

Nurses, the Heart of Healthcare

Message from our CNO

Colleagues,

Within the pages of this document, our first ever Nursing Annual Report, are highlights of nursing achievements and outcomes across our system. No doubt, our profession has been challenged the last two years in ways it has never experienced. As we continue to work to meet the clinical and workforce challenges, the importance of our nursing excellence journey is only enhanced. This report demonstrates our commitment to transparency in nursing outcomes, improvements and opportunities.

In developing the foundation for the professional practice of nursing and the practice environment for nurses, several facets are essential.

- a) Shared Governance: Shared governance is the structure by which nurses exercise their voice in leading clinical practice and practice environment changes. This happens at the department level as well as at the system level.
- **b)** Evidence Based Practice: Engaging nurses to drive evidence based practices, especially those that are "nurse led," strengthens the profession and improves patient outcomes.
- c) Nurse Residency Program (NRP): This evidence based program is designed to assist the new nurse in their first year. LCMHS has the only true evidence based NRP in the region.
- d) Nursing Outcomes: National Database for Nursing Quality Indicators (NDNQI) allows us to benchmark system and department clinical and workforce outcomes against several peer groupings, such as Catheter Associated Urinary Tract Infections, Central Line Associated Bloodstream Infections, Falls with Injury and many more.
- **e)** RN Engagement: We have completed our first ever RN engagement survey. This provides us a benchmark for actions, strategies and a method to measure future successes.
- f) Education: Advancing the educational base of the nursing workforce is both a national and local imperative. As the largest sector of the healthcare workforce, the impact of nursing continues to grow. There are opportunities for all educational levels of nursing, but removing barriers to advancing education in nursing is an organizational priority. Certified nursing practice is the "mark" that a nurse has achieved expert status within their specialty.
- **g)** Certification: Certified nursing practice is the "hallmark" that a nurse has reached expert status in their nursing specialty. The system continues to work to enhance our team's ability to achieve certification.
- h) Healthy Workforce: This work continues to evolve and is perhaps the most important work to date given the stress and complexity of nursing work. The care we provide to ourselves and to one another is just as important as the care we provide to our patients.

Our first LCMHS Nursing Strategic Plan will be released during Nurses Week 2022. This 3-5 year plan has been developed with the input of nursing leaders, bedside nurses from all areas, and non-nurse colleagues. While there is never an endpoint to our journey, the plan does direct us toward achievement of the ANNC Pathways to Excellence program and eventually the ANCC Magnet program.



In closing, thank you all for your Sacred Work. Our profession and each of you continues to inspire and humble me.

Dr. Gerald Bryant

"God is not unjust; he will not forget your work and the love you have shown him as you have helped his people and continue to help them." Hebrews 6:10

#LCMHNursesAreABigDeal



Lake Charles Memorial Health System Nursing Professional Practice Model

Our Vision Statement

We are Memorial nurses. Together, serving our community heart to heart. We are:

- dedicated
- compassionate
- resilient
- united

Our Mission Statement

Memorial's nursing mission is to promote a caring culture that empowers each nurse to provide safe and quality care to patients and families and to uphold Memorial's commitment to the community through excellent leadership, evidence-based practice, and professional development.

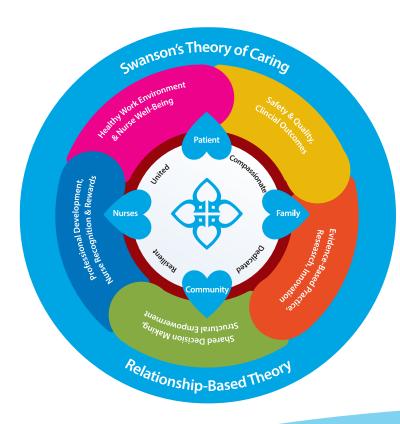
Description of Our Nursing Practice Model

Our Nursing Professional Practice Model is an illustration of how our nurses practice as key participants of the collaborative healthcare team. The practice model helps describe and guide nursing practice throughout the Lake Charles Memorial Health System. It captures the values, goals, and relationships that define our professional identity. The model promotes high quality and consistent care, improved outcomes for patients and families, job satisfaction, and a positive work environment.

The model incorporates our nursing mission, vision, and values as the foundation for all we do.

The Lake Charles Memorial logo is at the center of the nursing professional practice model. The logo consists of four interconnecting hearts representing the caring connection between our patients, family members, community, and nurses. Our nurses understand the importance of forming positive relationships between the entire healthcare team and every person who enters our health system. We identify the core values of our nurses as united, compassionate, dedicated, and resilient. Surrounding the hearts and core values are the key components that we strive to continuously build upon in order to improve outcomes for our patients, patients' families, community, nurses, and the entire healthcare team.

- Safety, Quality, Clinical Outcomes
- Evidence-Based Practice, Research, Innovation
- Shared Decision Making, Structural Empowerment
- Professional Development, Nurse Recognition & Rewards
- Healthy Work Environment & Nurse Well-Being



Swanson's Theory of Caring in addition to relationship-based care has been selected as the framework for the nursing practice model. It is depicted as the outer circle or "frame" of the model representing the overall foundation for nursing practice. This is what keeps us grounded in our professional practice.

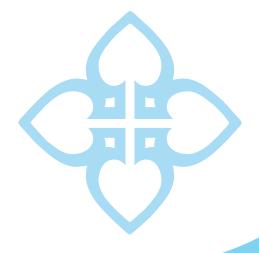
Swanson's Theory of Caring describes nursepatient relationships that promote wholeness and healing. It is a framework that incorporates education and research with traditional values and caring attitudes. The theory identifies five major concepts, caring, knowing, being with, doing for, enabling, and maintaining belief. We have created commitment statements for each concept.

- Caring: We believe that providing patient/family centered care is the core of nursing. We also believe that caring for one another is just as important as the care we provide
- Knowing: We strive to understand the perception of others, avoiding assumptions and judgement
- Being with: We strive to be emotionally present to our patients, patients' families, community, and healthcare team
- Doing for: We are committed to providing a safe environment, comfort, and dignity for all patients.
 We are committed to best practice and quality outcomes
- Enabling: Through all transitions of care we will inform, explain, support, validate feelings, generate alternatives, and give feedback
- Maintaining belief: We will help to find meaning and stand by the one cared for no matter what the situation

Relationship-based care (RBC) has been embraced by the nurses at LCMHS based on the idea that patients have better outcomes and recover more quickly when strong therapeutic relationships exist in an organization. RBC is the way we provide care to our patients, their families, and each other.

We are committed to creating a caring and healing environment. The key components of RBC are:

- Promoting a healthy environment through the power of relationships with ourselves, the people with whom we work, and our patients and their families
- Accommodating the needs of our patients and families through relationships and human connections
- Treating everyone with respect and dignity
- Speaking for the patient and making sure the family is included
- Understanding each patient's unique story
- Being consistent with our mission, vision, and values





Shared Decision Making and **Structural Empowerment**



Despite another challenging year, our shared governance councils have managed to keep moving forward. From assisting with nursing policy changes to recognition of nurses, the shared governance council members' involvement and contributions have made a lasting impact on our organization.

A message from your Shared Governance Council Chairs

Nurse Practice Council:

It has been an honor and privilege to serve as chair of the Nurse Practice Council for the past two and a half years. I humbly appreciate the trust that was placed in me to sit in this seat. I want to thank all of the council members for their support and participation throughout the years. Our goal was to develop ways to help improve patient satisfaction, staff retention, and to help provide the best care possible to the community. During those years, this council has developed and implemented the following: updated the LPN scope of practice, developed and implemented a new orientation guide for new nurses which included a time frame for these nurses being pulled to other floors, purposeful rounding to help improve patient safety (pain, possessions, position, potty, prevention), Code tele when there is a life threatening change in a patient's heart rhythm, purple and white armbands for patients with DNI code status, and the development and implementation of a list of medications along with their side effects to help educate our patients. Aside from the above mentioned changes, the decision to change one item used in our facility has saved over \$125,000 in one year that can now be utilized somewhere else. My prayer is that this council would continue to work towards the goals of patient satisfaction, staff retention, and providing the best community service possible. Thank you again for the opportunity to be a part of this council.

