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Message from the Vice President and Chief Nursing Officer

We did it!

Our official Nursing Annual Report is here to celebrate a remarkable year with a truly remarkable team. Yes, I said it, a remarkable year! It was also a tough, challenging year, but never-the-less, one with numerous accomplishments to be acknowledged and celebrated. How could we forget our second Magnet designation in September? And, did I mention we are a Top 10 Vizient Academic Center 3 years in a row? Being ranked No. 5 is a tremendous achievement that most institutions will never attain.

It takes a dedicated, highly skilled team to continue to improve during the toughest of times. We showed improvements in all nurse-sensitive areas such as CAUTIs, CLABSIs, HAPIs and falls. Our employee and physician engagement scores also improved over FY19 as we continued to care for the most acutely ill patients with quality, compassion and commitment. Your dedication is visible throughout our facility and in your endless contributions to transform the lives of our patients.

I feel extremely fortunate to be a part of this remarkable team. You exemplify the Memorial Hermann vision every day by compassionately caring for our patients and pursuing lifelong learning to advance the practice of nursing. I look forward to our continued success as we work together to take care of our patients and each other in the coming year.

Sincerely,

Toni Von Wenckstern



Toni Von Wenckstern, MS, RNVice President and Chief Nursing Officer
Memorial Hermann-Texas Medical Center

Memorial Hermann-Texas Medical Center Professional Nursing Practice

Nursing Mission

Unparalleled Excellence: Partnering with patients and families, our communities, and each other to advance health.

Nursing Vision

Superior Nursing: Improving health, offering hope and transforming lives.

Memorial Hermann-TMC's Nursing Professional Prac-

tice Model (PPM) is a conceptual framework for nursing care and interprofessional partnership, which aligns with the vision, values and philosophy of Memorial Hermann Health System. The PPM structure defines how we perform nursing excellence by putting patients first. Placing Patient-Centered Care at the top of our model illustrates the safety and wellbeing of our patients is always held as the highest priority. Memorial Hermann-TMC's professional nurses keep that tenet intact as the primary link to the patient. Nurses serve as the pillars of patient-centered care in their role as clinicians, advocates, innovators, collaborators, teachers and leaders.

Nurses as Clinicians

The professional nurse must demonstrate the clinical knowledge and technical skills necessary to understand the total situation and employ the nursing process.

Nurses as Advocates

Nurses must serve as advocates for our patients and best represent the concerns, fears and goals of patients and their families.

Nurses as Innovators

Nurses must continually question and evaluate nursing practices to optimize outcomes.

Nurses as Collaborators

Nurses must work with others in a way that promotes and encourages each person's contributions toward achieving goals that are both optimal and realistic. Collaboration requires involvement in intra- and interdisciplinary work with colleagues and the community.

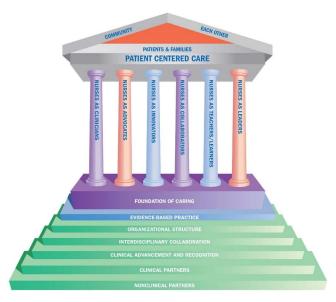
Nurses as Teachers

Nurses must have the ability to facilitate self, staff, patient and family learning.

Nurses as Leaders

Nurses are leaders who have the authority to use nursing knowledge, standards of care, skills and assessment to promote a safe healing environment for our patients. They have the accountability to accept responsibility for their actions and resulting outcomes, and the autonomy to make decisions based upon standards of practice to improve safety, quality outcomes and patient satisfaction.

FY19 Professional Practice Model



*Currently under revision



Facility Nursing Strategic Plan

Memorial Hermann-TMC

The Nursing strategic plan looks to the future by creating nursing goals for a 3-year period, reflecting the Memorial Hermann-TMC mission, vision, and values while aligning with organizational priorities. The following summary highlights areas of strengths and continued opportunities at the close of the 2017-2020 strategic plan.

Strengths with goals met:

- Support leaders and clinicians in community outreach events to improve population health
- Support nursing education initiatives within the community
- Enhance strategic partnerships with our local nursing program leaders
- Continue with staffing /hiring methodology to support maintenance of BSN rate at 80%
- Increase certification rates by 50 newly certified nurses each year
- Establish TMC leaders on systemwide Care Redesign workgroups
- Engage all clinical nurse managers and leaders in MDDR processes across campus
- Enhance manager and frontline leadership development opportunities
- Support for increase in nurse-led or co-led research

- Encourage and support nurses in presenting posters, speaking at conferences and publishing
- Formalize and hardwire the RN-to-RN peer feedback process across campus at all levels of nursing
- Annually assure the nursing professional practice model reflects our professional standards of practice

Opportunities with goals partially met:

• Develop dashboard for nursing practice that reflects the nurse-sensitive indicators

Continued opportunities with goals not met:

- Reorganize Shared Governance Model to support a more robust Translation of Evidence to Practice
- Formalize a process for assuring specialty standards and guidelines are integrated and current
- Establish a campuswide approach to ensure a proactive assessment of nursing error prevention and management



Transformational Leadership

Transformational Leaders empower nurses to be innovative, accountable, collaborative, compassionate and results-oriented by advocating for resources, enhancing partnerships and achieving positive outcomes.

Strategic Structural Changes

The Sarofim Pavilion opened for patient care in February 2020. The pavilion's opening represents a structural change to the footprint of our campus. Nursing provided valuable input for strategic design, staffing and other decisions to prepare for the new building. Teams of stakeholders outlined Critical to Quality (CTQ) metrics that were important to each team. Nursing, frontline staff, affiliated physicians and nursing leaders collaborated to create targeted action plans and solutions to impact the identified CTQ metrics.

- The Emergency Center held weekly multidisciplinary meetings for action items submitted by staff and affiliated physicians. Staff engaged to help design rooms for supplies, equipment and patient locations. In addition, they created a staffing model and patient flow based on patient demand. The Emergency Center used multiple tours for staff feedback, education on processes, routes, room setup, and move-planning details. These coordinated efforts leading up to the move allowed the move itself to be completed safely and efficiently.
- The Operating Room team gained the input of staff delivering and participating in patient care to strategically plan for their new locations of operating rooms, specimen handling and sterile processing workflow. Strategically

- coordinated efforts for renumbering of OR rooms and phones, moving to the new location without service interruption and collaboration with Children's Memorial Hermann Hospital OR resulted in a successful transition while maintaining metric goals for efficiency.
- The Trauma Service Line gained direct feedback from nursing and frontline staff to create and validate staff's new workflow, visitor management, and patient room layout. Staff participated in situational simulations to identify additional needs, flow and line of sight for assignment locations. Unit staff mapped out equipment locations, completed room readiness audits, orientation and dry runs prior to the move. The Trauma Service Line successfully moved 95 patients within a single day and continued receiving staff feedback to modify and improve processes in the new pavilion.
- HVI coordinated decisions on monitoring processes and equipment needed to function as a high-acuity heart failure unit. When the pandemic hit, the Sarofim Heart ICU team expanded the adult ECMO program from 8 to 16 patients by training additional ECMO nurses. Once in the new pavilion, leaders and staff collaborated in a rapid cycle Plan-Do-Study-Act (PDSA) to improve environmental challenges.

