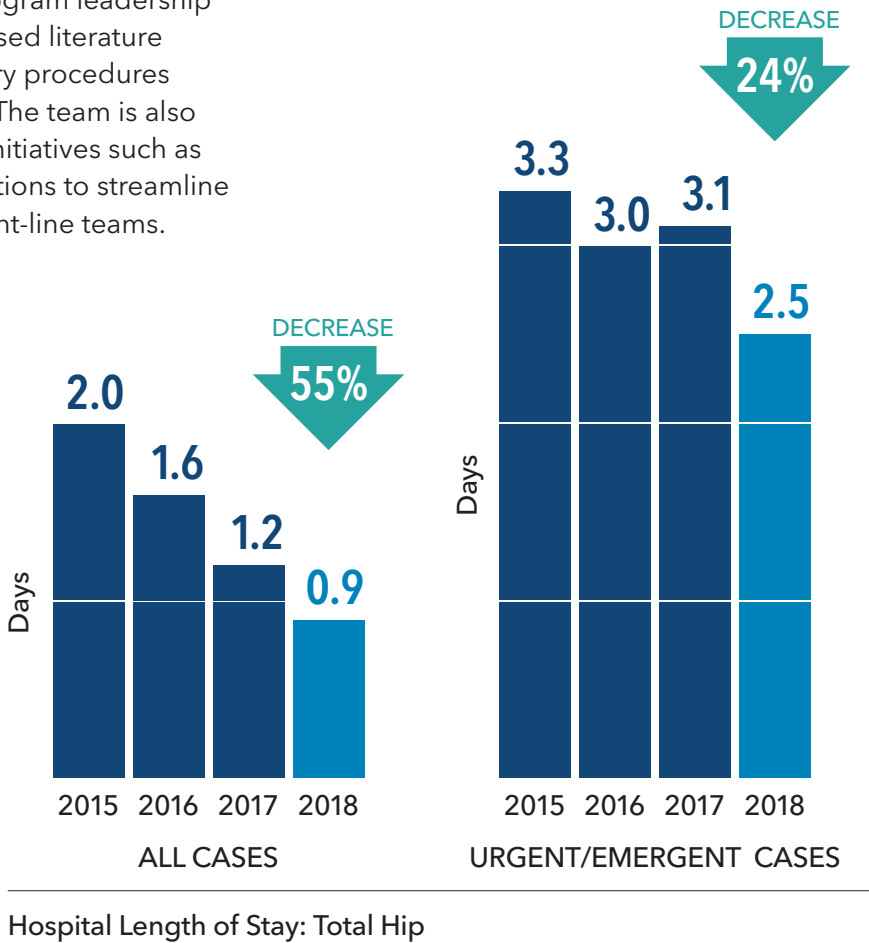
In 2019 the Enhanced Recovery program will expand to the hospitalized medical population. The program leadership team is actively researching evidence-based literature as it enters a realm of pioneering recovery procedures that are leading the industry worldwide. The team is also coordinating with other hospital-based initiatives such as Delirium, Mobility and Surgical Site Infections to streamline implementation and sustainability for front-line teams.

ENHANCED RECOVERY OUTCOMES

We measure many facets of how Enhanced Recovery improves outcomes. In this example, Enhanced Recovery principles reduced length of stay for Total Hip patients. Enhanced Recovery also reduces opioid use and post-operative complications.

Year	Length of Stay (Days)
2015	2.0
2016	1.6
2017	1.2
2018	0.9

DECREASE 55%



IMPROVING PATIENT SATISFACTION

A Staff-Led Approach to Advancing Care in the Emergency Department

By Patrick Lamb, MSN, RN, emergency department director Manteca Medical Center

Emergency departments are challenged to adapt to overcrowding by creating or moving services to alternative spaces while maintaining focus on the patient. The Kaiser Permanente Manteca Emergency Department has met this challenge. As a small community-based emergency department, resources are managed strategically to treat approximately 39,000 patient visits annually.



