We Are Nursing
at Levine Cancer Institute
Dear Levine Cancer Institute Nursing Colleagues,

As expected, 2017 was a hectic year of growth and advancement, yet nursing excelled like never before! Across the Levine Cancer Institute (LCI) network, nurses published journals and abstracts, spoke at national and local conferences, presented oral and poster presentations, implemented evidence-based practices, conducted research studies, increased education and certification rates, increased nurse satisfaction scores and completed all this successfully, I might add, while taking care of the patient – the reason we are all here!

We have spent a great deal of energy on leadership growth and development, believing that focusing on such a topic would enhance the professional practice environment for all disciplines. Nursing is critical to the care we provide to our patients, but also the interdisciplinary work we do, day in and day out. Nurses add value! Nurses contribute to the success of Levine Cancer Institute.

I am proud to report that our nursing engagement is the highest it's ever been, while the nurse turnover is the lowest. We have the highest certification rate and the highest advanced degree rates since the inception of LCI. We have an increasing structure for standardization and data-driven work, which only strengthens our mission and vision – to provide cancer care without walls.

We have had many successful regulatory surveys, certification, re-certification and accreditation visits over the past year – all related to the quality, safety and excellent nursing care you have provided to our patients, caregivers and teammates.

You, my nursing colleagues, set aggressive goals for yourselves, and you achieved them. I am honored, blessed and so proud to be among you every day.

In sincere appreciation,

Candice Roth, MSN, RN
Assistant Vice President – Central Region Operations, Nursing and Quality
Levine Cancer Institute
Atrium Health
~Why Oncology Nursing Is Special~
By Angela Hosking, MBA, MSN, RN, OCN, NE-BC, Director, Central Operations and LCI Nursing

“I’m sorry. That must be so hard.” That’s usually the response I get when I tell people that I am an Oncology Nurse.

When I try to explain that we, oncology nurses, are the luckiest in the profession, they look at me quizzically. “Aren’t you sad all the time?”

Well sometimes, yes.

But most of the time we are grateful to be part of the journey for our patients. Most of the time we find ourselves being privileged to be part of the tight support circle for the bravest of the brave. We become part of an exclusive team that is entwined in helping to guide, support, educate, care for, grieve alongside and celebrate with those patients who did not choose their diagnosis.

I understand the reaction. When I was a nursing student I remember making a blanket statement that I was never going to be an oncology nurse. There was no way that I could watch a patient fight for their life and lose. I believed being an oncology nurse was a calling and that I did not have that “special something” those nurses possessed.

I truly believed that. Until I had my first oncology patient.

She was young. Younger than me. A mom, a daughter, a sister and a passionate elementary school teacher. She was living her life in a full and fulfilling way when ovarian cancer knocked on her door. When I cared for her the first time, she was recovering from a dramatic abdominal surgery and coming to grips with the diagnosis – Stage 4 ovarian cancer. We focused first on her post-operative recovery for the first few days, but as the diagnosis began to sink in, I found our conversations turning to how to be a survivor and have hope. I became her cheerleader, her confidant when her family went home and her advocate as a nursing professional. I saw her when she was the most vulnerable. In pain. Frightened.

As a night-shift nurse, I was used to the “what-if” thoughts that plagued my patients in the night when the comfort of family departed. That is when they usually allowed their nurse to see what they were really feeling. When faces of feigned bravery for their families could relax.

Over the next 18 months, I was lucky enough to care for her many times. Even if she wasn’t “my patient,” I made sure to check on her every time she was admitted for symptom management or pain control. I learned what worked and what didn’t when she was having a bad night. I knew the right mix of bland food that she could tolerate when the nausea was bad. I helped her make a list of all the things she wanted to remember to tell her daughter when her mind was fuzzy. Sometimes I even made her laugh with my corny jokes and helped her forget for a moment that she was dying. When she lost her battle, I was there. I made sure she wasn’t in any pain. I made sure that her favorite blanket was tucked around her just so and her family was supported.

Oncology nurses know the secret. We all belong to a secret society that we wouldn’t have any other way. Sadness is just part of the experience.