- Rose Devones, RN

Professional Development Council:

Throughout the last two years, everyone was faced with great trials and tribulations that greatly defined and molded each individual's resiliency. It has been such a privilege to serve as the Nursing Professional Development Council Chair for both 2020 and 2021. I am so honored that I was able to work alongside my fellow council members to coordinate Professional Development accomplishments, despite the setbacks our team endured. This council was able to launch ways to promote professional growth of nurses, by launching unit-specific flyers with information regarding obtaining certification and specialty certifications available. A new Professional Development Spotlight Program was established, highlighting new graduate nurses monthly for taking initiative and surpassing expectations. It has been so wonderful to work with extraordinary nurses from other departments in the promotion for a positive professional change for the future. Great job team and continue to be the positive change!

- Natasha Hicks, BSN, RN, CV-BC

Nursing Excellence Council:

It has been truly an honor to serve as Chair of the Nursing Excellence Council as we embark on our nursing excellence journey. Our first order of business was to facilitate an IV mentor program for our new graduate nurses and to honor the professional achievement of our senior staff nurses who became certified in their specialty areas this past year, at the Nursing Excellence Banquet. We soon became the first interdisciplinary council at LCMH and together created the POP (Positive Outstanding Peer) award honoring ANY person at LCMH that embodies and promotes a positive and healthy work environment.

The council voted on and selected the monthly DAISY award winners as well as honoring the lifetime achievements of some truly exceptional nurses in our community by hosting the "Legends in Nursing" banquet. The future is bright at Lake Charles Memorial. Keep up the great work team!

- Taylor Stroud, BSN, RN, OCN

Research and Evidence Based Practice Council:

It has been such an honor to serve as chair of the Research and Evidence Based Practice Council for 2021. Despite a somewhat fractured first year, our team accomplished so much. We researched Arthroplasty in the Ambulatory Care Setting, Urinary Catheter Standards of Care, Fall Assessment Scales with Council recommendations provided to the newly formed Falls Committee, and lastly, we began research on the use of Fentanyl in acute care settings. Great Job Team!

- Amy Wallace, BSN, RN, OCN

Creation of Nursing Professional Practice Model



In July 2021, shared governance council members, bedside nurses, nursing educators, and nursing leaders gathered to create the nursing vision and mission statements as well as the nursing professional practice model for Lake Charles Memorial Health System. Three hundred seventeen (317) nurses from across the organization participated in a survey to assess which values, goals, and relationships define their professional identity. Data from the survey was compiled and the common elements were identified. The Professional Practice Model team analyzed all the survey data in order to include input from all nurses. They then selected Swanson's Theory of Caring and Relationship-Based Theory as the foundation to create the nursing model. It was important to the committee that the LCMHS logo was incorporated into the model since this is what employees, patients, and community members identify as a symbol for the healthcare organization of choice in southwest Louisiana.

Strategic Planning Workshop



We had our first Nursing Strategic Planning Workshop November 18-19, 2021. Nurses and employees from multiple disciplines around the organization came together to map out the future of nursing at Lake Charles Memorial. The theme for the workshop was "Every day is game day: Strategies to win the championship."

The sixty-five(65) attendees attended workshops on mindfulness, the Magnet/Pathway to Excellence journey, the NAM Future of Nursing 2020-2030, and resiliency in healthcare. The attendees were then divided into groups based on the Magnet and Pathway to Excellence Journey principles to brainstorm and plan what we want to accomplish in nursing over the next year and beyond. The Nursing Strategic Plan will be presented to all nurses in the organization in 2022. The collaborative process was productive, energizing, and fun.

NDNQI RN Survey

The National Database of Nursing Quality Indicators (NDNQI), a program of Press Ganey, provides a national data repository through which hospitals can compare nursing sensitive indicators at the unit level to similar hospitals across the nation. In May 2021, LCMHS participated in the NDNQI RN Survey with Practice Environment Scale. Registered Nurses in direct patient care from across the organization were given the opportunity to participate. The mean is the 50th percentile and we strive to be above the mean. The overall hospital mean for 2021 is listed in the table along with the comparison mean from 2017-2021. LCMHS RNs will be invited to participate in this survey again October 2022.

	2017 Comparison Mean	2018 Comparison Mean	2019 Comparison Mean	2020 Comparison Mean	2021 Comparison Mean	2021 LCMHS: Hospital Mean
Mean Practice Environment Scale (Likert scale 1-4)	3.02	3.02	3.02	2.958	2.94	2.91
Collegial Nurse- Physician Relationships (Likert scale 1-4)	3.15	3.15	3.16	3.16	3.14	3.17
Staffing and Resource Adequacy (Likert scale 1-4)	2.77	2.77	2.75	2.75	2.59	2.60
Nurse Manager Ability, Leadership, and Support of Staff (Likert scale 1-4)	3.09	3.10	3.10	3.06	3.06	2.97
Nursing Foundations for Quality of Care (Likert scale 1-4)	3.12	3.13	3.13	3.10	3.07	3.02
Nursing Participation in Hospital Affairs (Likert scale 1-4)	2.90	2.91	2.91	2.86	2.83	2.77
Job Enjoyment (Likert scale 1-6)	4.21	4.23	4.21	4.17	4.00	4.02
Perceived Quality of Care (Likert scale 1-6)	3.56	3.56	3.55	3.55	3.48	3.41

Professional Development and Nurse Recognition & Rewards



Lexie Reed, MSN, FNP-C 6T Pediatrics & PICU May 2020

Michelle Boseley, BSN, RN

3T Surgical ICU

August 2020

Kennedy Wilson, LPN

5T Ortho-Neuro

November 2020



Logan Spivey, BSN, RN, OCN 2T Oncology June 2020

Teri Reeves, BSN, RN

Emergency Department

September 2020



Kari Peloquin, BSN, RN-NIC July 2020



The DAISY

Award

FOR EXTRAORDINARY NURSES HONORING NURSES INTERNATIONALLY IN MEMORY OF J. PATRICK BARNES

An international recognition

to honor nurses that provide

exceptional care to patients

and their families, the DAISY Award began at Lake Charles Memorial in May 2020. The DAISY Wall features the monthly DAISY recipients. The display will be changed annually during Nurses Week to reflect the winners from the previous year. Since

implementation of the DAISY

Award, 102 nominations were received from staff, patients and their families.

Neonatal Intensive Care



Hannah Brignac, BSN, RN 7T Medical Surgical



October 2020



Denise Collett, RN Lifetime Achievement Award



January 2021



Kerri Duhon, RN **Family Birth Center** February 2021



Katie Chambley, BSN, RN

9T Medical ICU

December 2020

Shantelle Richard, BSN, RN 3T Surgical ICU March 2021



Destany Planchard, RN 8T Telemetry April 2021

May 2020 - December 2021

DAISY nominees:

Alicia Bryant* **Amanda Trahan** Andrew Batiste* **Angie Adams* Ann Picou Ashley Prudhomme Bethany Cahill Brenda Bagilio Bridget Durr Briley Wilson Brittany Thibodeaux** Celise LaFleur **Charlotte Carter** Ciara Conway **Collette George Crystal Crochet* Danyn Dugas Diane Johnson Emily McAnulty** Gage Griffen **Garrett Erbelding* Glenda Southall**

Hannah Clements* Hayley Guinn* Heather Misse Jade Leger Jennifer Mottelet Jennifer Stutes Kaitlyn Darby Kaitlyn Landry* Karen Jones **Kiersten Onken Krissy Morris** Kristina Brooks Spivey Laura Coreil **Laura Fontenot Tibbitts** Laura Robinson Maci Lefleur* **Mackenzie Johnson** Malia Richardson Marilyn Kershaw Megan Stephenson Melissa Kohler **Monica Engel**