Identifying the Potential

The foundation of providing an excellent patient experience starts with focusing on what is in our circle of control. In Manteca’s Emergency Department (ED), attempting to control the space and patient census seemed monumental, but using creative problem solving to design nimble workflows felt achievable. The challenge we needed to solve was to facilitate immediate care to lower-acuity patients without stressing resources for the acutely ill.

The Central Valley ED management team challenged staff to identify opportunities to improve the patient care experience by addressing our increasing census and space constraint. Working collaboratively, staff proposed we focus efforts more strategically on our lower acuity patient population, and redesign workflows based on throughput and improved patient communication.

An Interdisciplinary Effort

An interdisciplinary care team proposed creating a nursing role tasked with overseeing the lower acuity patient population. This individual would greet each patient upon presentation in the lobby

“It is a wonderful idea that enhances the flow of the department and assists with excellent patient care by allowing early physician contact with patients.”

—Kassandra Cooper, MD
Manteca Medical Center

and, in partnership with the pre-assigned provider, initiate a treatment plan long before the patient was assigned a room. Introducing this parallel process of assessment and treatment required scripted communication and numerous updates throughout the patient’s stay. Nurses would remain engaged by rounding throughout the waiting area and frequently updating patients and their families until either the



Mandy Serrano, RN, staff nurse II, and Marta Madrid, LVN, licensed vocational nurse, discuss the plan of care for patients in the emergency department at Manteca Medical Center.

patient was placed into a room for continued care or discharged by the care team. Once the strategy was implemented, patients began reporting a decrease in their overall length of stay.

Building a successful new process required review of workflows related to arrival, initiation of care, and discharge. Each step was evaluated to determine whether it was patient-centered and added value. Staff were immediately motivated to contribute to this process improvement because it directly reflected their efforts in care delivery. As a result, they were able to reorganize the utilization of patient rooms and identify additional adjacent spaces to support rapid turnover of low-acuity patients during the assessment and discharge process.

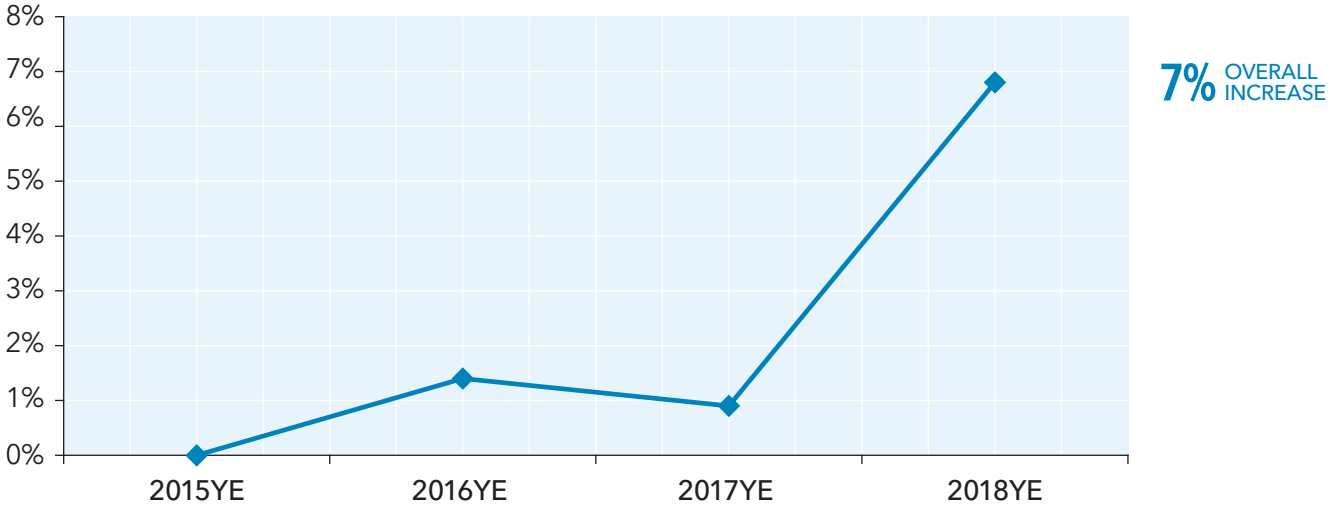
By design, the system supports placing the provider in front of the patient as soon as possible, so that all orders may be submitted at the onset of the encounter. Patients are moved intermittently in and out of rooms during the interview, assessment, and re-evaluation phases of the visit, while the team continues to build momentum for discharge.