Manager- and Director-Led Initiatives

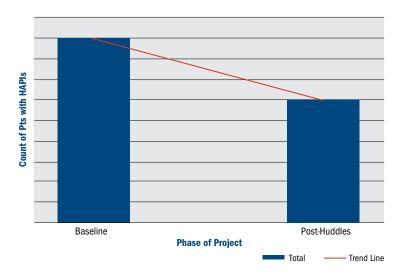
- Common Cause Analysis (CCA) created a structure to help bridge gaps between the input of variances and getting feedback to frontline staff. This gap in feedback is associated with poor identification of opportunities to prevent the reoccurrence of these events. The Emergency Center Director, Angela Steen, MSN, RN, partnered with Caitlin McVey, MBA, RN, and the Memorial Hermann-TMC Quality and Risk Departments to outline a structure for a unit-based Quality and Safety Review Program in the Emergency Center. Nursing Unit Practice Council (UPC) members were selected to receive Common Cause Analysis training. As part of a standardized review process, the Nurse Manager discusses the event with staff directly involved using the "Five Why's" method to determine the individual reasons why an event occurred. Event investigations are de-identified and presented at a monthly Nursing Quality and Safety Review Meetings for discussion of system concerns and process barriers. These meetings are open to all unit staff and led by the UPC chair with support of the Nurse Manager. The trained UPC members collect notes from the meeting for CCA data entry and analysis. The data was analyzed and presented to the Emergency Center staff who selected an area of focus as one of their FY20 unit goals.
- Hospital Acquired Pressure Injuries (HAPIs) in the Medical ICU (MICU) (see graph below) reported on monthly Pressure Ulcer

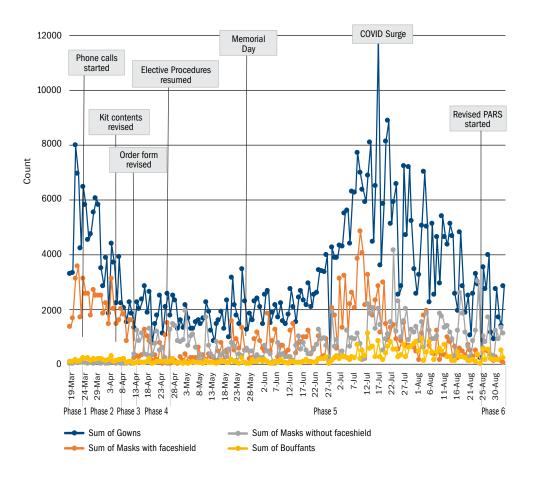
Prevalence reports increased in both count, as well as, the proportion of patients with HAPIs, in the Medical ICU (MICU). Elizabeth Mitchell, MBA, RN, and Courtney Holwerda, BSN, RN, worked with the MICU team to understand the cause and investigate solutions. The team developed and implemented huddles to discuss patients with HAPIs identified during the campus' monthly prevalence study. Huddles were structured around current Memorial Hermann Health System pressure injury prevention bundles and utilized the "5 Why's" to narrow down the causes. Staff who cared for patients in the 3 days before the prevalence study participated in huddles with any identified HAPIs. Information gathered was mapped, possible causes identified, and solutions were suggested by staff. The team selected targeted solutions to implement, placed items into an action plan with specific owners and reviewed the action plan for updates and completion as needed.

Through ongoing staff huddles, identification of possible causes and implementation of targeted solutions, there was a 36% decrease in the number of HAPIs in MICU when comparing FY19 Quarters 1-3 to FY20 Quarters 1-3. The proportion of patients in MICU with HAPIs identified during monthly prevalence studies has been reduced by 4.88%. The team continues their efforts and is working to implement large-scale solutions for further reductions.

HAPIs Identified on Prevalence Surveys in the MICU

Count of Patients with HAPIs in the MICU





Personal Protective Equipment (PPE) (see graph above) allocation kits were created in response to an increase in demand and unpredictable supply volumes at the beginning of the COVID-19 pandemic. A multidisciplinary team, including Caitlin McVey, MBA, RN, Shawna Albers, BSN, RN, Shannon Bednarczyk, RN, Greg Carrisalez, BSN, RN, Teresa Fleharty, MSN, RN, Courtney Holwerda, BSN, RN, Mechelle Jenkins, MSN, RN, Elizabeth Mitchell, MPA, RN, Elizabeth Moore, BSN, RN, Maura Ryan, MSN, RN, Sandra Young, MSN, RN, Brian Lee, MBA, Judy Harrelson, BA, and Jean McBride, Master Black Belt, developed a process to assist with the continued availability of PPE for staff in the midst of the pandemic An estimated amount of gowns, surgical masks, bouffants and face shields for isolation patients in all acuity levels were used to predict 24-hour utilization. Standardized PPE allocation kits specific to type of isolation and level of care, along

with an ordering system were created. The ordering system and kits were piloted in multiple units, revised using staff feedback and expanded across campus. Unit managers monitored supplies on nursing units and facilitated returns of excess items.

The overall daily average gown and mask utilization decreased 60.9% and 47.5%, respectively, from initial amounts. Trends in PPE utilization mirrored COVID-19 patient volumes, assisting in monitoring campus capabilities and capacity.

• The Surgical PPE Task Force formed to ensure safety of frontline staff caring for COVID-19 patients by 1) requiring a systematic approach for donning and doffing; 2) validating compliance with PPE protocols; 3) supporting staff during donning and doffing; and 4) offering guidance, answering questions and reporting risks. Rosemary Pine, PhD, RN, Mary Margaret Evans, MSN, RN, Etta Hodge, MBA, RN, Sharlet McGowen, MSN, RN,

Javier Donaghy, MSN, RN, Daphny Peneza, MSN, RN, Elizabeth Mitchell, MSN, RN, Yolanda Hunt, and Mechele Jenkins MSN, RN, collaborated to complete a literature review, and gain feedback from frontline staff and management to develop the process.