We just feel lucky to have been along for the ride.
Levine Cancer Institute Locations

World-class cancer care, close to home. Professional oncology nursing at Levine Cancer Institute is practiced at the following locations.

<table>
<thead>
<tr>
<th>CLINICS AND/OR INFUSION SERVICES</th>
<th>RADIATION ONCOLOGY</th>
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<tbody>
<tr>
<td>AnMed Health Cancer Center</td>
<td>LCI - Cleveland Radiation Oncology</td>
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<td>Donayre Cancer Care Center</td>
<td>LCI - Lancaster Radiation Oncology</td>
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<td>LCI</td>
<td>LCI - NorthEast Radiation Oncology</td>
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<td>LCI - Albemarle</td>
<td>LCI - Pineville Radiation Oncology</td>
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<td>LCI - Ballantyne</td>
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<td>LCI Blue Ridge - Morganton</td>
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<td>LCI Blue Ridge - Valdese</td>
<td>LCI - Stanly Radiation Oncology</td>
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<td>LCI - Cleveland</td>
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<td>The Center for Supportive Care and Survivorship</td>
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Nursing Engagement

2017 NURSING ENGAGEMENT AS MEASURED BY PRESS GANEY

How Registered Nurses perceive their professional practice environments is important in that it often mirrors how patients experience care.

Levine Cancer Institute outperformed the national registered nurse average in every category in 2017, with our highest scores yet. Many questions performed in the TOP DECILE nationally. Strong scoring categories included:

RN to RN Teamwork and Collaboration and Fundamentals of Quality Nursing Care.

![Graph showing nursing engagement scores for Levine Cancer Institute (LCI) and national registered nurse average in 2017.](image-url)
Patient Satisfaction with Nursing Care

AS MEASURED BY PRESS GANEY

Our goal for 2017 was to maintain or exceed our performance in 2016, which was 84.3% Top Box for Standard Overall Assessment.

LCI exceeded the goal for the Standard Overall Assessment in 2017 with 85% of patient respondents rating us Top Box.

NURSING-SENSITIVE SURVEY CATEGORIES

- Nurse Uses Words You Understand
- Nurse Promptly Answered Phone Questions
- Friendliness/Courtesy of Nurse/Assistant for Your Problem
- Concern of Nurse/Assistant for Problem
- How Well Staff Protect Safety (Hand Hygiene)
- Sensitivity to Needs
- Pain Controlled

Performance in the following nursing-sensitive categories all ranked nationally in the top decile with one exception: “Nurses Use Words You Understand.” (In response, our 2018 ongoing nurse competencies include a competency on health literacy across LCI.)
Pain Assessment

LCI PATIENT CARE TRACERS
Managing our patients’ pain appropriately is important to LCI nurses. In addition to measuring our patients’ perception of how well we are controlling their pain, we measure how consistently we are documenting pain assessment and response to medications (when given). In 2017, nurses submitted over 2,000 chart audits. Our documented pain assessment and response to medications when they were given was 95.6% and 94.6%, respectively. Our goal is 100%.
Education and Certifications

Formal nursing education and professional nursing certification matters – to patients, their families and to each other.

Per information entered into API Shift Select through December 31, 2017:

- 58.6% of LCI RNs have earned a Bachelor of Science degree in Nursing or higher formal Nursing education degree

Levine Cancer Institute nurses have been achieving professional certification in record numbers in 2017.

- 36% of LCI RNs have earned their professional nursing certification

Our nurses benefit from our Oncology Nursing Certification Corporation (ONCC) Freetake contract which eliminates the need for nurses to pay out of pocket to sit for an ONCC exam and then have to wait for reimbursement upon passing the exam.
Nurse Turnover

RN turnover at Levine Cancer Institute has decreased from 13% in 2016 to 11.2% in 2017. Our RN turnover rate is lower than the national average of 14.6% and very close to the ANCC Magnet average of hospitals with >701 beds of 11.39%.

This lower than average RN turnover reflects continuous work to strengthen our professional practice environments. This work saves resources in that cost estimates for nurse recruitment and training range from $37,700 to more than $58,400 per nurse turnover (NSI Nursing Solutions, Inc 2016). Average hospital cost estimates related to this turnover are as high as $5.2 million to $8.1 million, with each percent change in the rate costing an additional $373,200.