Nataly Gonzales Natasha Hicks Nathaniel Bryant* Ollie Spellman Pam Roy **Patricia Montou** PJ Craft Rebecca Randel* Sam Causey Sara Comeaux* Sarah Foux Savanna Buller Shelbi Monceaux **Sherry Joubert* Sue Gary Taylor Stroud Toni Dugas Tracee Hebert Tracy Little Virgil Smith**

DAISY recipients:

Brandy Sensat-

October 2021 recipient (Nursing Informatics/ COVID infusions)

Dakota St. Andre-

September 2021 recipient (4 Tower)

Denise Collette -

January 2021 recipient, -Lifetime

Destany Planchard-

April 2021 recipient (8 Tower)

Hannah Brignac*-

October 2020 recipient (7 Tower)

Kari Peloguin*-

July 2020 recipient (NICU)

Katie Chambley-

December 2020 recipient (9T ICU)

Kennedy Jeffcoats Hart-

May 2021 recipient (Family Birth Center)

Kennedy Wilson-

November 2020 recipient (5 Tower)

Kerri Duhon-

February 2021 recipient (Family Birth Center)

Lexi Reed-

May 2020 recipient (Pedi/PICU)

Logan Spivey*-

June 2020 recipient (2 Tower)

Michelle Boseley-

August 2020 recipient (ICU)

Raylee Istre-

August 2021 recipient (ICU)

Rika Armentor-

July 2021 recipient (NICU)

Shantelle Richard-

March 2021 recipient (ICU)

Tenny Miglicco-

June 2021 recipient (7 Tower)

Teri Reeves-

September 2021 recipient (ER)

Vickie Fontenot*-

December 2021 recipient (Wound Care)

*Multiple nominations

Legends in Nursing and DAISY Lifetime Achievement Celebration



Lake Charles Memorial Health System sponsored a "Legends in Nursing" ceremony on November 18, 2021 honoring nursing legends across SWLA who have made a huge impact on the profession of nursing. Sixteen nursing legends were celebrated. Ten of the legends were given the additional recognition of the DAISY Lifetime Achievement Award.

Dr. Gerald Bryant with recipients pictured left to right:

Lisa Morales, BSN, RN; Sherry Joubert, BSN, RN; Pam Roy, MSN, RN; Ellen Frey, RN; Gwen Frey*, BSN, RN, CNOR; Joan Kershaw*, RN, CCRN; Tammy Vincent*, RN, CEN, SANE-A/SANE-P; Lance Waldmeier*, FNP; Tari Dilks* DNP, PMHN-BC, FAANP; Jane Alcock*, BSN, RN, CNOR; Sharon Coleman-Simien*, BSN, RN; Ginger Brown Basone*, EdD, MSN, MBA, HCA, RN, and Penny Wolfe, Phd, RN.

Not pictured: Sherry Haley*, MSN, RN; Anita Fields-Gold*, PhD, RN; Joevelyn Jones, RN.

*Lifetime Achievement recipients

Excellence in Nursing Celebration

We hosted the 2nd Annual "Excellence in Nursing" Banquet at the Governor's Mansion on Nurses Day, May 6, 2021. The event was to recognize and honor our nurses who earned a certification in the previous year, received a DAISY award, or advanced their nursing degree. Natasha Hicks, Chair of Professional Development Council and Garrett Erbelding, Co-Chair, presented personalized jackets to each newly certified nurse. Taylor Stroud, Chair of the Nursing Excellence Council recognized all the DAISY recipients from the previous year. Dr. Charon Randel acknowledged the nurses who advanced their nursing degree in the previous year.

List of all certified nurses at LCMHS:

Ambulatory Care Nursing Certification (AMB-BC)

Rae Gardiner

Skylee Myers

Malia Richardson

Olive Welsh

Nursing Professional Development (NPD-BC)

Kristy Denison

Nikki Galloway

Charon Randel

Lee Anna Duplechain

Cardiac-Vascular Nursing Certification (CVRN-BC)

Jessica Fontenot

Natasha Hicks

Critical Care RN Certification (CCRN)

Blair Belanger

Meghan Stephenson

Anne Bonnette

Sean Stickney

Deanna Burger

Gena Millslagle

Timothy "Gage" Griffen

Kaitlyn Darby

Critical Care RN Certification (CCRN-P)

Marilyn Joan Kershaw

Certified Cardiac Rehabilitation Professional (CCRP)

Monica Hebert

Michelle Smith

Certified Diabetic Educator (CDE)

Karen Demourelle

Certified Emergency Nurse (CEN)

Kennetra Isler

Victoria Lantz

Victoria Nash

Tammy Vincent

Tracie Kyle

Certified Breast Care Nurse (CBCN)

Jared Primeaux

Certified Hyperbaric Technologist (CHT)

Denise Peshoff

Certified Nurse Educator (CNE)

Charon Randel

Jennifer Foreman

Certified Sedation Registered Nurse (CSRN)

Sheila MacKay

Catherine Haese

Certified Gastroenterology RN (CGRN)

Melisa Harrelson

Natalie Gillett

Kimberly Hooper

Sheila MacKay

Jennifer Myers

Joni Richoux

Certified Legal Nurse Consultant (CLNC)

Shawna Ardoin

Certified Perioperative Nurse (CNOR)

Shawna Ardoin

Candace Brake

Gwendolyn Frey

Brenda Holcomb

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Missy Ivey

Amy Miller

Mindy VanWinkle

Diane Sherman

Kelly McDonald

Jamie England

Certified Register Nurse Infusion (CRNI)

Malia Richardson

Certified Rehabilitation Registered Nurse (CRRN)

Rebecca Spears

Cardiac Surgery Certification (CSC)

Blair Belanger

International Board-Certified Lactation Consultant (IBCLC)

Hollie Rosteet

Elesia Vizina

Medical Surgical Nursing Certification (MEDSURG-BC)

Taylor Stoma

Christiana Engel

Danielle Kirkland

Nurse Executive Board Certified (NEA-BC)

Rae Gardiner

Shawntel Willis

Christiana Engel

Jada Smith

Kristy Denison
Oncology Certified Nurse (OCN)

Amber Eddy

Rae Gardiner

Hayley Guinn

Leila Hussain

Crystal Crochet

Bridget Durr

Lexie Hagen

Ashlee Johnson

Christina Mathews

Khristina Mayo

Skylee Myers

Victoria Orsot

Malia Richardson

Wendy Roach

Laura Suire

Olive Welsh

Ellen Richardson

Amy Wallace

Taylor Stroud

Courtney Thomas

Progressive Care Certified Nurse (PCCN)

Melissa Ducotey

Pediatric Nursing Certification Board (PNCB)

Gina Barnes

Elaine Cooley

Ashley Lovejoy

Michelle Langley

Psychiatric Mental Health Nurse (CARN)

Gerlyn Simon

Neonatal Intensive Care Nursing Certification (RNC-NIC)

Jade Leger

Barbara Guidry

Kari Peloquin

Rika Armentor Elizabeth Phillips **Certification in Maternal Newborn Nursing (RNC-MNN)**

Vicki Priola

Laura Robinson

Registered Nurse Inpatient Obstetric Nursing Certification

(RNC-OB)

Kristy Pennick

Leah Billedeaux

Miranda Mallett

Elesia Vizina

Alesha Alford

Cheryl McCombs

Patricia Montou Kayla Cannon

Sexual Assault Nurse Certification Adult (SANE-A)

Elizabeth Broussard

Tammy Vincent

Jessica Plaissance

Tammy Smith

Sexual Assault Nurse Certification Pediatric (SANE-P)

Tammy Vincent

Tammy Smith

Stroke Certified Registered Nurse (SCRN)

Natasha Paige Weaver

Shawntel Willis
Trauma Certified Registered Nurse (TCRN)

Victoria Lantz

Victoria Nash

Certified Infection Control (CIC)

Katelynn Dietz

Certified Professional in Healthcare Quality (CPHQ)

Beth Westerchil

Certified Professional in Patient Safety (CPPS)

Beth Westerchil

Certified Nurse Manager and Leader (CNML)

Spencer Lucas

















The Foundation Fund



The Foundation at LCMHS is committed to continuous learning and innovation in line with the health system's vision, and enhancing the ability to fulfill the organization's mission. In support of that commitment, the Nursing Excellence & Scholarship Fund was created by the Foundation at Lake Charles Memorial Health System. The intention of this fund is to support ongoing professional development opportunities and training for nursing staff as well as scholarships for nursing students attending McNeese State University and SOWELA.