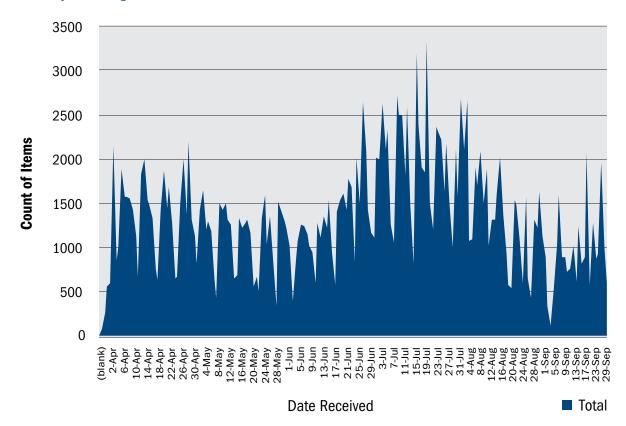
Each member of the PPE Surgical Services
Task Force attended a 2-hour class in which
donning and doffing guidelines were
reviewed and competency was verified by
the education and infection prevention team.
Data was collected on compliance with
donning and doffing, staff satisfaction,
competence and confidence. Positive data
outcomes supports the effectiveness of just in
time support and training during a pandemic.

• The N95 Reprocessing Center (see graph below) was implemented as a strategy to further prolong the N95 mask inventory. Caitlin McVey, MBA, RN, Courtney Holwerda, BSN, RN, Elizabeth Mitchell, MPA, RN, and Elizabeth Moore, BSN, RN, partnered with Luis Ostrosky, MD,

Lance Ferguson, MHA, Kelley Boston, MPA, Mindy Warren, BSN, Stanley Rhone, MBA, Judy Harrelson, BA, and colleagues at McGovern Medical School at The University of Texas Health Science Center at Houston (UTHealth) to implement processes based on evidence-based practices. Vaporized Hydrogen Peroxide for decontamination was validated, and a high reliability process to inspect, track and store N95 masks for re-distribution was created. The team worked to coordinate the logistics of mask collection and delivery to the Reprocessing Center.

The N95 Reprocessing team successfully reprocessed more than 230,000 items, including N95 masks, face shields and goggles, from over 50 clinical sites in just under 6 months. Implementation of this strategy extended the supply of N95 masks beyond initial projections and ensured bedside staff had access to a safe, effective critical piece of PPE.

N95 Reprocessing Center Volumes



7

Exemplary Professional Practice

Strive to promote exemplary professional practice by collaborating with physicians, nurses, patients and communities to identify healthcare needs, using resources to deliver high-quality patient care and achieve operational excellence while advancing health outcomes.

2020 - The Year of the Nurse

The nursing profession has a strong foundation, built on trust, compassion and science. Two hundred years after the birth of Florence Nightingale, the world is recognizing and celebrating nurses with the International Year of the Nurse. The Year of the Nurse represents a launching pad with global partnerships that positions nurses to grow in numbers, strengthen our knowledge and develop pathways for the future of Nursing.

Built on Watson's Theory of Nursing,
Memorial Hermann-TMC empowers our
nurses to generate change, reflecting trust
in nursing expertise and establishing
collaborative relationships. Nursing-led
initiatives advance direct patient care and
community initiatives, strengthen partnerships
and elevate the profession. Our nurses have
faced a global pandemic head-on, leading care
with innovative solutions and inspirational
perseverance. The demonstrated ability to
continuously pioneer, adapt and provide
compassionate care showcases nurses as
versatile leaders in healthcare.

WATSON'S 10 CARITAS		
Embrace	Deepen	
Inspire	Balance	
Trust	Co-Create	
Nurture	Minister	
Forgive	Be Open	

Multidisciplinary Discharge Rounds (MDDRs) Shared Governance Councils

Shared Governance Councils are an opportunity for frontline staff to share their voices in decision making between bedside and nurse leaders as it relates to patient care, resources and nursing practice to achieve quality care. Shared Governance provides a collaborative and inclusive forum for Memorial Hermann-TMC nurses to discuss and act upon key initiatives influencing nursing workflow.

Unit Practice Councils
Professional Nursing Practice Council
New Knowledge and Innovation
Professional Development
Quality Council
Recruitment, Retention and Recognition
Nursing Informatics
Ambulatory Council
Clinical Nurse Manager Council
Executive Nursing Council

Professional Nursing Advancement Program (PNAP)

The Memorial Hermann-TMC Nursing Professional Advancement Program fosters professional advancement directly for bedside nurses. It encourages bedside nurses to sustain, maintain, and advance their skills to proficiency and excellence. Our PNAP provides a framework for the promotion and recognition of excellence in nursing practice.

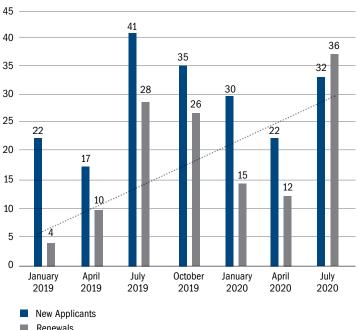
The PNAP Council continues to see an increase in the number of approved applications yearly since inception in 2017. During April 2020, PNAP new applications and renewals had a slight increase when compared to the same timeframe in 2019.

The Good Catch Committee

The Good Catch Committee started in FY16 as a way to investigate and improve our processes to reduce likelihood of error. A Good Catch is an event or situation that could have resulted in an adverse event (whether accident, injury or illness) but did NOT reach the patient whether by chance or through timely intervention. Our goal as a high reliability organization is to identify and prevent errors from occurring at all points of care delivery. In FY20, the Good Catch Committee remained dedicated to identifying and recognizing good catches across campus. Moving into FY21, the committee will be launching a housewide fishing-themed tournament-keep an eye out for the new committee mascot, Webby!

PNAP TMC STATS	TOTAL	%
PNAP RNs (denominator eligible RNs)	209/1667	12.5%
New PNAP RNs (denominator all PNAP RNs)	103/209	49.3%
Sustained PNAP participants after initial acceptance (denominator all PNAP RNs)	106/209	50.7%

PNAP DATA THROUGH APRIL 2020	TMC	%
PNAP Eligibility	1667	
Total # PNAP-P	100	6.00%
Total # PNAP-E	109	6.54%
Total # of PNAP	209	12.54%



Structural Empowerment

Create a positive culture of open and effective communication with collaborative members of the healthcare team. Facilitate quality patient care with education and empowering nurses to invest in personal and professional commitment to the organization and the community.

Nursing Certifications

Leadership encourages nurses to further their education within their specialty by obtaining nursing certifications. Memorial Hermann-TMC's certification rate has increased from 28.65% in 2019 to 28.91% in 2020. Reimbursement programs are available to support nurses to successfully attain certification, at no cost to the nurse. Below are Memorial Hermann-TMC's top nursing certifications.

Continuing Education (CE)

Memorial Hermann-TMC also provides educational advancement and professional development opportunities through continuing education resources. In FY20, 269.73 individual course CE and 243.11 series course CEs offered with 1,488 nurses participating. Through CE Direct, 147 nurses achieved 1,350.25 CEs.