American Nurse Credentialing Center (ANCC), April 2017
Accreditations

PLANETREE
Levine Cancer Institute achieved Planetree patient-centered organization designation in December of 2016, making it the first and only ambulatory cancer network center worldwide to date to earn this designation. To achieve the designation, Levine Cancer Institute has undergone rigorous site survey visits by a team of Planetree representatives which included focus groups with LCI patients, families, physicians and teammates validating that over 50 specific patient-centered criteria were in place at each location. This is the highest achievement in patient and person-centered care.

BLOOD AND MARROW TRANSPLANT CLINICAL TRIALS NETWORK
The Blood and Marrow Clinical Trials Network (BMTCTN) is funded through two divisions at the National Institutes of Health - the National Heart, Lung, and Blood Institute (NHLB) and the National Cancer Institute (NCI). Levine Cancer Institute was recently approved to be part of a consortium with Northside Hospital in Atlanta and the University of Miami.

- Network established in October 2001 to conduct large multi-institutional clinical trials
- Address important issues in Hematopoietic Stem Cell Transplantation, thereby furthering the understanding of the best possible treatment approaches
- 20 Institutions/Consortia
- Immediate access to transplant clinical trials
- Responsible for recruiting, examining and treating study participants
- Participating BMTCTN investigators collaborate through an organization designed to maintain continuity of operations, to facilitate effective communication and cooperation among participating transplant centers and with collaborators at the National Institutes of Health, and to offer trials participation to patients in all regions of the United States
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NATIONAL ACCREDITATION PROGRAM FOR BREAST CENTERS
The National Accreditation Program for Breast Centers (NAPBC) represents a consortium of national professional organizations dedicated to the improvement of the quality of care and monitoring of outcomes of patients with diseases of the breast. This mission is pursued through standard-setting, scientific validation, and patient and professional education. The NAPBC Board of Directors has worked diligently to ensure multidisciplinary leadership representation and to include nationally recognized breast cancer quality performance measures in the NAPBC that serve as a platform for measuring quality improvement.

LCI is preparing for its 4th accreditation. Accreditation lasts for three years. Our LCI Breast Program professionals have held this accreditation since 2009.

COMMISSION ON CANCER
The Commission on Cancer (CoC), a program of the American College of Surgeons (ACoS), recognizes cancer care programs for their commitment to providing comprehensive, high-quality and multidisciplinary patient-centered care. Accreditation demonstrates that the LCI cancer program is dedicating resources to provide the best treatment and support to our patients with cancer. LCI has achieved CoC accreditation with commendation since 2013. Oncology nursing plays an integral role in this important accreditation.
QUALITY ONCOLOGY PRACTICE INITIATIVE

The QOPI® Certification Program (QCP™) provides a three-year certification for outpatient hematology-oncology practices. QCP validates processes that demonstrate to patients, payors and the medical community a practice’s commitment to quality. Our LCI nurses provide the education, data abstraction, review all QOPI standards and ensure adherence to the standards.

MAGNET

Magnet Recognition® from the American Nurses Credentialing Center (ANCC) is the highest accreditation for nursing excellence and quality patient care a healthcare organization may achieve. LCI sights on the campus of Carolinas Medical Center have been Magnet (R) designated since 2013.

Inaugural LCI DAISY Nurse Leader Award

Brenda Crump, MSN, RN, CRN; Nurse Manager, Ambulatory of Rare and Complex Clinic at LCI received the inaugural LCI DAISY Nurse Leader Award in November of 2017. Brenda creates an environment where compassionate, quality care flourishes for patients and their families at Levine Cancer Institute. Brenda received multiple nominations from multidisciplinary teammates describing her transformational leadership. The Rare and Complex Clinic went from tier 3 teammate engagement in 2016 to tier 1 in 2017. From a patient satisfaction perspective, the clinic's Press Ganey scores went from top quartile national performance in 2016 to top decile in 2017. One of her nominators commented, “Brenda has transformed the clinic and created a space of trust, respect and compassion.” The Rare and Complex Clinic team members feel a greater sense of teamwork and shared purpose since her arrival. From her cheerful willingness to cover a physician’s clinic and help with caring for patients, to leading her team in creating a team charter, Brenda demonstrates extraordinary nursing leadership.
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DAISY Award for Extraordinary Nurses

Robin Inabnit, RN (left), from LCI’s GYN Clinic with Candice Roth, AVP, receiving the DAISY Award in May.

