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# Community Health Nursing

**Annual Report | Fiscal Year 2024**

July 1, 2023 – June 30, 2024



## Message from UVA Community Health Chief Nursing Officer, Michelle Strider

It is with great pride and deep gratitude that I am pleased to share the Fiscal Year 2024 Nursing Annual Report. It was another year of transformation and meaningful progress, not only for UVA Health with the final integration of UVA Community Health, but also within our nursing practice. I officially began my role as Chief Nursing Officer at the beginning of the fiscal year. Having served as a nurse within UVA Health for over 16 years, and previously as the Chief Quality Officer, I have been deeply committed to advancing safety, quality, and patient-centered care. Stepping into the CNO role has been both a professional milestone and a personal honor, and I am inspired every day by the dedication of our nursing team.

As we finalized our integration with UVA Health's Epic electronic health record, it marked a critical step forward in our journey toward becoming One UVA Health Team. Our nurses embraced this change with professionalism and adaptability, recognizing how Epic enhances the coordination, safety, and efficiency of care delivery.

We continued to build on this momentum with the integration of new equipment, reinvigorated practice models, and continued growth in our professional development programs and shared governance.

A key focus of our nursing strategy has been to build a resilient and sustainable workforce. I am proud to share that we have reduced our reliance on travel nurses, reinforcing our commitment to supporting permanent team members through creative staffing models and a culture of collaboration and recognition.

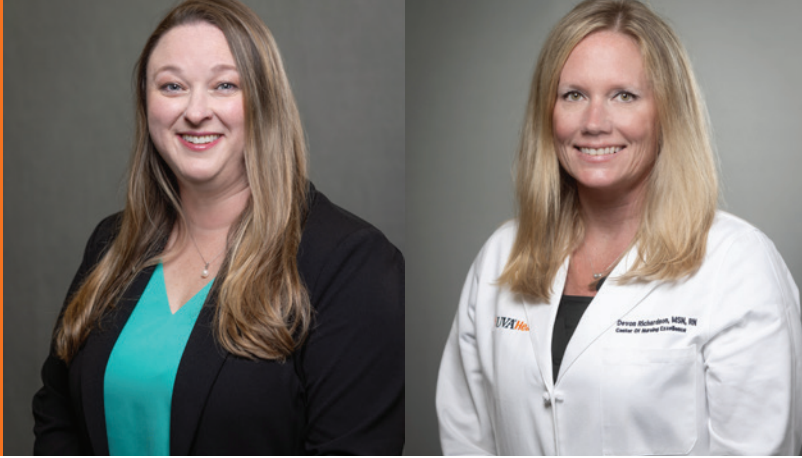
We also reached an important milestone in advancing professional governance. In 2023, we formalized our Nursing Professional Governance Organization, establishing a structure that ensures nurses at every level have a voice in shaping policies, practices, and innovations. This work strengthens our culture of shared leadership and empowers nurses to influence the future of care at UVA Community Health directly.

As we look ahead, we remain committed to supporting ongoing professional development, expanding clinical growth pathways, and ensuring every nurse feels empowered, valued, and equipped to thrive. Whether at the bedside, in leadership, or supporting our teams behind the scenes, your contributions are vital to our mission and deeply appreciated.

Thank you for the excellence, resilience, and heart you bring to your work each day. It is a privilege to lead and serve alongside you.

With sincere appreciation,

Michelle Strider, MBA, RN, CPHQ  
Chief Nursing Officer  
UVA Community Health



## Message from the Center of Nursing Excellence

It is an honor and a privilege to present the Nursing Annual Report from the Center of Nursing Excellence. This report reflects a year of remarkable dedication, innovation, and collaboration across our nursing teams. As we continue to navigate a complex and ever-changing healthcare environment, the commitment to excellence in patient care, professional development, and clinical leadership has never been more evident.