Nursing Certifications	Total RNs Certified
CCRN®	172
RNC-NIC	90
CNOR®	59
CPN [®]	47
CVRN-Level I	47
RN-BC	28

Bachelor of Science in Nursing Rate

As a Magnet-recognized facility, it is important for Memorial Hermann-TMC to maintain a Bachelor of Science in Nursing degree or higher rate (BSN rate) of 80% or more. Since 2019, Memorial Hermann-TMC has increased their BSN rate from 87.4% to 89.87% in 2020.

Growing the Memorial Hermann-TMC/Children's Memorial Hermann Hospital Family

In FY20, 661 nurses were hired and trained. The Nurse Residency Program is a great option to onboarding experienced staff members and support the overall campus growth.

Nursing Classification	Number Hired
Newly Licensed Nurse or New Graduate Nurses	227
RN-I	18
RN-II	148
RN-III	165
RN-IV	72
Nurse Practitioners	6
RN Clinical Fellowship	5
RN Forensic nursing	3
RN Transplant Coordinator	10
RN Case Managers	7

Nurse Residency Program

The Nurse Residency Program at Memorial Hermann-TMC is a 12-month program designed to support nursing school graduates as they transition into their first professional nursing role. The Program consists of a series of work and learning experiences that emphasize and develop the clinical and leadership skills necessary for the advanced beginner nurse to become a successful part of the healthcare team.

The Nurse Residency Program at Memorial Hermann Health System is accredited by the Practice Transition Accreditation Program® (PTAP) and participates in the Vizient/AACN Nurse Residency Program™ curriculum, which utilizes Patricia Benner's well-known theoretical framework from her book From Novice to

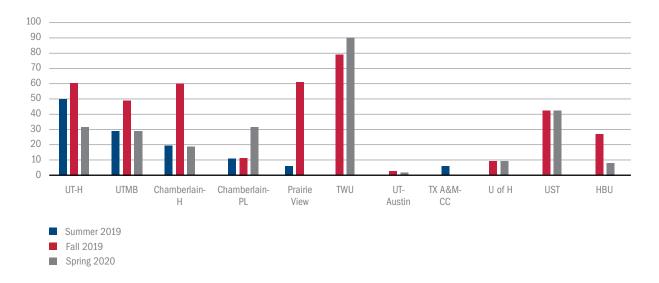
Expert: Excellence and Power in Clinical Nursing Practice. The Program includes an emphasis on:

Critical thinking
Patient safety and minimizing risk
Leadership
Communication
Evidence-based practice
Patient- and family-centered care
Professional development

Since its inception in 2010, our Program has graduated nearly 1,500 newly licensed nurses. New graduates bring fresh knowledge, ideas and energy to the practice environment, and embrace the culture of evidence-based practice by completing an evidence-based practice project.



Undergraduate Nursing Students at Memorial Hermann-TMC and Children's Memorial Hermann Hospital



Partnership with Nursing Schools

Memorial Hermann-TMC partners with our local nursing program leaders to host nursing students on campus. This partnership advances the student's clinical skills while promoting the New Grad Residency Program.

Nursing Conferences

Memorial Hermann-TMC supported nursing by funding staff attendance to 181 nursing conferences in FY20. Nursing represented Memorial Hermann-TMC through podium and poster presentations at numerous conferences last year. A few of these are highlighted below.

International Conferences:

- Improving Bedside Nursing Accuracy in Rhythm Interpretation Using Novel Teaching Strategies – Rosie Pine PhD, RN, NPD-BC, Aurora Greene MSN, RN, BC, Kim York BSN, RN, CCRN, and Mary Margaret Evans BSN, RN, CNOR, NPD-BC
- Stroke Templates, Trainee Education, and Chart Audits Improve Documentation and Quality Metrics - Randi Toumbs, DNP, MS, APRN, AGACNP-BC
- Anesthesia and Breastfeeding: Implementation of a Post-Anesthesia Care Breastfeeding Program – Kendra Folh MSN, RNC-OB, CPHQ, CSSBB, Kathryn Stephens BSPH, IBCLC, CSSBB

- Improved Clinical Care Progression through the Development of an Obstetric Milestone Pathway – Patricia Heale DNP, WHNP-BC
- Evaluation of Post-Discharge Callback Data from Stroke Patients and Caregivers – Frances S. Jaime BSN, RN-BC
- Role of Stroke Coordinators in Improving Post-Operative Nursing Care for Patients Undergoing Carotid Revascularization Procedures – Isabel Gonzales, MSN, APRN, AGACNP-BC, CNL; Sandi Shaw, BSN, RN; Mallory Lightford, MSN, APRN, NP-C; Randi Toumbs, DNP, MS, APRN, AGACNP-BC; Nicole Harrison, MBA, BSN, RN, NEA-BC; Farhaan Vahidy, PhD, MBBS, MP

National Conferences:

- Helipad Direct to Operating Room: Decreasing Time to Surgery for Trauma Patients Arriving via Air Transport - Caitlin McVey MBA, RN, CPHQ, LSSGB, Rebecca Crocker, Roger Leon
- Building a Self-Sustaining Nurse Fellowship Program - Caitlin McVey MBA, RN, CPHQ, LSSGB, Courtney Holwerda, BSN, RN, CCRN
- A Focus on Hands on Troubleshooting (HOT)
 Topics for Breastfeeding Terri Knudston-Faurot, Cathleen Carnaby, Louanne
 Wischer, Louanne Wischer, Edna Calais, Ashley Welscher

- Using Process Improvement to Reduce the Time from Cardiac Arrest to Emergent Bedside Surgical Intervention for Congenital Heart Patients – Danielle Salley
- CLABIS Reduction in the NICU Krysten Webber, Lauren Yager, Ann Kubanda, Sarah Milligan, Amir Khan, Eric Eborde, Misti Ellsworth, Maura Ryan, Kelly Eggers, Rebekah Wilkinson
- Memorial Hermann Stroke System Coordinators:
 Working as One Sandi Shaw
- Preemies Love Tacos: Our Journey to Keep Tiny Tots Toasty in the Golden Hour - Rebekah Wilkinson, Maura Ryan, Amir Khan
- Unplanned Extubations in the NICU Ronald Pucio, Amir Khan, Rebekah Wilkinson
- The WATCH Nurse: Defining the Essential Functions and Characteristics of a Pediatric Anticipatory Rapid Response Nurse – Heidi Gilroy, Danielle Salley, L. Hanning, K. Mattran, Alison Krawacki, and Leslie Schafer
- Best Practices for Increasing the Confidence of Novice Nurses During Medication Administration -Ardette Creeks, DNP, MSN-ED RN
- When a Longitudinal Study Becomes Trauma-Informed Care – Heidi Gilroy

Regional Conferences:

- Evaluation of Nursing Nutrition Screening Tool in the Memorial Hermann Health System – Jenny Lee, MS, RD, LD, CNSC
- Improving Enteral Medications Route Compliance
 Jennifer Rizzi, BSN, RN, CPN
- Reducing Utilization of Chest X-rays in the Cardiovascular Intensive Care Unit – Tonya Page, MSN, APRN, ACNP-BC
- Improvement in Alcohol Use Screening and Brief Intervention of Trauma Patients – Roger Leon, BSN, RN
- TMC Nurse Fellowship Program Courtney Holwerda, BSN, RN, CCRN and Caitlin McVey MBA, BSN, RN, CPHQ, LSSGB

- Development and Implementation of the Electronic Multidisciplinary Discharge Rounds Board in Women's Services – Kendra Folh, MSN, RNC-OB
- Central Line De-Clotting Optimization Caitlin McVey, MBA, BSN, RN, CPHQ, LSSGB and Matthew Jones, MBA, BSN, RN
- Thermoregulation in the Golden Hour Maura Ryan, MSN, RNC-NIC
- Reduction of Hospital Acquired Pressure Ulcers in the Medical ICU – Courtney Holwerda, BSN, RN, CCRN, and Elizabeth Mitchell MSN, RN

Nurse Retention Rates

Nursing retention and turnover reduction are an important area of focus for Memorial Hermann-TMC and Children's Memorial Hermann Hospital. Children's Memorial Hermann Hospital improved in this area by reducing RN turnover from 12% in 2019 to 10.1% in 2020. In addition, the Memorial Hermann-TMC turnover for RNs with less than 1 year of experience improved from 16.3% in 2019 to 15.5% in 2020. Both facilities have successfully met the goal of being below 22% for first year RN turnover rates.

Nursing Recruitment, Retention and Recognition

The Recruitment, Retention, and Recognition (RRR) council was hard at work in FY20 to celebrate and recognize the incredible nurses on our campus. This year they collaborated with other facilities to create a Team Daisy Award nomination form. The first Team Daisy Award was presented at the Nurse Excellence Awards. In addition, the council created the BEE award, an International Culture Day Celebration with multiple speakers, collaborated with all TMC Nursing Councils for Nurses Week planning and hosted a Nurses Week T-shirt contest and sale.

New Knowledge, Innovations and Improvement

Advancing quality health care, nurse engagement and community health by promoting awareness, communication of EBP, research, and new technology to create innovative solutions.

The Power of Nursing-Led Research

As nurses, we impact people's lives every day. At the bedside, we care for individuals and families through direct patient care and coordinating the care team. Nursing is also at the forefront of change in nursing practice and healthcare management. Nursing-led and co-led research enables nursing to control, innovate and advance our profession while affecting millions of people. Below are a few examples of nursing-led or co-led studies that began in FY20.

- A Grounded Theory Approach to Understanding Nursing Leadership during a Crisis - The purpose of this grounded theory study was to understand the competencies, knowledge and skills needed to be an effective nursing leader during a crisis. Nursing leaders (managers and above) working as a leader during the COVID-19 pandemic were recruited and interviewed. The knowledge gained from this study will help to build training programs and evaluation tools for nursing leaders and add to current theories of nursing leadership. Principle Investigator: Heidi Gilroy, PhD, RN; Co-Investigators: Tania Celia, PhD, RN, Wyona Freysteinson, PhD, RN, Kimberly Gonzales, MSN, RN, Caitlin McVey, MBA, RN, Rosemary Pine, PhD, RN, and Cherylann Vaillancourt, MSN, RN.
- A Case Study Approach to Understanding the Role of Family-Centered Care Coordinators – This study aims to explore the role of the Family-Centered

- Care Coordinator (FCCC), create a definition, and discover differences between the FCCC and other care coordination roles. This research serves as a starting point for future planned research on the effectiveness of family-centered care coordination. Principle Investigator: Heidi Gilroy, PhD, RN; Co-Investigators: Lilliane Hanning, BSN, RN, and Alison Krawacki, MSN, RN.
- A Mixed-Methods Approach for Measuring the Impact of TBRI 1-day Training in the Pediatric Acute Care Setting The study aims to assess and compare attitudes and understanding of trauma-informed care over a 3-month period, before and after a 1-day TBRI (Trust Based Relational Interventions) training. Using both qualitative and quantitative methodology, the researchers hope to show that TBRI training is an effective tool to help healthcare professionals interact with patients who have behavioral problems. Principle Investigator: Dorothy Barnhardt, MS, CCLS; Co-Investigators: Amanda Davis, BSN, RN, Heidi Gilory, PhD, RN, and Keely Smith, MD.
- Pediatric-Size Phlebotomy Tubes and Transfusions for Adult Critically III Patients: A Pilot Randomized Controlled Trial – Pilot trial to assess the feasibility and effectiveness of using pediatric phlebotomy tubes to reduce excessive blood loss in adult critically ill patients. This study was published by BioMed Central (BMC) in August 2020. Co-Authored by Anabelle Kenne, MSN, APRN, AGACNP-BC.



- Extracorporeal Membrane Oxygenation: The Nurses Role in Patient Care – Study published by Amanda Bergeron, MSN, APRN, ACNP-BC, and Linda Holifield, MSN, APRN, ACNP-BC
- Edwards CLASP TR, Edwards CLASP IID-Functional MR, Intermediate Risk Abbott MitraClip vs. MVR Randomized Trial, Medtronic Apollo Trial, Partner 3 Edwards TMVR ViV - Intermediate Risk, Boston Lotus Intermediate REPRISE Trial, and Early TAVR -Asymptomatic AS Patients Randomized Between TAVR or CS - Sarah Johnson, MSN, APRN, ACNP-BC, participated in these multiple Tricuspid, Mitral and Aortic Trials as part of the structural heart program

Sharing Nursing Knowledge and Innovation through Publications

 Special Needs Assessment and Plan (SNAP) for Perioperative Patients on the Autism Spectrum and Other Developmental Disabilities. Published in the Journal of PeriAnesthesia Nursing, 34(4), e1-e2. (2019). Geraldine delos Santos, MSN RN CPAN, Jo-Lynn McDaniel, RN CPAN, Heather Brandon, BSN RN CPN, Angela Clanahan, BSN RN CPN, Giovaana Trainor, BS CCLS, Sheri Ermis, RN CAPA, Melissa Webber, RN, Lisa Regalado, BSN, RN