Robin demonstrates extraordinary, compassionate care for her patients in the GYN Clinic at Levine Cancer Institute. She does so quietly, according to Erin Crane, MD, MPH, who wrote of Robin, “My patients absolutely love her. It is usually only after (she) interacts with my patients that I realize just how much support she has provided them.”

Jennifer Doss, BSN, RN, OCN, from LCI - Albemarle Infusion received the DAISY Award in May.

Jennifer is an extraordinary nurse. She was nominated by a patient who wrote a heartfelt nomination a year after first encountering Jennifer’s care at Levine Cancer Institute - Albemarle. “Exactly one year ago today, I sat in your chair. I was terrified of the unknown. You were so positive and uplifting and reassuring. Your kind spirit helped me through that day and you taught me so much.”

Darcy Doege, BSN, RN, (right) from LCI Disparities and Outreach with Candice Roth, AVP receiving the DAISY Award in May.

Darcy demonstrates extraordinary, compassionate care for our patients and their families at Levine Cancer Institute. Her director, Mellisa Wheeler describes her as a “fierce advocate” for not only her patients and their families, but also her teammates and their families. Darcy “never wavers in her stance that patients always come first.”

7 LCI DAISY Honorees in 2017

The LCI DAISY Taskforce coordinated the recognition of 7 more LCI nurses in 2017.

We proudly introduced the DAISY Nurse Leader Award in November with our inaugural honoree, Brenda Crump, Nurse Manager from LCI’s Rare and Complex Clinic.

Nominations submitted in 2017 increased by 100% from 2016 (from 15 to 30).

Sincere thanks to all who have nominated an LCI nurse for the DAISY Award. We couldn’t offer this meaningful recognition for nurses without you.
DAISY Award for Extraordinary Nurses

Ashley Boddie, BSN, RN, from LCI’s Breast Clinic received the DAISY Award in November.

Ashley is recognized by her nursing colleagues in the Levine Cancer Institute Breast Clinic for her extraordinary, compassionate care for patients and her ability to promote a relaxed clinic environment despite stressful situations. Her nominators, Elizabeth and Alyson, described examples of how Ashley goes above and beyond to care for her patients, including coordinating emergency care for a patient at home and providing daily therapeutic communication over the phone for an anxious patient. Ashley treats all her patients as though they are her only patient.

Patricia (“Patti”) Vanderplow, BSN, RN, from LCI - University received the DAISY Award in November.

Patti is an extraordinary nurse, dedicated to the patients and families of Levine Cancer Institute - University. Her manager and nominator, Melinda Disharoon, BSN, RN shared that Patti provides extraordinarily compassionate care as evidenced by consistent recognition and praise from her patients in the comments of patient satisfaction surveys, thank you notes, WOW cards and letters of recognition. Dr. Stuart Salmon contributed to her nomination, describing Patti as the “glue” that holds the clinic together ensuring the coordination of care for patients. Patti exemplifies nursing at its best.

Rachel Schaetzle, RN, OCN, from LCI - South Tryon received the DAISY Award in November.

Rachel Schaetzle is an extraordinarily, compassionate nurse. She is dedicated to the patients and families at Levine Cancer Institute – South Tryon. Rachel was nominated by a fellow nurse who shared how she went above and beyond to care for a distraught patient who was awaiting test results. Her colleague noted, “She stood next to her, lovingly rubbed her arm and offered her kind words. Rachel got (the patient) to smile and laugh despite her anxiety. It was touching to see how the patient’s entire demeanor changed all because of the care and comfort Rachel provided.”
Kris Blackley, MSN, RN, BBA, OCN and LCI Director of Patient Navigation, presented at the podium in Denver, Colorado at the 2017 Oncology Nurses Society 42nd Annual Congress. The title of her presentation: **Navigation Programs Need Informatics Systems to Improve Care, Measure Outcomes and Demonstrate Value.** Kris and colleagues have also presented LCI Navigation work at additional national conferences, including the American Society of Clinical Oncology (ASCO) and the Academy of Oncology Nurse and Patient Navigators (AONN).