Over the past year, we have advanced our mission to support nursing excellence through evidence-based practice, education, research, and shared professional governance. From implementing a new care model and improving patient outcomes to enhancing staff engagement and fostering a culture of continuous learning, our achievements are a testament to the strength and resilience of our nurses.

We are especially proud of the strategic initiatives and partnerships that have positioned our nursing workforce at the forefront of quality and safety. Our collective efforts not only reinforce the critical role of nursing within our organization but also contribute meaningfully to the broader goals of healthcare transformation.

As you explore the pages of this report, we invite you to reflect on the progress we've made together and the opportunities that lie ahead. Let this report be both a celebration of our accomplishments and a renewed call to action in our shared pursuit of nursing excellence.

With sincere appreciation,

April Morrison, MSN, RN  
Director  
Nursing Professional Practice

Devon Richardson, MSN, RN  
Manager  
Center of Nursing Excellence

# UVA Health Community Hospitals

## Expert Primary & Specialty Care in Northern Virginia

UVA Community Health is the community medicine arm of UVA Health, comprised of three community hospitals and an integrated network of clinical practices and outpatient locations:

- UVA Health Culpeper Medical Center
- UVA Health Haymarket Medical Center
- UVA Health Prince William Medical Center
- UVA Community Health Medical Group
- UVA Health Cancer Care Gainesville
- Outpatient Imaging Partnerships
- Ambulatory Surgery Center Partnerships

UVA Community Health offers a compassionate and personalized care experience while also enhancing access to the top medical and surgical experts, subspecialists, research collaborators, and clinical trials available at UVA Health.

## Magnet® Recognition



The Magnet Recognition Program®, established by the American Nurses Credentialing Center (ANCC), is the most prestigious international distinction for nursing excellence. It recognizes health care organizations that demonstrate quality patient care, interdisciplinary collaboration, professional nursing practice, and innovation.

At UVA Health Prince William Medical Center, Magnet® designation signifies a strong and enduring commitment to excellence in nursing and patient care. The recognition assures patients, families, community members, and the workforce that the medical center provides a highly professional practice environment where clinical excellence, interprofessional collaboration, innovation, and continual professional development are embedded in daily practice. This culture of excellence fosters exceptional patient quality and safety outcomes, affirming the organization's mission to deliver outstanding care to the community it serves.

Prince William Medical Center first achieved Magnet designation in 2016, earned its second designation in 2021, and is now actively pursuing its third. Each cycle reflects the sustained dedication of nursing leaders and clinical nurses to advance practice, elevate outcomes, and create an environment where both patients and nurses thrive.

Through its Magnet journey, Prince William Medical Center has distinguished itself in professional nursing excellence, setting the standard for safe, high-quality, and innovative care.



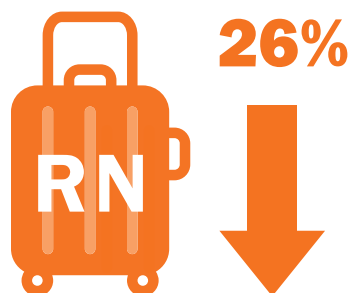
# Transformational Leadership

**Transformational Leadership** is about creating a clear vision while inspiring excellence. Today's leaders play a crucial role in driving meaningful change to their organization and instilling the values, beliefs, and behaviors that elevate excellence and connectivity. To achieve this, they need a strong vision, the ability to influence others, clinical knowledge, and outstanding nursing skills. At UVA Community Health, transformational leaders can be found at all levels, from bedside nurses to C-suite strategists. These exceptional leaders work with our empowered nursing team to build a vibrant culture of innovative care, top-notch quality, and dedicated patient advocacy, improving lives and making a positive impact on each patient we serve.