- Improving Care of Pediatric Behavioral Health Patients and Employee Safety through Quality Collaborative Participation. Pediatric Quality & Safety, 5, e286. Davis, Amanda M. BSN, RN, CPN, NPD-BC; Kader, Kelli L. BA, BM, MT-BC; Pandya, Manish A. MBA, LCSW; Maixner, Michelle A. BSN, RN, CPN; Davis, Jennifer K. BSN, RN, CPN; Hernandez, Jae R. MBA, BSN, RN, NE-BC; Krawacki, Alison C. MS, BS, RN; Barnett, Audrey H. MSN, RNC-NIC, CPHQ; James, Jason MD, †; Smith, Keely G. MD, FAAP,† (2020)
- Helping Experienced Pediatric Nurses Bridge the Gap Between Intermediate and Intensive Care.
 Published in the Journal for Nurses in Professional Development. (2020). Gilroy, Heidi PhD, RN, Maixner, Michelle BSN, RN, Ziesemer-Girouard, Yvette BSN, RN
- Developing the WATCH nurse: A qualitative approach to understanding a pediatric rapid response role. Published in the *Journal of Pediatric Nursing*, 52, 64-69. (2020). Heidi Gilroy, PhD, RN, EBP-C, Danielle Salley, MS, RN, Lilliane Hanning, BSN, RN, Alison Krawacki, MSN, RN, Leslie Schafer, MSN, RN, Kristin Mattran, BSN, RN

Empirical Outcomes

The focus of our collective efforts in nursing contributes to positive outcomes in patient satisfaction, nursing satisfaction and nursing-sensitive quality indicators.

Vizient Top 5 Ranking

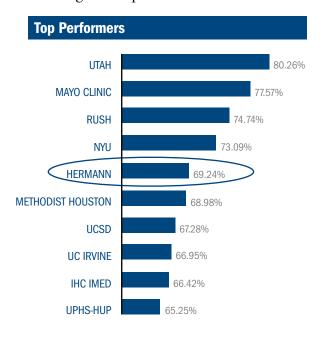
FY20 was a year of quality improvement across the Memorial Hermann-TMC and Children's Memorial Hermann Hospital campus. The campus was recognized by Vizient as one of the Top 5 Comprehensive Medical Centers in the nation. In addition, the campus saw improvements in all nursing quality indicators and nursing satisfaction. As a campus, we are always striving to achieve high reliability and identify opportuni-



ties for continued improvement. Congratulations to the dedicated team of bedside clinicians, Quality Analytics,



Infection Prevention, Transformation Hub, leadership and staff across the hospital for this incredible achievement. Thank you for all of the amazing work you do each and every day in caring for our patients!



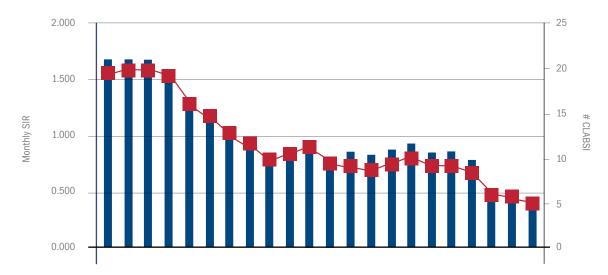
Nurse-Sensitive Quality Indicators

As a Magnet-recognized facility, Memorial Hermann-TMC benchmarks nurse-sensitive quality indicators against other 500+ bed teaching facilities utilizing the National Database of Nursing Quality Indicators (NDNQI). The measures tracked include falls, Catheter-Associated Urinary Tract Infection (CAUTI), Central Line Associated Blood Stream Infection (CLABSI) and Hospital-Acquired Pressure Injury (HAPI). The goal for these indicators is to lead the nation in quality and exceed the mean of other comparable Magnet facilities. These measures are tracked through NDNQI rates as well as Standardized Infection Ratio (SIR), calculated by the number of observed incidents divided by the number of expected incidents based on a risk-adjusted algorithm. We strive for SIR of less than 1 on measured indicators, indicating fewer incidents occurred than were expected.

In FY20 the Memorial Hermann-TMC/Children's Memorial Hermann Hospital campus met the Magnet Target for all metrics and saw improvement in each category compared to FY19. While we recognize and celebrate this improvement, these remain areas of focus for continued improvement efforts. Falls and HAPIs will be two areas of significant focus for improvement efforts in FY21.

The NDNQI CLABSI rate in the first three quarters of FY20 were above the national benchmark. The SIR rate for FY20 improved by 15% which ensured that we met the organizational threshold target. To improve this, teams are working to increase PICC line insertions to decrease the number of Central lines needed. UPCs are partnering with Infection Prevention to identify opportunities for improvement. Children's Memorial Hermann Hospital led a change and made a significant impact in FY20. The NICU enacted a two-tier approach in an effort to decrease this number. The first initiative began with emphasizing the importance of a 30-second friction scrub on all IV access ports and utilized a visual and tactile demonstration to improve scrubbing technique. The second tier included re-education of staff regarding the importance of hand hygiene with emphasis on utilizing a CHG surgical scrub prior to the start of their day to reduce bioburden. Multidisciplinary daily line rounding was conducted in a formal way, helping to engage frontline staff while aiding in compliance and tracking. The results of these rounds are distributed weekly. Frontline staff feel they have a lead

NICU Rolling CLABSI SIRs





measure they care about and are personally invested in its outcome. In addition, a multidisciplinary team performed an event review on every single infection, comparing the event with the unit's bundle compliance data. Through this work, the NICU has identified high-risk patient populations requiring targeted interventions to further reduce the CLABSI risk. Through these efforts, the NICU was successful in reducing their CLABSIs by 71% when comparing FY18 to FY20. Congratulations to the NICU team!

- CAUTIs are another area of focus for our campus where we improved the SIR rate meeting the threshold target. In FY20, select patient populations received antibiotic prophylaxis to help prevent CAUTIs. In addition, monthly CAUTI meetings were held with clinical staff to review fallouts and identify opportunities for future CAUTI prevention.
- Falls continues to be an area of opportunity for all hospitals. In In FY20, we saw a 14% decrease in the number of falls per thousand patient days and exceeded the national benchmark. Although this is a major accomplishment, this remains a significant area of focus for our campus. The Falls Committee is reviewing bundle fallouts and creating a real-time interactive dashboard to identify trends and areas of focus.
- HAPIs also improved in FY20. The campus, however, has seen an increase in HAPIs since

the pandemic, many related to critically ill patients. The TMC Skin Champ team and the system HAPI Committee are working on action plans to decrease the prevalence of HAPIs. TMC performs a monthly prevalence survey for pressure injuries where all patients are assessed. Out of 35 reporting units for the survey, 8 units had ZERO HAPIs for FY20. Congratulations to Transplant Medical, Specialty Surgery, Neuro Surgical Elective Unit, Neurovascular ICU, Epilepsy Monitoring Unit, Pediatric Epilepsy Monitoring Unit, Transplant Surgical ICU and Memorial Hermann Orthopedic & Spine Hospital Inpatient Surgery.