Crystal Shull, RN, OCN and Practice Manager, Morehead Infusion presented her poster highlighting her team’s LEAN improvement work at the 2017 Oncology Nurses Society 42nd Annual Congress in Denver, Colorado. The title of her poster: **Utilizing CHS’s LEAN Management System to Reduce Waste and Improve Flow.** Of note, this work was also honored with a 2016 CHS Touchstone Silver Award for exceptional performance in improving clinical efficiency, care quality and teammate engagement.
RN Preceptors of the Year

RN Preceptors are extremely valuable to our cancer institute because they play a crucial role in the onboarding experience for new oncology nurses. If onboarding is poor, retention of nurses is also poor. In our current environment of nursing shortage, there is even more of a spotlight on the value our RN Preceptors add.

Congratulations to our 2017 Levine Cancer Institute RN Preceptors of the Year, Kristen Adams and Teresa Allen. These exceptional RN Preceptors were nominated by their preceptees and peers to receive this recognition.
2017 Margaret (Peg) Oseland Kosonen Endowment Award

Brandy Greenwald, BSN, RN, OCN, Clinical Supervisor from LC1 - Pineville (Brandy is also in NP School) was nominated by her nursing colleagues and received the 2017 Margaret (Peg) Oseland Kosonen Endowment Award for the Advancement of Oncology Care.

Recipients of this award:

- Are Registered Nurse Practitioners, Registered Nurses or Licensed Practical Nurses serving LCI
- Exhibit excellence in oncology nursing practice as evidenced by a comprehensive assessment of each patient’s unique needs and the development and implementation of a personalized plan of care to meet those needs
- Excel at family-centered care
- Serve as a role model of professional practice for peers, new teammates and nursing students
- Contribute positively to the professional practice environment

THE KOSONEN ENDOWMENT AWARD PROVIDES A MEANINGFUL OPPORTUNITY TO CELEBRATE THE WORK AND ACHIEVEMENTS OF LEVINE CANCER INSTITUTE NURSES
2017 Carolinas Healthcare System Notable Nurse

JAN S. NORMAN, RN, OCN

The CHS Notable Nurse Award is an organization-wide recognition celebrating nurses from across the system who go above and beyond to impact the lives of others. Notable Nurses are nominated by their teammates and are carefully selected by a committee of qualified nursing and communications professionals. Jan S. Norman, RN, OCN from LCI - Rutherfordton was nominated by her clinical supervisor, Jamie Grondahl, and was selected as a CHS Notable Nurse in January of 2017 for her leadership in monitoring, documenting and coordinating care for patients receiving oral chemotherapy.

The nomination below was written and submitted by Jan’s clinical supervisor, Jamie Grondahl.

With over 30 years of experience in the field of nursing, Jan Norman is a leader, innovator and vital component within Levine Cancer Institute. To the great benefit of her patients, Jan is meticulous and never takes shortcuts. She comes in early and works hard. Always taking the initiative to learn more, Jan makes her education of the latest chemotherapy drugs and therapies a top priority. We depend on her knowledge and presence daily. She is very accomplished and has much to be proud of. One example of Jan’s innovative mind is her coordination of 40 LCI patients receiving oral chemotherapy. Such patients must be monitored to ensure they are taking their medications properly and to track if they’re experiencing any side effects. Working closely with our oncologist, Jan monitored, documented and advocated for these patients – sometimes staying at the clinic until 8 p.m., following up on the phone with patients. To ease Jan’s patient load, we have since reassigned these patients to other nurses in our clinic, who are following in Jan’s footsteps, with her as willing teacher and mentor. We have also recently changed her role to New Patient Coordinator/Chemo Coordinator to fully utilize her strengths and vast knowledge. Jan now works closely with Mathew Rees, MD, while evaluating patients with new cancer diagnoses to help complete tasks such as staging, pathways, chemo education, and nutrition/surgical/radiation consults.
Oncology Patient Navigation

_Nurse-Led Program_

The Levine Cancer Institute Nurse Navigation Program was established in October of 2012. The team of 29 Navigators across eight LCI sites currently serve about 12,000 patients. Oncology Navigators are a central point of contact for patients. They advocate, educate and coordinate care. They assess patient needs and facilitate access to resources and services. Navigators identify and close potential gaps in care to improve quality and efficiency.