# Transformational Leadership (continued)

## Traveler Reduction



RN TOTALS	
July 2023 – June 2024	
FACILITY	Percent Decrease
Culpeper	13%
Haymarket	57%
Prince William	27%
TOTAL	26%

## Redesigned Student Programs

### Nursing School Outreach

Lisa Case, Associate Chief Nursing Officer  
UVA Health Haymarket Medical Center

In January 2024, UVA Health Haymarket Medical Center appointed Lisa Case as Associate Chief Nursing Officer, who quickly developed a strategy to grow the future nursing workforce for UVA Community Health. At that time, few nursing students were on-site despite nearby nursing schools. Nurse travelers were used, showing the need for local staffing solutions. Lisa partnered with UVA recruiters and regional nursing schools to inform students about careers at UVA Health. New initiatives with local high schools and health science classes were launched to encourage students to pursue community nursing, creating a pipeline of well-trained nurses ready to serve.



## Patient Care Committee

The Patient Care Committee (PCC) serves as an interprofessional review and approval body for clinical practice and patient care initiatives that extend beyond the scope of a single clinical discipline. Co-chaired by the Chief Nursing Officer and the Chief Medical Officer, the PCC ensures that nursing is represented in discussions and decisions that have a multidisciplinary impact and influence the provision of care in the acute care setting.



# Structural Empowerment

Structural empowerment is fundamental to our nursing practice. It means giving nurses the resources, opportunities, and recognition they need to excel in their roles and helping them reach their full potential. We focus on ongoing professional development, collaborative decision-making, and teamwork across professions. We support and celebrate educational achievements and honor our nurses for their commitment to professional growth. A culture of recognition and teamwork helps nurses provide excellent care, drive healthcare innovation, and improve patient outcomes.

## NPGO Development

In 2023, UVA Community Health Nursing identified an opportunity to improve its nursing governance structure to better support professionalism, accountability, and decision-making among its nursing staff. In response, a multidisciplinary steering committee — comprising clinical nurses, nurse managers, nurse directors, and supported by the Chief Nursing Officer — came together to reimagine the shared leadership framework in nursing.

The outcome of this collaborative effort was the development and launch of the **UVA Community Health Nursing Professional Governance Organization (NPGO)**, a structure grounded in the principles of professional governance.

Professional governance is a profession-centered approach to nursing leadership, emphasizing nurses' autonomy and accountability, guided by standards from organizations like the American Nurses Association (ANA). It emphasizes professional values, clinical excellence, and continuous growth through licensure, certification, education, and evidence-based practice.

The newly created governance framework aims to amplify nurses' voices at all levels of practice and to ensure decision-making aligns with professional standards and organizational priorities. It has four interconnected tiers:

- Local-level councils empower unit-based teams to influence daily clinical practices.
- Central Level Councils include:
  - Practice & Quality
  - Professional Development
  - Innovation & Research
  - Community & Engagement
- Central Committees include:
  - DAISY Committee
  - Clinical Ladder Committee
  - Peer Review Committee





- The Nursing Executive Level assures that professional governance efforts align with strategic, system-wide goals.

In May 2024, the new structure was officially introduced and put into practice. This new structure reflects UVA Community Health's commitment to nursing excellence, professional development, and high-quality patient care. It creates a strong foundation for collaboration, innovation, and accountability, ensuring nurses are empowered to lead and shape their practice environments through a professionally governed framework.

## Community Engagement

UVA Health, a leading academic health system, provides community care across Virginia, addressing health disparities. Cultivating healthy communities and belonging for all is a key goal in the 10-year strategic plan. Community health assessments guide the development of programs that tackle pressing health needs for the most vulnerable populations. We support health needs in central and northern Virginia by fostering partnerships focused on health priorities. Together with community leaders, we build consensus and create networks aimed at improving population health.

149 clinical team members participated in Community Engagement events.



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# Exemplary Professional Practice

Exemplary professional practice ensures patients receive the best care. In nursing, it involves understanding nursing roles and applying new knowledge and evidence to benefit patients, families, and the community. It highlights the potential of professional nursing and enables nurses to thrive in autonomous, accountable environments that define quality patient care at UVA Health Community Health.