Improvement in the RN Satisfaction Survey

Each year, RN satisfaction is surveyed to gain a better understanding of overall engagement, areas of success, and areas of opportunities. Memorial Hermann-TMC and Children's Memorial Hermann Hospital both showed improvements in overall RN engagement and had a great overall achievement in comparison to the national benchmark. This success is in contrast to reports from Press Ganey showing a nationwide decrease in RN engagement this year. Children's Memorial Hermann Hospital's RN Engagement Scores improved 0.14 from 2019 to 2020 increasing from the 75th percentile to the 91st percentile. The Memorial Hermann-TMC RN Engagement score also improved 0.07 from 2019 to 2020, increasing from the 54th percentile to the 71st percentile. The areas of greatest improvement included improved staffing perceptions, improved communication between nurses and physicians, and improved work/life balance.

Excellence in Nursing and Magnet

Nursing awards and recognition contribute significantly to professional development. As our nurses continually strive to excel in their profession, we want to acknowledge and celebrate their many achievements along the way.

Nurse Excellence Award

Memorial Hermann-TMC recognizes their amazing nurses annually through the Nurse Excellence Awards hosted by the Recruitment Retention and Recognition council. Each award represents a pillar from Memorial Hermann-TMC's Nursing Professional Practice Model and are awarded to two nurses. Through collaborative innovation, social distancing was maintained with the creative formation of a Prize Patrol. Based on the classic Publishers Clearinghouse Prize Patrol, the Memorial Hermann-TMC Prize Patrol surprised this year's Nurse Excellence Award winners. Congratulations to all of the winners and nominees!

Nurse Advocate:

Adrianne Gregory, CCN Briette Moser, Ortho Trauma

Nurse Innovator:

Darlene Murdock, HVI OR Melissa Howard, PICU

Nurse Clinician:

Emma Tarver, PICU Julie Signori, PACU

Nurse Leader:

Erica Williams, PICU Tiffany Kelley, Neuro Acute Care



Nurse Collaborator:

Janette Blanco, Adult Dialysis Tiffany Adams, PICU

Nurse Teacher:

Leslie Cook, RCW Yashamika Short, Education

DAISY Team:

Baby-Friendly Champions Team

DAISY Leader:

Karen Bratovich-Mora, DSU



Good Samaritan's Excellence in Nursing Award

The Good Samaritan Foundation Excellence in Nursing Awards recognize Nurses for their dedication to excellence through peer nominations. Memorial Hermann-TMC received 10 recognitions in the 2020 awards for Large Hospital and Nursing Administration categories. Congratulations to the award recipients: DeShon Burton-Essia, Clare Carroll, Caitlin McVey, Lameko Saldana, April Tinder, Felco Samuel Diango, Caitlin McVey, Ebony Mitchell, Brandy Snipe and Sarah Taylor.

MH-TMC's Second Magnet Recognition

To be Magnet recognized, our dedicated nurses worked to together to advance health at Memorial Hermann-TMC. We are among only 8% of the nation's hospitals that have achieved Magnet designation. Recognizing quality patient care, nursing excellence and innovations in professional nursing practice, the Magnet Recognition Program provides consumers with the ultimate benchmark to measure the quality of care that they can expect to receive. Magnet designation validates the commitment of our outstanding nursing staff to provide superior care. This designation highlights our hospital as one of the best hospitals in the nation.

The Magnet journey is a 4-year process that entails conducting projects to improve patient

quality outcomes, writing a Magnet document and participating in a Magnet site visit. Memorial Hermann-TMC was first designated as a Magnet facility in 2014. Since then, Memorial Hermann-TMC's former Magnet Program Director, Cherylann Vaillancourt, MSN, MHA, RN, CCRN, NEA-BC, has led our campus through this challenging process and successfully supported this organization's wonderful nurses in obtaining Memorial Hermann-TMC's first re-designation in fall of 2019. Under Cherylann's leadership, the Magnet document was successfully constructed highlighting nursing excellence on our campus. In addition, an exceptional game-show themed Magnet Fair was held to strengthen nursing staff's knowledge and understanding of how they display what it means to be Magnet Champions on a daily basis. The Magnet Fair enhanced nursing staff's confi-





dence to showcase their incredible skills. The journey culminated in our Magnet site visit where four ANCC's appraisers came to Memorial Hermann-TMC to review all the accomplishments written in the Magnet document, tour our campus and meet with bedside nurses face to face. Congratulations to these nurses for all the hard work and dedication they have executed in achieving Magnet Recognition for the second time.

2021 - 2024 Strategic Plan

The planning for the 2021-2024 Nursing Strategic Plan is underway. The revised strategic plan is structured around Memorial Hermann's HEALTH mission and tied into the Magnet Model. Each letter of HEALTH will have a strategic focus point with 'SMART' goals that are Strategic, Measurable, Achievable, Relevant and Time-bound. The 'SMART' goals will guide the hospital in understanding how to determine progress towards the selected goals. Initial input to build the new strategic plan was gathered from the Shared Governance Council Chairs and other frontline staff members. The goals selected by Shared Governance Councils will be presented to clinical nursing managers for discussion and further narrowing of these

goals. The selected goals will continue to be narrowed and finalized using collaborative discussion and shared decision-making through all levels of nursing leadership. Once selected, the strategic plan's focus points and goals will be brought back to the Shared Governance Council Chairs and frontline staff for finalization of the 'SMART' goals.

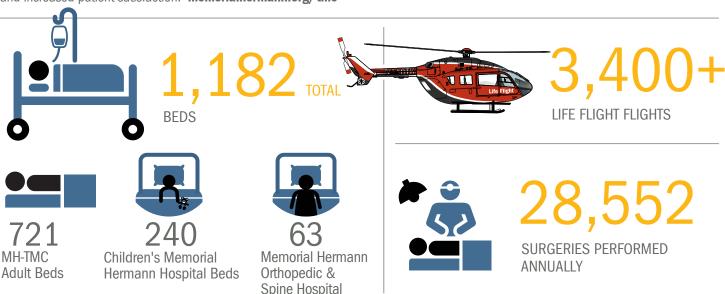
Memorial Hermann-TMC Nursing Spirit

Nurses at Memorial Hermann-TMC lead with compassion and innovation while supporting each other with kindness and resilience. From bedside staff to researchers and leadership, nurses generate and implement creative solutions for everyday challenges. Their spirit creates an environment that not only raises expectations for practice, but also empowers innovation and maintains a positive atmosphere for staff, patients and families. Their dedication creates a strong foundation that supports the nursing profession, while supporting the Memorial Hermann-TMC campus, our organization and the community. Whether facing natural disasters, a global pandemic or an unexpected challenge in daily operations, Memorial Hermann-TMC nurses and staff display strength, inspire growth and embody excellence every day. Thank you for all you do!