_LCI First Cancer Institute to Demonstrate Impact of Nurse Navigation on Outcomes_

Through ongoing research on the impact of our nurse-led Navigation Program, LCI is the first institute to demonstrate the positive impact of nurse navigation on outcomes. Navigated patients with advanced cancer were less reliant on acute care. Of course, these findings may have important implications for improving value in oncology care.

_Nurses at the Heart of Improving Value_

Reimbursement is expected to decline in oncology as it has in other specialties. One source cited by The Advisory Board Company in their 2017 executive research briefing, “How to Keep Your Cancer Patients Out of the ED,” estimates the cost of emergency room visits and rehospitalization of cancer patients at $800 and $22,000, respectively (Fitch & Pyenson, 2010).

At Levine Cancer Institute, we recognize that our nurse navigators reduce patient reliance on acute care. We know they are saving not only healthcare resources, but also patient and family time, and alleviating suffering.

Reference:

2017 LCI President’s Award

The LCI President’s Award began in 2015 and has been given by the President of Levine Cancer Institute, Derek Raghavan, MD, PhD, FACP, FRACP, FASCO. While not a nursing recognition, several nurses from LCI have been nominated to receive this prestigious honor.

Criteria for the LCI President’s Award includes:

1) Going above and beyond their job description
2) Community involvement
3) Demonstrate how their actions are:
   ▪ Innovative
   ▪ Deliberate
   ▪ Aligned
   ▪ Accountable
   ▪ Respectful

KRIS BLACKLEY, MSN, RN, BBA, OCN
Kris Blackley, LCI Director of Patient Navigation, received the LCI President’s Award in 2017.
Transition to Practice Nurse Residency Program – Oncology Track

The Transition to Practice Residency Program (TTP) offers a dedicated team of nurses and educators who work with new graduates in an atmosphere that promotes learning, clinical application and socialization through the transition from student nurse to Registered Nurse. The program features didactic classes, simulation lab experiences and clinical orientation with a preceptor, providing a solid foundation for clinical decision making, time management and interdisciplinary communication.

The Oncology Track of the TTP provides specialty-specific preparation for new graduate nurses entering both inpatient and outpatient/ambulatory oncology settings. In addition to oncology-specific classes and simulation, the new graduate RNs experience many facets of oncology, including inpatient and outpatient clinical rotations, as well as shadowing opportunities in areas including specialty clinics, clinical trials, radiation oncology and integrative oncology.

The Oncology Track is led by our Service Line Educators and Clinical Nurse Specialist in collaboration with operational nursing leaders. Our program goal is to facilitate a successful transition of new graduates into oncology nursing practice and to enhance their professional development as oncology nurses.

Our inaugural cohort started in the summer of 2017 and included 13 inpatient and four outpatient nurses. Congratulations to our Oncology TTP Track graduates! Our newest cohort began in February and March of 2018.
Professional Nurse Clinical Advancement Program

The Atrium Health Professional Nurse Clinical Advancement Program offers advancement, reward and recognition for higher levels of professionalism and contribution to organizational goals. Nurses who advance are more engaged and less likely to leave our organization.

Overall, LCI experienced an 11% increase in the number of RNs successfully joining the Atrium Health Professional Nurse Clinical Advancement Program from 2016 to 2017. Additionally, there was a 40% increase in the number of Clinical Nurse III’s.

Congratulations to the following RNs who advanced in 2017:

- **Donnelle Gaston**, RN, OCN from LCI Hematology Clinic advanced to a CN2 in 2017
- **Brittany Dick**, BSN, RN, OCN from LCI - Cleveland Regional Medical Center, Infusion advanced to a CN3 in 2017
- **Michelle Davis**, BSN, RN, OCN from LCI - Cleveland Regional Medical Center, Infusion advanced to a CN3 in 2017

We recognize all our fabulous RNs at LCI maintaining their advancement on the ladder (see table below).