Professional Development Fund for Employees-Eligible applicant is a RN or LPN employed full-time at LCMHS that has worked a minimum of 1 year in the organization.

Student/Scholarship-Eligible applicant is a nursing student in his or her final year of undergraduate school attending McNeese State University or SOWELA.



Our Memorial ICU received funds from The Foundation to host a two-day Critical Care Registered Nurse (CCRN) Exam Webinar. Twenty ICU RNs attended the intense course and will be taking their certification exam in 2022 to earn their CCRN.



Emily Poole, a senior nursing student at McNeese State University received the first Nursing Excellence Fund scholarship in the amount of \$1,000.

LCMH Oncology: Professional Development and Patient Care Services

Inpatient and outpatient oncology nurses have set the barfor professional development in 2020 and 2021. Five nurses earned their oncology certification (ONS), five nurses earned their ambulatory care certification (AMB-BC), two nurses became board certified in medicalsurgical nursing (MEDSURG-BC), one nurse became a certified infusion RN (CRNI), and one nurse earned the Nurse Executive Advance-Board certification (NEA-BC). An oncology educator was added this past year to ensure uncertified staff working in direct patient care remain current on annual oncology education. The outpatient oncology infusion clinics added a patient education nurse to give in-depth education on treatment regimens, side effect management, and drug specific education. The outpatient infusion clinics were expanded to include Moss Memorial services and the Medical Oncology office became a Memorial hospital based clinic. The Patient Navigation program was expanded to include an oncology certified registered nurse. Lastly, the inpatient and outpatient shared



governance councils implemented some evidence-based processes to enhance outcomes. The inpatient team created a chemo chart with signs for patients receiving hazardous drugs. They also created a blood audit tool to improve nursing documentation. The outpatient team created a policy for outpatient PICC care. In addition, they created an ESA protocol and initiated journal review opportunities so their team has access to the most current evidence-based practice literature. The oncology team has created additional goals for 2022 and without a doubt will continue to serve as a role model for our organization.

Healthy Work Environment & Nurse Well-being

Healthy Workforce and Culture of Caring Initiatives: A Year of Action

On June 15, 2020, Dr. Gerald Bryant, DNP, RN, CNO, made an announcement that Lake Charles Memorial Health System engaged with Dr. Renee Thompson of the Healthy Workforce Institute to help us address lateral violence, incivility, and bullying in the workplace, ultimately leading to a culture change. Dr. Bryant informed that the work would initially begin in nursing, but would spread quickly throughout the system. Soon after, nursing staff across the organization were invited to participate in the Healthy Workforce Incivility Survey. The data from this survey served as a baseline for strategic planning.

Monday Messages, short leadership tips that Dr. Thompson has found to be best practices through her work, began to be shared via email every week to help leaders be successful and to help inspire their teams. In preparation of our culture change work, shared governance and unit council representatives were invited to meet with Dr. Thompson via a Zoom meeting. They were able to discuss the following: their roles on the council, examples of initiatives the councils have worked on, their relationships with nursing leadership, their strengths as a group, and areas the councils or nurses would like to grow professionally.

Our official first Healthy Workforce Committee meeting was held on July 29, 2020. Committee members were Dr. Gerald Bryant (Executive Sponsor), Jennifer Foreman (Chair), Dr. Renee Thompson (Consultant), Dr. Mac Jordan, Wendy Fournet, Tressy Bergeron, Brittany Campbell, Aaron Ortego, Donna Shields, Kristy Denison, Sara Beth Johnson, Jon Moore, Bethany Tramonte, and Courtney Manuel. The first meeting consisted of a welcome and introductions, review of roles and responsibilities, and review of the strategic plan for the upcoming work.

During the following months, the emergency department, the operating room, and the family birth center were identified as departments where "deep dives" would occur to implement department culture change initiatives. The leaders of these departments were enrolled in the Healthy Workforce Institute's online course, Eradicating Bullying and Incivility.

Dr. Renee Thompson and her team visited Lake Charles Memorial Health System for the first time on January 20, 2021. On this date, the healthy workforce initiative was kicked-off. The kick-off consisted of informational meetings with staff, as well as introductory and informational meetings with nursing leaders. The Cultivating a Healthy Workforce by Eradicating Bullying and Incivility workshop was presented by Dianne Salter from the Healthy Workforce Institute.

Dr. Renee Thompson and her team visited LCMHS once a quarter during 2021 to keep us on track and to help spread this work to other departments. The deep dive process later grew to include Behavioral Health, ICU, and 7

Tower Medical-Surgical. Multiple face to face effective communication and resolving inter-professional conflict workshops were provided for all employees across LCMHS during the onsite visits. The Healthy Workforce Academy, an online platform, was rolled out to leaders. This system contains multiple resources to help leaders and staff cultivate a professional work environment.

The serious work in the deep dive departments began when employees of each deep dive department were called together to develop a Professional Practice Agreement. The Professional Practice Agreements focus on how we expect to be treated by others and how we will consistently treat one another. Healthy Workforce Champions were selected for each deep dive department. The champions have been



Cultivating a Healthy Workforce by Eradicating Bullying and Incivility workshop at LCMH Women's Campus

accountable for helping infuse a culture of caring into each department. The champions' overall purpose has been to carry a message of positivity and kindness with them at all times. We are looking forward to including six new deep dive departments in 2022!

Wellness Room

The ED staff were gifted an employee wellness room featuring a place for staff to "recharge" after stressful situations or before and after their shift. The room was requested after the devastation left behind by two major hurricanes that hit Lake Charles and surrounding areas. The room was designed by Victoria Nash, the ED Clinical Educator, and includes items such as a massage chair, yoga mats, weights, aromatherapy, and other spa-like items to promote calmness and mindfulness. This fully furnished room was graciously donated by the Professional Emergency Medicine Management (PEMM) physicians, Lake Charles Memorial's Emergency Care Partner group upon hearing of the request from the nursing staff.











Pickle Pledge

As part of our ongoing culture change initiative and kindness campaign, employees were invited to take the "Pickle Pledge". This lighthearted, fun initiative was kicked off by distributing pickles around the organization and having employees state "I will turn every complaint into either a blessing or constructive suggestion." By taking The Pickle Pledge, we promise to no longer





waste time and energy on blaming, complaining, and gossiping. This nationally known pledge uses pickles because so-called chronic complainers look like they were born with a dill pickle in their mouth. This idea was taken from TheFlorenceChallenge.com.