BY THE NUMBERS FY 2020 DATA (July 2019 - June 2020)

When you choose Memorial Hermann-Texas Medical Center, you are selecting a facility consistently ranked among the top hospitals in the United States. For nearly a century, the staff and affiliated physicians have set new standards of care in Texas and the nation through advances in research leading to less-invasive procedures, quicker recovery times, improved patient outcomes, reduced medical costs and increased patient satisfaction. memorialhermann.org/tmc



SPECIALTY PROGRAMS

Memorial Hermann-Texas Medical Center is home to some of Houston's leading medical institutes and centers, treating patients from around the world and providing hope as a site for forward-thinking research studies and clinical trials.



Children's Memorial Hermann Hospital



IRONMAN Sports Medicine Institute



Memorial Hermann Orthopedic & Spine Hospital



Clinical Innovation and Research Institute



Red Duke Trauma Institute





Heart & Vascular Institute



Mischer Neuroscience Institute



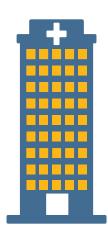
Cancer

Transplant Center

The Women's Center

Center

BREAKING NEW GROUND



The Susan and Fayez Sarofim Pavilion opened in February 2020. The \$700M investment includes a new, stateof-the-art patient care tower as well as parking and infrastructure capabilities to support future growth and renovation of existing pavilions on the campus.

EMERGENCY CENTER VISITS PER YEAR

Busiest Level I Trauma Center in the country

- designated for both children and adults capable of caring for entire family in the same facility.

More than

ACADEMIC AFFILIATION WITH UTHEALTH



A unique academic and clinical collaborative with UT Physicians and McGovern Medical School at UTHealth.

AWARDS & RECOGNITION



BERNARD A. BIRNBAUM, MD, QUALITY LEADERSHIP AWARD Recipient of 2018 Bernard A. Birnbaum, MD,

Quality Leadership Award for Academic Medical Centers, and ranked ninth of 99 participating academic medical centers.



MAGNET® DESIGNATED HOSPITAL

Recognition in quality patient care, nursing excellence and innovations in professional nursing practice.



COMPREHENSIVE STROKE CENTER INTEGRATED SYSTEM CERTIFICATION

Awarded Comprehensive Stroke Center Integrated System Certification by The Joint Commission (TJC) in 2018, the first system in the nation to earn this distinction.



NATIONALLY RANKED PROGRAMS

The 2018-2019 *U.S. News & World Report* nationally ranked the specialty areas of Cardiology & Heart Surgery, Ear, Nose & Throat, and Gastroenterology and GI Surgery.



ADVANCED CERTIFICATION FOR TOTAL HIP AND KNEE REPLACEMENT

Memorial Hermann Orthopedic & Spine Hospital has earned The Joint Commission's Gold Seal of Approval for Advanced Certification for Total Hip and Knee Replacement, the first hospital in Houston to earn this certification.



ACCREDITED HOSPITAL-BASED AIR AMBULANCE PROGRAM

Memorial Hermann Life Flight is the secondoldest air ambulance program in the nation and is accredited by the commission on Accreditation of Medical Transport Systems (CAMTS).



BEACON AWARDS

The neuroscience ICU and acute care floors earned silver Beacon Awards and the neuroscience IMU earned a bronze Beacon Award from the American Association of Critical Care Nurses.



AMERICAN BURN ASSOCIATION VERIFICATION

The John S. Dunn Burn Center is the only burn unit in Houston verified by the American Burn Association (ABA).

BY THE NUMBERS

FY 2020 DATA (July 2019 - June 2020)

For more than 3 decades, Children's Memorial Hermann Hospital has provided the highest level of care to children and women across the region, and serves as the only hospital in Greater Houston capable of treating the entire family unit in the same facility, with access to neonatal, pediatric and adult specialists.

childrens.memorialhermann.org



 $310\,$ tota

CHILDREN'S AND WOMEN'S BEDS



4,300+

BABIES DELIVERED ANNUALLY

(Texas Medical Center campus)



NICU beds

(Level IV)



Pediatric Intensive Care & Intermediate Care beds



/6 The Women's Center beds



5,600+

PEDIATRIC SURGERIES PERFORMED ANNUALLY

(Texas Medical Center campus)

40+

SPECIALTY PROGRAMS



Children's Memorial Hermann Hospital offers care in more than 40 children's and women's specialties, including the latest advances in high-risk pregnancy and neonatal critical care services, and renowned programs in pediatric trauma, neurosciences, pulmonology and cardiac care–providing services for children and women in all stages of life.



The Women's Center



Children's Heart Institute



High-Risk Pregnancy Care



Pediatric Ear, Nose & Throat



The Fetal Center



Pediatric General Surgery



NICU & Neonatal Care



Pediatric Orthopedics



Children's Neuroscience Center



Pediatric Trauma

IN YOUR COMMUNITY

With THREE community
hospital locations providing
24/7 pediatric ER coverage
and expanded pediatric
specialty services at Katy,
Memorial City and Sugar
Land. Children's Memorial
Hermann is committed to
providing high-quality
health care to children
across the Greater Houston

15,000

EMERGENCY CENTER VISITS PER YEAR

1st Level I Pediatric Trauma Center in the Region and busiest Level I Trauma Center in the country-designated for both children and

adults-capable of caring for entire family in the same facility.

More than 50 YEARS

ACADEMIC AFFILIATION WITH UTHEALTH



A unique academic and clinical collaborative with UT Physicians and McGovern Medical School at UTHealth.





AWARDS & RECOGNITION



BABY-FRIENDLY HOSPITAL

A designated Baby-Friendly birthing facility, providing an optimal level of care for breastfeeding mothers and their babies.



MEMBER OF LEADING RESEARCH NETWORKS

1 of 8 U.S. hospitals as a member of both the National Institute of Child Health and Human Development (NICHD) Neonatal and Maternal Research Network, supporting leading-edge MFM and NICU care.



LEVEL IV NICU & LEVEL IV MATERNAL FACILITY

1 of 4 Level IV Neonatal Intensive Care Units in Texas as well as a Level IV Maternal Facility, which denotes the highest level of care, designated by the Texas Department of State Health Services (DSHS).



NATIONALLY RANKED PROGRAMS

Named one of the top 25 best children's hospitals nationally in Cardiology & Heart Surgery and top 35 programs nationally in Neurology & Neurosurgery by *U.S. News & World Report*.



MAGNET® DESIGNATED HOSPITAL

Recognition in quality patient care, nursing excellence and innovations in professional nursing practice.



TOP 6% HEART SURGICAL OUTCOMES

Children's Heart Institute at Children's Memorial Hermann Hospital is among the elite top 6% of congenital heart surgery programs in North America for patient care and outcomes, according to the Society of Thoracic Surgeons (STS).







memorialhermann.org 713.222.CARE (2273)