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<thead>
<tr>
<th>Names (in no specific order)</th>
<th>Credentials</th>
<th>Advance or Maintain in 2017</th>
<th>Clinic/Dept</th>
<th>Project Title</th>
<th>Goal</th>
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</thead>
<tbody>
<tr>
<td>Susan Anthony</td>
<td>BSN, RN, OCN</td>
<td>Maintained CN3 (through Central Division)</td>
<td>LCI - Med Onc Clinic</td>
<td>Mentoring and Nurse Retention</td>
<td>Improved LCI mentoring survey results by 3-5% (Teammate Engagement)</td>
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<td>Ashley Schulze</td>
<td>BSN, RN, OCN</td>
<td>Maintained CN3 (through Central Division)</td>
<td>LCI - Med Onc Clinic</td>
<td>Reducing Patient Falls</td>
<td>Outpatient fall prevention (Quality and Safety)</td>
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<td>Serena Perera</td>
<td>BSN, RN, OCN</td>
<td>Maintained CN3 (through Central Division)</td>
<td>LCI - Med Onc Clinic</td>
<td>Instituting Meaningful Rituals to Improve Compassion Satisfaction and Decrease Compassion Fatigue</td>
<td>Using the Professional Quality of Life Scale (PROQOL) survey to track improvements by increasing compassion satisfaction by 10% and decreasing burnout and secondary traumatic stress by 10% (Teammate Engagement)</td>
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<td>Lara Michelle Harrison</td>
<td>BSN, RN, OCN</td>
<td>Maintained CN3 (through Central Division)</td>
<td>LCI - Med Onc Clinic</td>
<td>Patient Enrollment in My Carolinas After Education</td>
<td>Enrollment in My Carolinas will increase 25% after education (Patient Experience)</td>
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<tr>
<td>Donnelle Gaston</td>
<td>ADN, OCN</td>
<td>Advanced to CN2 (through Central Division)</td>
<td>LCI - Morehead Heme Clinic</td>
<td>Patient Safety/Chemo Education</td>
<td>To increase clinical documentation of chemo consent and education (according to QOPI standards) by 50% (Quality and Safety)</td>
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<td>Sarah Kibbee</td>
<td>RN, CMSRN</td>
<td>Maintained CN2</td>
<td>LCI - SouthPark</td>
<td>Increasing Nurse OCN Certification</td>
<td>Increase LCI - SouthPark Nurse Certification rate by 10% (Quality and Safety)</td>
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</tr>
<tr>
<td>Claudia Luetge</td>
<td>ADN, RN</td>
<td>Maintained CN2 (through Central Division)</td>
<td>LCI - Pineville (moved to LCI - SouthPark in 2017)</td>
<td>Increasing RN Certification Rate</td>
<td>Increase number of certified RN’s in Pineville <em>(Quality and Safety)</em></td>
</tr>
<tr>
<td>Brittany Dick</td>
<td>BSN, RN, OCN</td>
<td>Advanced to CN3 (through Cleveland’s committee)</td>
<td>LCI - Cleveland (Infusion)</td>
<td>Implementing chemotherapy education classes to improve patient satisfaction and infusion process flow</td>
<td>To improve cancer patient’s knowledge about chemotherapy administration, side effects and additional resources within the Cancer Center by July 1, 2017 as measured by Patient Satisfaction Scores <em>(Patient Experience)</em></td>
</tr>
<tr>
<td>Michelle H. Davis</td>
<td>BSN, RN, OCN</td>
<td>Advanced to CN3 (through Cleveland’s committee)</td>
<td>LCI - Cleveland (Infusion)</td>
<td>Implementation of Palliative Care Consults for Oncology Infusion Patients</td>
<td>Increase Palliative Care Consults to 25% of Oncology Infusion Patients <em>(Patient Experience)</em></td>
</tr>
<tr>
<td>Lora Greene (Scism in outlook)</td>
<td>BSN, RN, OCN, RN-BC</td>
<td>Maintained CN3 (through Cleveland’s committee)</td>
<td>LCI - Cleveland (Infusion)</td>
<td>Proactive use of Emend to prevent Chemotherapy induced nausea and vomiting with moderately emetogenic chemotherapy</td>
<td>Decrease reported cases of nausea and vomiting with moderately emetogenic chemotherapy <em>(Patient Experience)</em></td>
</tr>
</tbody>
</table>
Shared Governance