Pet Therapy

After battling the COVID-19 Pandemic for over a year, Anne Bonnette, manager of the COVID ICU wrote a letter to a national pet therapy organization pleading for help, and it was delivered to a local pet therapy group in Southwest Louisiana. Her letter explained the difficulties that Southwest Louisiana has faced in the last year, and the strain that has put on the nursing staff, especially. Anne asked if some therapy dogs could visit the nurses, even though, in the past, the dogs have visited patients. She was put in contact with Susan Stanford, Coordinator of Dr. Dogs Pet Therapy in Lake Charles, whose heart was touched by the personal letter. Several departments were able to come together to arrange a visit from the dogs starting twice a week. Dionne Francois, Director of Physical Medicine, was instrumental in organizing the pet visit with Sherry Schofield, Director of Volunteer Services, as well as other staff, including Gerald Bryant, Katelynn Dietz, Mindy Meyer, Megan Boudreaux, Missy Vanicor, Mona Daigle, Shawntel Willis, Jada Smith, and Mallorie Leidig. "Our group is filled with admiration and gratitude for the job the nurses do. We are so happy to do whatever we can to help. Thank you for your service. Our dogs love you," says Susan, on behalf of the entire organization. The mission of Dr. Dogs is to provide loving dogs and caring people for patients and nurses to relieve stress.









Wellness and Kindness Bulletin Boards





The ED team have 4 bulletin boards that are changed often to support concepts of the ED Professional Practice Agreement and employee wellness concepts.





2 Tower inpatient oncology had fun spreading kindness and focusing on caring for one another.





Pediatrics and PICU takes the lead in spreading cheer with their decorating skills no matter which holiday.



The Patient Safety and Quality Department joined in the kindness festivities.



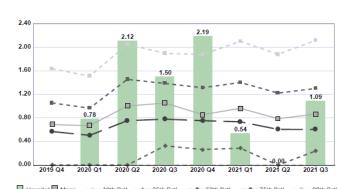
Family Birth Center committed to only spread and catch positivity.

Safety & Quality and Clinical Outcomes

National Database of Nursing Quality Indicators (NDNQI)

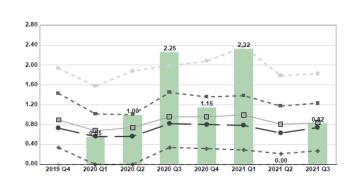
NDNQI is a database of Press Ganey that assists hospitals in tracking, trending, and comparing nurse sensitive indicators. It is a national, nursing quality measurement program that provides hospitals with unit-level performance comparison reports. We began tracking data for central line infections, catheter associated urinary tract infections, and patient falls in January 2020. The tables listed below help identify opportunities for improvement. The goal is to trend below the mean (green numbers are positive, red numbers are opportunities).

CLABSI: Laboratory Confirmed Blood Stream Infections per 1000 Central Line Days



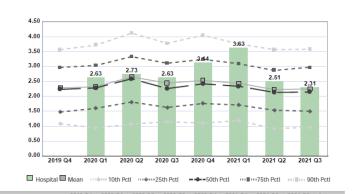
Metrics	2019 Q4	2020 Q1	2020 Q2	2020 Q3	2020 Q4	2021 Q1	2021 Q2	2021 Q3	Average
Hospital-Unadjusted Measure	No Data	0.78	2.12	1.50	2.19	0.54	0.00	1.09	1.17
Mean	0.69	0.67	1.01	1.05	0.86	0.96	0.79	0.87	0.86
Standard Deviation	0.68	0.96	1.21	1.74	0.82	1.01	0.83	0.91	1.02
10th Percentile	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
25th Percentile	0.00	0.00	0.00	0.33	0.26	0.29	0.00	0.24	0.14
50th Percentile (Median)	0.57	0.51	0.76	0.78	0.76	0.74	0.61	0.61	0.66
75th Percentile	1.06	0.97	1.46	1.39	1.31	1.40	1.22	1.30	1.26
90th Percentile	1.64	1.51	2.05	1.90	1.88	2.11	1.88	2.12	1.89
# Hospitals	237	229	208	241	243	254	261	249	240.25

CAUTI: Catheter Associated Urinary Tract Infections per 1000 Catheter Days



Metrics	2019 Q4	2020 Q1	2020 Q2	2020 Q3	2020 Q4	2021 Q1	2021 Q2	2021 Q3	Average
Hospital-Unadjusted Measure	No Data	0.55	1.00	2.25	1.15	2.32	0.00	0.82	1.15
Mean	0.90	0.68	0.74	0.96	0.96	1.00	0.81	0.84	0.86
Standard Deviation	0.84	0.78	0.90	0.80	0.91	1.00	0.89	0.75	0.86
10th Percentile	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
25th Percentile	0.34	0.00	0.00	0.34	0.32	0.29	0.22	0.28	0.22
50th Percentile (Median)	0.73	0.56	0.56	0.82	0.81	0.79	0.63	0.74	0.71
75th Percentile	1.43	1.02	1.00	1.45	1.36	1.39	1.18	1.24	1.26
90th Percentile	1.94	1.57	1.88	1.99	2.08	2.37	1.79	1.83	1.93
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Falls: Total patient falls per 1,000 inpatient days



1.15

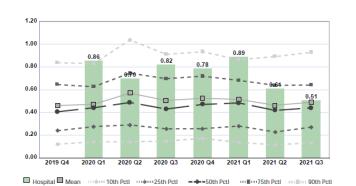
2.26

3.78

3.57

4.12

Falls: Percent of patient falls that were of moderate or greater injury severity



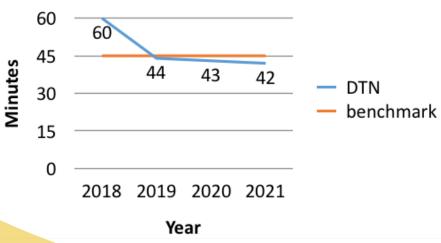
metrics	2019 Q4	2020 Q1	2020 Q2	2020 Q3	2020 Q4	202 I Q I	2021 Q2	2021 Q3	Average
Hospital-Unadjusted Measure	No Data	0.86	0.70	0.82	0.78	0.89	0.61	0.51	0.74
Mean	0.46	0.47	0.57	0.51	0.53	0.52	0.46	0.49	0.50
Standard Deviation	0.30	0.28	0.40	0.33	0.36	0.33	0.32	0.32	0.33
10th Percentile	0.12	0.14	0.14	0.15	0.17	0.14	0.12	0.13	0.14
25th Percentile	0.24	0.28	0.29	0.26	0.26	0.28	0.23	0.27	0.26
50th Percentile (Median)	0.41	0.44	0.49	0.43	0.47	0.48	0.42	0.44	0.45
75th Percentile	0.65	0.63	0.75	0.70	0.72	0.68	0.64	0.64	0.67
90th Percentile	0.84	0.83	1.04	0.91	0.94	0.86	0.89	0.93	0.90
# Hospitals	291	299	282	308	300	310	320	316	303.25

Performance Improvement

Stroke: Thrombolytic Therapy

The American Stroke Association states the benefit of thrombolytic therapy is time dependent and treatment should be initiated quickly for the best possible outcome. The Gold Standard for thromboloytic administration is 60 minutes from arrival with new *Target: Stroke* guidelines suggesting tighter time intervals of 45 minutes from arrival for improved patient outcomes. With thrombolytics being part of the ER's performance improvement plan, time to treatment has consistently improved and remained beneath the tightened goal.





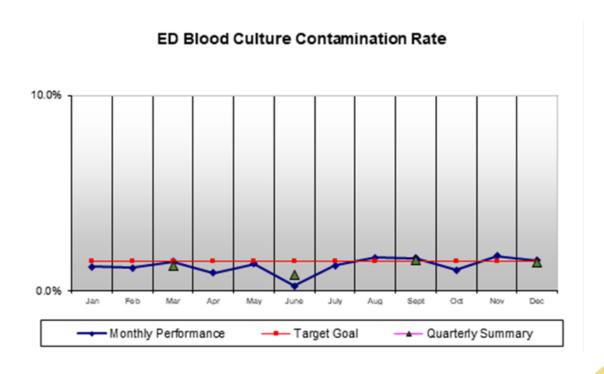
Emergency Department Blood Culture Contamination

In December 2020, we began an initiative to address the emergency department contamination rates and make staff aware of this on a monthly basis. The biggest contiributing factors identified contributing to these contamination rates were local disasters, lack of compliance with Steripath, and lack of positive reinforcement. Prior to this implementation, staff were notified one on one when they had a contamination but no one was praised for NOT having contaminations. We chose to switch the narrative and began recognizing individuals every month for having 0% contaminations. Since Dec 2020, the monthly process is as follows:

- Monthly contamination report sent to all staff via GroupMe. All staff can see who has 0% for the month and who has contaminations for the month. They can also see our monthly contamination rate.
- All staff who have 0% for the month are recognized via names placed on white board at the nurse's station.
- Staff who have consecutive months of 0% for 6 months or greater are additionally recognized via congratulatory flyer posted in nurses station and extra shout outs in GroupMe.
- Staff who achieve 12 months of consecutive 0% contaminations receive a thank you gift for exemplary care and are recognized in monthly staff meetings. (We have had one employee achieve this, paramedic Paul Comeaux, who received a duffle bag)
- Any staff who have more than 1 contamination for 2 consecutive months are assigned remediation education in ELSIE.