“I love the Care Boards. I use them to write updates for patients so they know what’s scheduled next in their care”.

—Jennilyn Abella, RN, staff nurse II
Manteca Medical Center

Improving Provider-Patient Communication

Additional efforts were taken to increase communication during this improvement process. Nurse Knowledge Exchange and Patient Care Boards were implemented to provide



Change in percent of patients who rate staff excellent in courtesy and helpfulness

everyone involved in a patient’s experience with comprehensive details of their visit. Both bedside tools support communication for all acuity levels by guaranteeing the care team is properly introduced to patients and their families. Care Boards further enrich communication by identifying associated risks (such as allergies and falls) along with expected next steps in the care plan. This information is meant to be real time, interactive, and continually updated depending on the progression of the patient.

While addressing capacity challenges in Manteca, the staff also positively impacted Member

Patient Satisfaction (MPS) scores. In 2018, the MPS performance in percent of patients who rated staff excellent in courtesy and helpfulness has increased significantly, from 56.0 at year-end 2017 to 61.0 at year-end 2018. Staff rose to our challenges and led changes by identifying and improving parts of the patient care experience they were able to control. Working together, they applied process improvement principles to address unique space challenges, reexamined throughput workflows, and enhanced communication throughout patient experience.



Members of the Manteca Medical Center Emergency Department team.

Vicky Locey's National Award

By Lynn Mundell, managing editor insideKP Northern California

Vicky Locey, MSN, MBA, RN, NEA-BC shares her knowledge from decades of nursing and her role as one of the executives in charge at the Kaiser Permanente Santa Rosa Medical Center during the North Bay Fires.

It's been over a year since devastating fires tore through Santa Rosa and surrounding counties, causing \$14.5 billion in damages, burning more than 210,000 acres, and killing 44 people. Within Kaiser Permanente, the impact was felt by employees and physicians who lost homes and saw the evacuation of facilities, including the Santa Rosa Medical Center.

One of the people key to managing the emergency at the medical center was Vicky Locey, RN, chief operating officer and chief nursing executive. She was honored for that work with Kaiser Permanente's 2018 Outstanding Nursing Leadership Achievement Award for Northern California. Today, hear from Locey, including her advice on how to be an effective leader.

Tell us about your nursing career.

I have been a nurse for 35 years, with 28 of those at Kaiser Permanente. I worked full time while earning my bachelor's in Nursing, a master's in Nursing Administration, a master's in Business Administration, and I am currently applying for a doctorate in Nursing Practice. I have a passion for learning. That is one of the things I love about nursing: There is always something to learn and to be better at.

Your award is for 'transformational leadership.' What did that look like in October 2017?

I've been in the chief nursing executive role since 2005 and the chief operating officer role since 2011, so I felt solid. That morning of the fires I couldn't get to the hospital from my home in Windsor, so I worked remotely until the roads were unblocked. What really helped was that I always surround myself with strong leaders by matching the right person with the right job. I build a team I know can get us through anything – and on Oct. 9, 2017 they did.

Transformational Leadership

"It's important to be a good listener. Everything flows from that. Visibility and consistency in leadership is essential. Be open, honest, and transparent. I believe in making people feel good about themselves and their contributions."

Vicky Locey, MSN, MBA, RN, NEA-BC
Chief Operating Officer/Chief Nurse Executive, Santa Rosa Medical Center



Vicky Locey, MSN, MBA, RN, NEA-BC accepts Kaiser Permanente's 2018 Outstanding Nursing Leadership Achievement Award for Northern California.

What was it like during the ensuing days?