Nurses and multidisciplinary teammates are included in decision-making that impacts their work at Levine Cancer Institute. Through shared-governance structures, nurses contribute at multiple levels – for all of Atrium Health, for Levine Cancer Institute and our Oncology Service Line level and for their individual clinic/unit.

Below are some examples of committees or shared governance councils and decision-making groups to which nurses from Levine Cancer Institute contribute:

**PLANETREE STRUCTURES**

- Planetree Councils
- Patient and Family Advisory Council

**STAFF COUNCIL**

**NURSING AND PHARMACY ONE COMMITTEE**

- Interdisciplinary

**ATRIUM HEALTH NURSING SHARED GOVERNANCE STRUCTURES**

- Clinical Practice Council
- Nursing Integration Council
- Oncology Nursing Practice Council
- Nursing Professional Development Council

**CENTRAL DIVISION SHARED GOVERNANCE STRUCTURES**

- Professional Empowerment Council
- Nursing Excellence Peer Review Council
- Nursing Informatics Council
- Education Council
- Oncology Service Line Council

**UNIT-BASED COUNCILS**

Unit-based councils at our Morehead location represent the multidisciplinary members of the team who care for patients.
2017 Podium and Poster Presentations

Congratulations to our nurses who are sharing our knowledge and success with local, national and international audiences.

<table>
<thead>
<tr>
<th>PRESENTER</th>
<th>TITLE OF PRESENTATION</th>
<th>PRESENTATION TYPE</th>
<th>AUDIENCE</th>
<th>SPONSORING ORGANIZATION</th>
<th>CONFERENCE</th>
<th>DATE OF PRESENTATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Megan McGraw, MSN, RN</td>
<td>The Effect of Patient Activation on Transition Clinic Adherence</td>
<td>Poster</td>
<td>Local</td>
<td>Gardner-Webb University MSN Poster Presentation Day</td>
<td></td>
<td>12/7/2017</td>
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<tr>
<td>Kris Blackley, MSN, RN, BBA, OCN</td>
<td>The Importance of Navigating Quality and Metrics: A Case Study</td>
<td>Podium</td>
<td>International</td>
<td>National Academy of Science – National Cancer Policy Forum</td>
<td>National Cancer Policy Forum Workshop on Establishing Effective Patient Navigation Programs in Oncology</td>
<td>11/13/2017</td>
</tr>
<tr>
<td>Crystal Shull, RN, OCN</td>
<td>Utilizing CHS's Lean Management System to Reduce Waste and Improve Flow</td>
<td>Poster</td>
<td>International</td>
<td>Oncology Nursing Society</td>
<td></td>
<td>5/6/2017</td>
</tr>
<tr>
<td>Kris Blackley, MSN, RN, BBA, OCN</td>
<td>Navigation Programs Need Informatics Systems to Improve Patient Care, Measure Outcomes and Demonstrate Value</td>
<td>Podium</td>
<td>International</td>
<td>Oncology Nursing Society</td>
<td></td>
<td>5/4/2017</td>
</tr>
<tr>
<td>Natalie Garces, BSN, RN, OCN</td>
<td>Patient Reported Understanding of Survivorship Care Plans: A Retrospective Review in the Breast Cancer Setting</td>
<td>Poster</td>
<td>Facility</td>
<td>Carolinas HealthCare System</td>
<td>2017 Journey to Excellence Symposium: Beyond the Bedside</td>
<td>4/24/2017</td>
</tr>
</tbody>
</table>

Information gathered from what is entered on the Atrium Health Nursing portal – Presentations and Publications. Any omission is inadvertent and deeply regretted.
Information gathered from what is entered on the Atrium Health Nursing portal – Presentations and Publications. Any omission is inadvertent and deeply regretted.