The staff has responded so well to the positive reinforcement, rather than negative. It has naturally increased compliance with the Steripath device. Several of them are very concerned about keeping their consecutive streaks going and their competitive nature definitely comes out!

The diagram below demonstrates how the team has been at or better than the target goal since January 2021.



Hospital Consumer Assessment of Healthcare Providers and Systems Scorecard (H-CAHPS)

	Lake Charles Memorial for Women														
Category	Top Box Goal (CMS 50th%)	2021 YTD %tile n=147	4thQtr Qtr 2021 Prelim n=28	3rdQtr Qtr 2021 n=27	2nd Qtr 2021 n=41	1st Qtr 2021 n=51	Category	Top Box Goal (CMS 50th%)	2021 YTD %tile n=147	4th Qtr 2021 Prelim n=28	3rdQtr Qtr 2021 n=27	2nd Qtr 2021 n=41	1st Qtr 2021 n=51		
Comm w/ Nurses	80%	87.70% 94	86.90% 93	85.19% 88	89.4% 96	90.8% 97	Comm about Pain	TBD	N/A N/	N/A N/A	N/A N/ A	N/A N/ A	N/A N/		
Comm w/ Doctors	81%	95.61% 99	95.24% 99	94.97% 99	94.3% 99	96.1% 99	Comm about Meds *side effects*	65%	77.97% 99	72.73% 96	82.14% 99	77.5% 98	80.4% 99		
Nurses treat with Courtesy/Respect	NA	90.98% 88	92.86% 93	88.89% 74	92.2% 79	92.2% 89	Care Transitions *staff took preferencs into account*	52%	73.10% 99	58.60% 83	83.57% 99	65.00% 93	66.7% 96		
Response of Hospital Staff	68%	83.10% 98	86.11% 99%	85.33% 98	90.5% 99	78.1% 93	Discharge Info *staff talk about help when you left*	88%	90.83% 87	83.93% 29	90.74% 85	89.7% 74	96.1% 98		

Overall Hospital														
Top Box Goal (CMS 50th%)	2021 YTD %tile n=886	4th Qtr Prelim 2021 n=208	3rd Qtr 2021 n=236	2ndQtr 2021 n=218	1st Qtr 2021 n=224	Category	Top Box Goal (CMS 50th%)	2021 YTD %tile n=886	4th Qtr Prelim 2021 n=208	3rd Qtr 2021 n=236	2nd Qtr 2021 n=218	1st Qtr 2021 n=224		
80%	81.20% 71	77.56% 45	82.03% 73	81.0% 62	83.8% 82	Comm about Pain	TBD	N/A N/A	N/A N/ A	N/A N/ A	N/A N/	N/A N/A		
81%	87.39% 91	85.99% 88	86.93% 90	89.2% 94	87.4% 90	Comm about Meds *side effects*	65%	66.21% 84	65.94% 83	66.99% 47	61.0% 47	66.1% 79		
NA	86.77% 61	85.10% 48	88.56% 71	84.5% 36	88.5% 69	Care Transitions *staff took preferencs into account*	52%	57.98% 80	51.86% 55	60.17% 86	56.5% 72	56.2% 72		
69%	68.21% 76	66.02% 69	70.38% 78	69.0% 71	67.2% 68	Discharge Info *staff talk about help when you left*	88%	85.48% 42	82.46% 20	87.69% 60	84.1% 25	87.2% 51		
	Goal (CMS 50th%) 80% 81% NA	Top Box Goal %tile n=886 80% 71 81% 87.39% 91 NA 86.77% 61	Top Box Goal %tile n=886 Prelim 2021 n=208 80% 81.20% 77.56% 45 81% 87.39% 85.99% 88 NA 86.77% 61 85.10% 48	Top Box Goal %tile n=886 n=208 n=236	Top Box Goal (CMS 50th%) 2021 4th Qtr Prelim 2021 n=286 n=208 n=218 n=218	Top Box Goal (CMS 50th%) 2021	Top Box Goal (CMS 50th%) Top Box Goal (CMS 5	Top Box Goal (CMS 50th%)	Top Box Goal (CMS 50th%) Top Box Goal (CMS 50th%) Prelim 2021 n=208 Top Box 2021 n=218 n=218 Top Box 2021 n=286 Top Box 30th% To	Top Box Goal (CMS 50th-%) Top Box Goal (CMS 50th-%) Top Box Hill (CMS 50th-%) Top Box Goal (CMS 50th-%) Top Box Hill (CMS 50th-%) Top Box Hill (CMS 50th-%) Top Box Goal (CMS 50th-%) Top Box Hill (CMS 50th-%) Top Box Hill (CMS 50th-%) Top Box Goal (CMS 50th-%) Top Box Goal (CMS 50th-%) Top Box Goal (CMS 50th-%) Top Box Hill (CMS 50th-%) Top Box Goal (CMS 50th-%)	Top Box Goal (CMS 50th/%) Top Box Goal (CMS 50th/%) Top Box Hill (CMS 50th/%)	Top Box Goal (CMS 50th%) Top Box Goal (CMS 50th%) Top Box Goal (CMS 50th%) Top Box Hollow (CMS 50th%) Top Box Goal (CMS 50th%) Top Box Hollow (CMS 50th%) Top Box Goal (CMS 50th%) Top Box Hollow (CMS 50th%) Top Box Goal (CMS 50th%) Top Box Hollow (CMS 50th%) Top Box Goal (CMS 50th%) Top Box Goal (CMS 50th%) Top Box Goal (CMS 50th%) Top Box Hollow (CMS 50th%) Top Box Hollow (CMS 50th%) Top Box Goal (CMS 50th%) Top Box Goal (CMS 50th%) Top Box Goal (CMS 50th%) Top Box Hollow (CMS 50th%) Top Box Goal (CMS 50th%) Top Box Hollow (CMS 50th%) Top Box Hollow (CMS 50th%) Top Box Goal (CMS 50th%) T		

	O <u>verall Hospital YTD</u> 2018-2019-2020-2021													
Category	Top Box Goal (CMS 50th%)	2021 YTD %tile n=886	2020 YTD %tile n=1021	2019 YTD %tile n=1262	2018 YTD %tile n=843	Category	Top Box Goal (CMS 50th%)	2021 YTD %tile n=886	2020 YTD %tile n=1021	2019 YTD %tile n=1262	2018 YTI %tile n=843			
Comm w/ Nurses	80%	81.20% 71	80.3% 54	80.8% 50	78.6% 34	Comm about Pain	TBD	n/a n/a	66.7% 65	67.8% 65	64.9% 53			
Comm w/ Doctors	81%	87.39% 91	85.1% 82	87.0% 85	85.1% 77	Comm about Meds *side effects*	65%	66.21% 84	62.8% 59	66.6% 70	65.3% 57			
Nurses treat with Courtesy/Respect	NA	86.77% 61	85.9% 44	87.0% 44	85.3% 38	Care Transitions *staff took preferencs into account*	52%	57.98% 80	55.2% 67	56.8% 67	54.2% 54			
Response of Hospital Staff	69%	68.21% 76	64.1% 50	68.2% 57	64.3% 34	Discharge Info *staff talk about help when you left*	88%	85.48% 42	84.9% 29	85.7% 28	84.0% 19			