The Santa Rosa Medical Center has a strong practice around disaster preparedness. All the drilling built that emergency muscle memory we needed. I got to the hospital at 4 p.m. that day and from there on worked relentlessly until we reopened the hospital. Even when staff and physicians knew their own homes were burning, they focused on caregiving and how they could make a difference for our community, including volunteering at local shelters. No one asked them to do that. They just did. We also received incredible support from throughout Kaiser Permanente.

What was particularly challenging?

The fires kept popping up in new areas, so you didn't feel that the disaster was really ending. At one point I suddenly needed to evacuate my home in Windsor. Another challenge was reopening the hospital. When you open a new hospital, you have

“That is one of the things I love about nursing: There is always something to learn and to be better at.”

— Vicky Locey, MSN, MBA, RN, NEA-BC
Santa Rosa Medical Center

maybe 6 months to stock and prepare. We were essentially undertaking a hospital opening – due to the amount of cleaning and restocking required – in 2 weeks.

The human piece of the disaster was also very complex. People have different responses to trauma. Some were very self-contained; others didn't want to leave work because it was their safe place. I honored all the differences.

What is it like today?

I definitely feel that our connections and relationships are stronger. More than a year later, we are more patient with one another, more understanding, and more inquisitive about whether others are okay or what they might need. We take it a day at a time. We have a Resiliency Team that has been a tremendous support to our medical center. I know that Kaiser Permanente Santa Rosa can get through anything together. I am amazed at the strength and professionalism of our medical center.

What's your best advice for other leaders?

I like to recognize individuals and act accordingly. Some people want a big, public thank you. Others just like a handwritten card. Visibility and consistency in leadership is essential. Be open, honest, and transparent. If someone needs an answer and I don't have it, I will get it for them or we will figure it out together.

ANITA ZUNIGA, MSN, RN, CENP

Anita Zuniga's Retirement

By Jim N. D'Alfonso, DNP, RN, NEA-BC, FNAP, executive director professional practice, leadership development, research, and Nurse Scholars Academy

After 21 years of commitment and dedication to Kaiser Permanente, Anita Zuniga, executive director of hospital operations, retired February 4, 2019. During her tenure at Kaiser Permanente and throughout her career in health care, Zuniga has served with distinction in a variety of leadership roles.

Zuniga was promoted to several regional roles beginning in 2003, including executive director for Regional Patient Care Service (PCS), followed by vice president and chief nurse executive (CNE) for Regional PCS in 2010. In 2015, she transitioned to chief operating officer for Kaiser Oakland Medical Center before returning to Region.

A San Francisco native, Zuniga began her career at St. Luke's Hospital, where she received her diploma of nursing. She continued her education, completing a BSN at California State University Long Beach and then an MSN at San Francisco State University. Zuniga's passion and dedication to nursing supported her steady progression from student to surgical staff nurse, and carried her all the way to vice president of Patient Care at St. Luke's. Her leadership journey took her to Merrithew Memorial Hospital in Martinez as chief nursing officer (CNO) in 1993, and then Kaiser Permanente as CNO for Walnut Creek and Vallejo Medical Centers in 1997.

As regional chief nurse executive for NCAL PCS for over 12 years, Zuniga championed numerous advancements in nursing professional practice, clinical care, and technology integration. She pioneered a major shift in nursing philosophy and practice through the region wide adoption of Caring Science in 2008, followed by the introduction of HeartMath programs and the establishment of Kaiser Permanente's annual Caritas Consortium. To this day, Kaiser Permanente Northern California remains the world's largest Caring Science Affiliate system.



Of her many accomplishments, one of Zuniga's fondest memories includes enjoying the many stories of compassionate care shared by direct care nurses during the 52 forums she led in partnership with Tim Porter-O'Grady in 2013-2014.

An inspirational role model and mentor to many, Zuniga was honored with the David Lawrence Patient Safety Award 3 times for her work on reducing hospital-acquired infections and the development of Kaiser Permanente's High Alert Medication Program. As a certified nurse executive, she served on the board for the Association of California Nurse Leaders (ACNL) and was president and board member of the East Bay Association of California Nurse Leaders. Her most treasured accolades include the Daisy Award she received from the Northern California Regional Chief Nurse Executives Peer Group, an honorary Caritas Coach certificate conferred by Dr. Jean Watson, and the ACNL "Excellence in Leadership – North" award in 2014.

Zuniga's retirement plans include working with her local church's social justice programs, spending more time with family, taking her dog Bentley to obedience school, and enjoying an occasional cruise to a faraway destination. Please join us in wishing her happy sailing and in extending our heartfelt gratitude for her many contributions to Kaiser Permanente Nursing and patient care in Northern California.

In Memoriam: Celia A. Ryan, MSHA, RN, CPHQ

By Jim N. D'Alfonso, DNP, RN, NEA-BC, FNAP, executive director professional practice, leadership development, research, and Nurse Scholars Academy

On December 22, 2018 friends and colleagues in Kaiser Permanente NCAL learned of the untimely passing of Celia Ryan following a brief illness. Ryan joined Kaiser Permanente in 2002 and held a variety of positions including quality director, assistant administrator of Quality and Service, chief compliance officer, and area quality leader for Kaiser Permanente Fresno. In 2015 she transitioned to Northern California regional offices as executive director of Regional Risk Management and Patient Safety.

Ryan earned a bachelor's degree in nursing from University of Cincinnati College of Nursing and Health and a master's of science in Health Care Administration from Virginia Commonwealth University. She began her nursing career at University of Cincinnati Medical Center in 1980 as a staff and charge nurse. She then became nurse manager at University of Michigan Medical Center in 1983 and a clinical supervisor at Veterans Administration Medical Center in Pittsburgh, Pennsylvania in 1991. In 1993 Ryan joined St. Elizabeth's Hospital Medical Center in Youngstown, Ohio, where she served as a nurse manager, quality manager, performance improvement and support services manager, and a critical care staff nurse before moving to California.

The consummate patient safety leader for Kaiser Permanente, Ryan's leadership of the infection control program resulted in world-class performance in C-Diff prevention, operating room patient safety, and led to a paradigm shift in maternal child patient safety. Her many accomplishments included leading teams and projects that resulted in awards from The Joint Commission, *U.S. News & World Report*, American



Heart Association, the Hospital Council of Northern and Central California, and The Leapfrog Group.

Ryan partnered eloquently with physicians and through those partnerships created the first and only Behavioral Peer Review scoring system for peer review. Stephen Parodi, MD, executive director for The Permanente Medical Group summed up the sentiments of a grieving regional team by saying, "Celia's indomitable spirit and laser focus on doing what was right for patients and for each other created a culture of safety that has spread throughout Kaiser Permanente Northern California. Countless lives were saved during her watch, and her spirit lives on because the teams she built will continue to save countless more. We are lucky to have had Celia as a leader, a nurse, a confidant, and a friend."

So many tributes remember Ryan as a remarkable, loving, compassionate, tenacious, and dedicated nurse executive leader committed to making Kaiser Permanente a better place to work and receive care. She will be deeply missed by all who came to know and work with her during her tenure with us. Our heartfelt condolences go to her family and brother Joe, who is a nurse at Kaiser Permanente Santa Clara.

Pipeline, Onboarding, and Succession Planning

By Priscilla S. Jarved, DNP, RN, FACHE, regional director nursing professional practice

Kaiser Permanente Northern California Nursing continues to prioritize key programs that advance our current and future nursing leadership workforce. These programs span across the spectrum of leadership, from initial orientation and onboarding of our front-line managers, to the development of our next chief nurse executives.

New Nurse Leader Orientation (NNLO)

New Nurse Leader Orientation launched as a new Northern California initiative in July 2018. Since that time, more than 489 nurse leaders have attended the program. The orientation is a 3-day standardized program that examines key competencies of nursing leadership at Kaiser Permanente.

Effective September 2018, all new Northern California nurse leaders attend New Nurse Leader Orientation as part of their 60-day onboarding requirements. In addition, all existing nurse leaders across Northern California will have attended the program so they are able to gain a common knowledge base and awareness of the content that future nurse leaders will receive. By the end of next summer, all existing nurse leaders will have attended NNLO.