Above or At CMS TOP BOX 50% percentile Below CMS TOP BOX 50% percentile

Evidence Based Practice, Research, and Innovation



Lake Charles Memorial Hospital for Women: The GIFT Re-Designation 2021

The GIFT is a State of LA Department of Health, breastfeeding designation. We received initial designation in 2017. Each year we must submit a "maintenance" application which consists of data related to initiation of breastfeeding, exclusive breastfeeding (no formula), maintaining skin to skin with the newborn within the first hour after birth and throughout the hospital stay, newborn rooming-in with mom for at least 23 hours per day, surveys of staff and patients regarding breastfeeding preparedness and education, staff and provider training and improvement projects we are working on. Every 2 years, we submit

an application for recertification with these same measures. Monthly collaborative calls occur with other hospitals in the state who are participating in the program. Quarterly meetings are also held with our facility and the LAPQC administrative team. Data is collected monthly and reported, along with narratives surrounding improvement projects we are currently working on.

First Infant Safe Sleep Certified Hospital in Louisiana

Cribs for Kids extended their congratulations to Lake Charles Memorial for Women for attaining the National Safe Sleep Certification Program's highest designation, Gold Safe Sleep Champion. LCMH for Women is the first hospital in Louisiana to achieve this recognition. This designation demonstrates commitment to community leadership for best practices and education on infant safe sleep through the development of hospital policy, staff training, parent education, implementing a wearable blanket program, providing a safe sleep space to at risk families, and a pledge to participate in ongoing audits and community outreach programs.



Stroke Re-certification

Lake Charles Memorial hospital is Stroke Certified through The Joint Commission's Disease – Specific Care Certification Program which provides an objective assessment of clinical excellence within an organization, and successfully recertified in September 2021. Program criteria include: performance improvement measures, ongoing staff education, community outreach, and demonstration of competencies.



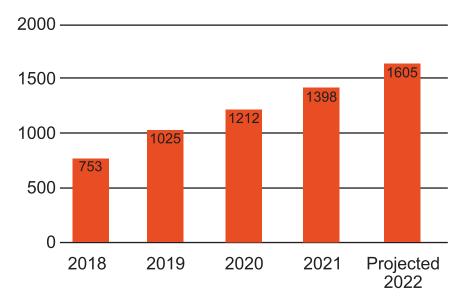
In addition to recertification, LCMH expanded their contract with Tulane Expert TeleConsulting to include inpatient teleneurology

in order to improve neurology coverage for stroke patients. Telemedicine has been integral in changing acute stroke care and inpatient teleneurology allows for an interdisciplinary approach on the inpatient unit as well as the emergency department.

Trauma

In 2021, the trauma department held several educational opportunities for nurses. We were able to host 2 TNCC courses that were booked to capacity with ED, ICU, and 5T nurses. We held a Trauma Bootcamp in the spring of 2021. New graduates in the ED attended and went through a trauma case scenario where they learned chest tube and thoracotomy set up, rapid infuser use, and our Mass Transfusion Protocol. New yearly competencies were introduced to the ED staff, including education on the rapid infuser and proper ratios for blood product administration. The trauma nurse practitioners held 4 classes for all of the inpatient units to attend and learn about chest tube management.

Current research indicates the leading cause of death from trauma is uncontrolled hemorrhage. Because of this, the trauma department's main performance improvement project was decreasing the time from recognition of hemorrhagic shock to blood product administration. We were able to change our processes and reached our goal of administering blood products in less than 10 minutes 100% of the time.

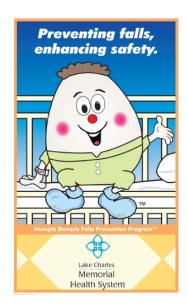


Our overall trauma census has increased very year for the last 4 years. Our projected trauma cases for 2022 based on increase is 1,605 patients.

Pediatrics/PICU: Humpty Dumpty Fall Risk Scale

In 2021, Pediatrics and PICU implemented the use of the Humpty Dumpty Fall Prevention Program, an evidence based fall risk assessment tool specifically for the pediatric population. The Humpty Dumpty Fall Prevention Program has been implemented, tested and proven to be an effective tool in the prevention of unintentional injury due to falls.

Studies show that most falls in pediatrics occur in the presence of an adult in the hospital. This fall prevention program incorporates patient and family education to promote patient safety by identifying those patients who may be high risk. Policy updates and staff education on this program were implemented. Since implementation, the department has been monitoring the use of appropriate interventions for patients who screen high risk.



COVID Infusions

Lake Charles Memorial nurses are committed to meet the needs of the community that we serve. Over the past year, we have had a large number of referrals from other healthcare systems that did not have the resources to meet the demand. Nurses came together including managers and directors from various units to administer monoclonal antibody infusions to almost 60 patients in one day during a COVID surge in the area. A total of 2208 infusions were given over the past year helping patients recover quickly and avoid hospitalization.



2021 Nurse Residency Program

During 2021, the Lake Charles Memorial Health System's Evidence-Based Nurse Residency Program provided a variety of activities and learning opportunities to our newly graduated nurses. The program specifically focuses on the unique need of the nurse during their first year of practice. This is the most vulnerable time for nurses and is a deciding factor in their decision to continue in the profession.

As in previous years, facilitator groups were utilized as an integral way to help the residents de-stress and talk about their experiences. The residents also participated in activities that provided assistance with improved communication skills, decision making skills, time-management skills and the creation of a professional portfolio. The residents also provided suggestions on issues that were being collectively experienced by the current cohort. These issues were addressed using hospital resources and speakers associated with the areas of concern.

During this year, the residents also worked on evidence-based research projects that were showcased at their final meeting. The managers, facilitators and administration are invited to this meeting to view the project presentations. These projects bring to light new nursing practices and are considered when policy changes are made. These projects are posted on the individual units the residents are employed on, and they hopefully will ignite the spirit of inquiry and life-long learning throughout our healthcare system.



















COVID-19 Response: The Nurse's Perspective

"Throughout the pandemic, 7T nurses including new graduate nurses, have been innovative in their care delivery, adapting to many different roles in an attempt to reduce exposure to others. 7T nurses quickly became more efficient in clustering care. They took on the role of the phlebotomist and many times of the respiratory therapist in managing breathing treatments and oxygen delivery systems (oxymizer, airvo, vapotherm, bipap), not to mention physical therapy, case management and housekeeping. 7T nurses worked with the pulmonologists in providing data on the patients receiving convalescent plasma to do their part in this extremely important research.

In addition to carrying out the rigorous care plan for each COVID patient, including breathing exercises, prone positioning, meeting increasing oxygen demands, etc., the nurses frequently provided reassurance to the fearful, anxiety ridden patients. The 7 Tower nurses grew weary as they looked into the eyes of many patients struggling to breathe despite their best efforts. Tears flowed daily as their beloved patients were moved to the ICU.

In providing holistic care, the nursing staff made it a priority to communicate with a family member of each COVID patient, either via Zoom, Facetime, or phone call. Many stayed after their shifts to sit with a patient, to provide comfort, to pray with them, to support them and unfortunately at times to hold their hands as they passed away." - Christiana Engel

This is an all too familiar story of many nursing units across our organization and across the world. At LCMHS, every department has been impacted by the pandemic in some form or fashion. Even nursing units that were not dedicated as COVID units, were left to deal with the daily stress of staffing issues. More experienced nurses were often pulled from "non-COVID" nursing units to fill the needs of the highest acuity patients. Medical-surgical nurses learned how to work ventilators and airway equipment that was foreign to some. Our intensive care units went from being medical ICU and surgical ICU to non-COVID ICU and COVID ICU. Surgical services and invasive cardiology had to adapt their surgical suites and procedure rooms as well as their processes. Family Birth Center and NICU had to use innovative measures to protect their laboring mothers and the youngest of our population. Our emergency department had to deal with the influx of contagious and potentially contagious patients while juggling the typical demands of this fast-paced environment. All nurses across the organization had to adapt to new ways to don and doff PPE and even adapt to a shortage of PPE. Our employee health nurses were left with the challenge of performing and tracking COVID testing, vaccinations, positivity rates, etc. With infection control, patient care, and COVID testing guidelines frequently changing, our nurses pushed forward and "did what they had to do" to take the best possible care of our patients, our community, and each other.