Nurse Executive Fellowship Program

The Nurse Executive Fellowship program is designed to support aspiring nurse leaders to develop competency and prepare for future nurse executive roles within Kaiser Permanente. In 2018, 2 candidates were successfully promoted into executive positions at the Redwood City and Oakland medical centers.

NNLO CURRICULUM OVERVIEW

Day 1

Mission and Alignment
The KP Model
Patient Safety
Avoiding Harm
Just Culture
Environmental Safety

Day 2

Foundational Finance
Patient Assignments
Scheduling and Staffing
Budgeting and Variance
Variance Analysis Simulation

Day 3

Leading in a Labor Environment
Board of Registered Nursing (BRN) Reporting
Care Experience
Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)
Caring Science and Culture

“Retention of Assistant Nurse Managers is increasing since the launch of NNLO. It’s important work.”

— Meghan Kietly-Swinford, MSN, RN, NEA-BC, Regional Patient Care Services



Nurse leaders gather at the New Nurse Leadership Orientation held September 25–27, 2018, in San Ramon.

Amy Young, RN, BSN, MBA
Chief Nursing Executive
Kaiser Permanente Redwood City

“The Nurse Executive Fellowship program was an extraordinary pathway into the Chief Nursing Executive role. It allowed for structured executive learning with curriculum and hands-on, hospital-to-hospital experiences. The ability to learn and experience our hospital operations and practices across Northern California provided real-time scenario opportunities in conjunction with the coursework. I embraced my executive development and have integrated it into my daily operations as a nurse executive at Kaiser Permanente Redwood City.”

Romoanetia L. Lofton, DNP, MBA, RN, NE-BC
Associate Chief Nurse Executive
Kaiser Permanente Oakland

“My experience as a Nurse Executive Fellow was life-changing and an invaluable contribution to my career. The fellowship provided exposure and experience to a variety of leadership situations while offering support and guidance from a skilled mentor and executive coach. During my fellowship I had the opportunity to encounter the culture and leadership in 4 different medical centers. These experiences all contributed to my growth as a nurse executive. Participating in the fellowship adequately prepared me for my leadership role and I will forever be grateful.”

Leadership for Executive Advancement and Development Program (LEAD)

The LEAD program is a 12-month leadership preparation and development program that accommodates 15 to 20 selected candidates within

the cohort. The program has been designed using American Organization of Nurse Executive (AONE) and American College of Healthcare Executive (ACHE) competencies along with insights from 2 trusted organizations that acknowledge commitment to excellence in health care and nursing: Baldrige Performance Excellence Program and the American Nurses Credentialing Center.

Participants in the LEAD program are assigned one competency for self-study each month. To guide development, the book *FYI: For Your Improvement – Competencies Development Guide* is referenced along with assessment results. Initial assessments include Myers-Briggs personality types and the 360° Leadership Circle Profile. The AONE Nurse Executive Self-Assessment is offered to nurse leader candidates after 6 months in the program.

Cohort candidate resources also include experiential activities within 6 learning labs, an executive mentor who helps facilitate their growth, and development coaches who translate assessment results into actionable individual development plans. The LEAD mentee/mentor relationship is built around open, honest communication that nurtures personal and professional growth. It is a mentee-driven, mentor-guided process that is private, focused, and transparent.

Currently, the LEAD program has 14 selected participants: 6 from Patient Care Services, 6 from Continuum of Care, and 2 from Risk, Quality, and Patient Safety.

A LEGACY OF NURSING EXCELLENCE

“At the heart of Kaiser Permanente’s legacy is a nearly 75-year commitment to high-quality, affordable care delivery for our members and the communities we serve. Today nurses, physicians, and employees work in teams across our integrated health system as they transform care delivery through innovation and implementation of evidence-based practices. Our world-class reputation reflects the passionate and dedicated people of Kaiser Permanente.”

Janet A. Liang
President, Northern California Region



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