Surgical Services: Shawna Ardoin & Stephanie Armentor

"We are so proud of how our team embraced the change in the face of the unknown. Juggling the scheduling of patients to make sure our COVID positive patients were cared for separately from the other surgical patients was often a challenge, yet our staff still made every COVID patient feel respected. The team found ways to provide the highest standard of care despite the challenges."



Pediatrics/ PICU: Gina Barnes & Elaine Cooley

"We are proud of our team for being able to work together and support the units who had a higher census during the COVID surges. Then as COVID began affecting the pediatric population, we were able to learn and discover how to properly care for new disease processes and post COVID conditions."



9 Tower Medical ICU: Sean Stickney

"I was most proud of my unit when we worked as a team while caring for the most critical patients. Identifying when intubation of a patient was needed, the actual care of the intubated patient, proning patients, etc., was very much a team effort. Our motto was 'Face down, sats up'.



3 Tower Surgical ICU: Shantelle Richard

"Our team pulled together and became extremely cohesive. They supported one another as some remained on 3T to form the medical-surgical ICU and others were pulled to 9T to form the COVID ICU. During these uncertain times, we often felt like we pulled off the impossible when caring for some of our patients."



7 Tower Medical Surgical: Chris Engel and Samantha Trahan

"We confronted our fears. At times we felt like we were running into a burning building while others were running out."



2T Oncoloogy: Brittany Medley, Calire Heinen, & Leila Hussain

"Our staff exhibited flexibility and dedication when we converted our unit to an additional COVID unit. These were scary times, but our 2T staff were proud to be a sister COVID unit when our community needed us most. It was a challenge to remain positive throughout the multiple surges, but our 2T family is strong and resilient."



Emergency Department: Monica Carroll

"The ED staff has endured so much since the beginning of COVID-19. There are not enough words to express how proud I am to be part of this team. We physically had to restructure our ER and rethink patient intake processes to protect our patients and our staff. Constant changes came with constant fears. Despite the fear of the unknown, the ED team never lost their compassion for their patients. Our staff persevered while balancing their home lives (storm damage, kids out of school due to COVID and hurricanes, and personal COVID illness). It's like we were soldiers being called to duty; we all knew we just had to a job to do. Seeing such dedication and resilience of our nurses makes me so proud."



8 Tower Cardiac-Telemetry: Troy Duhon and Cortney Cowley

"Since we were a support unit to the dedicated COVID floors, many of our nurses were pulled to work the COVID units due to the high acuity of these patients. It was tough not consistently having our usual nurses at times but we are grateful for the opportunity to have worked with nurses from so many different areas that we otherwise would not have worked with. This allowed us to develop a relationship with these nurses which we think helped us gain a better understanding of one another. Seeing how nurses from different areas do things gave us a fresh perspective. It also helped us to have a little more empathy for one another." Cortney added that she began her career during the pandemic so "I really do not know any different other than navigating patients during the COVID crisis. I do know that working with nurses from around the organization has helped me grow as a nursing professional and I have learned so much in this past year."



5 Tower Ortho-Neuro-Trauma: Kennedy Wilson and Kiuana Wilson

"Our role was to be a support to the designated COVID units. It was challenging to send our staff to other units, but we knew we were needed to help our sister floors."



LCMH for Women-Family Birth Center: Kayla Cannon

"When COVID started, the uncertainty of healthcare as a whole became a first for us. We were uncertain of what COVID would do to a pregnant mom. Does it cross the placenta? Does it cross into the breast milk? What happens postpartum? Does it affect pregnant women worse? Moms were scared for themselves and for their babies and we had to navigate the fear and mental health battle alongside the clinical pandemic side of it all. We had to learn an entire new way of doing maternal healthcare while making sure we keep this place a sacred place for new life to enter the world. Visitation restrictions were put in place, so while the medical-surgical world may have been saying goodbye to their families over FaceTime, we were saying hello to their newest family member when some moms had to experience childbirth alone. I am most proud of the Family Birth Center for giving the absolute best maternal care while being a strong support system for our patients and their families."



LCMH for Women- NICU: Allison Keeley and Sylvia Downing

"I am so proud of the initiative the nursing staff took to make sure parents were still able to connect with their baby, even if that meant utilizing Facetime on their personal phones. It was such a challenge having to keep parents separated from their newborn minutes after birth in order to make sure everyone was kept safe. Even though it was the right thing to do, it was heartbreaking at the same time. Reflecting back on the past couple of years, I realize that the pandemic further validated our teamwork and our ability to think outside the box, while still providing high-quality care."



4T Medical-Surgical: Danielle Kirkland, Jada Smith, and Rose Devones

"MLK said, 'Faith is taking the first step even when you don't see the whole staircase'. It took faith that we didn't even know we had to accept the charge of being the first dedicated COVID unit back in March 2020. We didn't know what lied ahead, but we were certain that God would order our steps in our mission to save as many lives as possible."



True Resiliency

Providing care for COVID patients has been challenging for nurses all across the globe with the psychological and physical distress placed upon them, however, care of the COVID patient has been even more demanding here in Lake Charles, Louisiana. During the first wave of COVID patients, the community of Lake Charles was ravaged by a category 4 (debatably category 5) hurricane. Last minute storm concerns required evacuation of Lake Charles Memorial for Women. Women's campus staff along with nineteen NICU babies were relocated to the Oak Park Campus. Hurricane Laura did enough damage to the hospital structure and utilities that evacuation was required for the safety of patients in the days after the storm had passed. Until all patients were safely transported, the nurses and interdisciplinary team maintained excellent care of all our patients despite dealing with sweltering heat and condensation making normal PPE requirements difficult. The nursing staff quickly became aware that they not only needed to closely monitor the patients but also their coworkers to ensure they were hydrated and navigating safely.

Day and night shift staff experienced grueling conditions which required constant interventions to keep our patients safe, such as, moving patients away from the windows with the threat of breaking glass from high winds, continuous mopping of water on the floors, and wetting rolled up washcloths then placing them on ice to provide cooling comfort to patients.

Many of the staff was beginning to get word that their homes were destroyed and that their own family members were in difficult situations. Again the nursing staff pulled together through tears and hugs to support each other while continuing to provide excellent care to our patients.

Just six short weeks later, our community was hit with another major storm, Hurricane Delta. An already traumatized community sustained further damage to their homes and our hospital experienced additional devastation. As the LCMHS family began to recover physically and emotionally, our community was hit with an ice storm which crippled our travel conditions, power, and water supply in February 2021. In May, we thought all our bad luck was over, then a major flood occurred bringing a massive amount of water into homes and vehicles. While dealing with storm clean up, insurance claims, FEMA, etc., our team stuck together and cared for our patients COVID surge after COVID surge.

Although Mother Nature is not typically part of a Nursing Annual Report, it is important that we look back on our previous experiences and truly reflect how resilient our nurses, teams, families, and communities have been. Taking a walk down memory lane may not be pleasant for most when we think about 2020 and 2021, but so many beautiful stories of compassion, empathy, and survival have arisen. Despite our current struggles with nationwide staffing shortages and burnout, our healthcare team at LCMHS continues to prove that we are strong, dedicated people who ban together when times are tough.