## LPN Practice Model: A Strategic Approach to Workforce Innovation

In 2023, UVA Community Health took a step in workforce innovation by reintroducing and expanding the Licensed Practical Nurse (LPN) model, beginning with a successful pilot in the Emergency Department at Prince William Medical Center. This initiative was developed in response to growing needs across the system — to creatively adapt our care models, reduce reliance on travel nurses, and build a stronger, more stable internal care team.

The reintroduction of LPNs in upright care areas of the Prince William Medical Center Emergency Department demonstrated immediate operational benefits. LPNs proved to be a valuable addition to the care team, providing high-quality support and enhancing the patient experience in fast-paced, high-volume settings. Encouraged by this success, the model was quickly expanded to Culpeper Medical Center, prompting a system-wide review and update of the LPN policy to ensure alignment with UVA Health's standards of practice.

This reinvigorated approach reflects a broader commitment to leveraging the full scope of nursing practice while creating meaningful roles that support long-term retention and team-based care. By integrating LPNs more fully into our care delivery structure, we are fostering an environment that values flexibility, efficiency, and collaboration.

This initiative also highlights our dedication to **professional development and lifelong learning**. LPNs are being supported through ongoing professional and educational development plans, with clear pathways to become Registered Nurses (RNs). This aligns with Magnet's emphasis on advancing nursing practice and empowering all team members to grow within the profession.

As we look ahead, the LPN model serves as a strong example of how strategic workforce planning and creative care models can drive excellence, sustainability, and opportunity across the health system.



## Leapfrog 'A' Grade for Safety

We are proud to share that each UVA Community Health hospital has maintained its outstanding safety record, earning a Leapfrog Hospital Safety Grade of A for 2024. This success highlights our nurses' commitment to providing top-tier care to patients from across Virginia and beyond. The Leapfrog hospital safety grades reflect performance metrics related to patient safety, and the systems hospitals have in place to ensure the highest quality care.





# Exemplary Professional Practice (continued)

## Nursing Excellence Awards

### Beginning Practitioner of the Year

- Julie Lewis, BSN, RN, MSC | UVA Health Haymarket Medical Center | Medical Surgical Unit
- Nicole Cohen, RN | UVA Health Culpeper Medical Center | Operating Room
- Taylor Nugent, RN, TNCC | UVA Health Prince William Medical Center | Emergency Services Department

### Excellence in Relationship-Based Caring

- Elgin Daily, BSN, RN, PCCN | UVA Health Prince William Medical Center | Central Staffing and Scheduling Office
- Pooja Bhatta, BSN, RN | UVA Health Prince William Medical Center | Medical Surgical Unit 2
- Yuan Yuan Yu, BSN, RN | UVA Health Prince William Medical Center | Behavioral Health In-Patient Unit

### Preceptor of the Year

- Becky Seay, BSN, RN | UVA Health Culpeper Medical Center | Operating Room
- Chris Everett, BSN, RN | UVA Health Haymarket Medical Center | Emergency Services Department
- Imelda Dampios, BSN, RN | UVA Health Prince William Medical Center | Behavioral Health In-Patient Unit
- Jaryd Fraser, RN | UVA Health Culpeper Medical Center | Intermediate Care Unit
- Kecia Greene, LPN | UVA Health Culpeper Medical Center | OB/GYN
- Lilov Bagaporo, BSN, RN | UVA Health Prince William Medical Center | Intensive Care Unit

### Transformational Leader

- Bridget White, ADN, RN | UVA Health Prince William Medical Center | Medical Oncology Unit
- Charlimagne “Char” Fuller, BSN, RN | UVA Health Prince William Medical Center | Women’s Care Services
- Elizabeth “Betsy” Snider, RN | UVA Health Culpeper Medical Center | Nursing Supervisor
- Jesus “Jess” Aranda, BSN, RN, CCRN | UVA Health Haymarket Medical Center | Critical Care Unit

### Exemplary Clinical Practice

- Bridget Botha, BSN, RN, CCRN, SCRNP | UVA Health Prince William Medical Center | Intensive Care Unit
- Gretchen Key, BSN, RN, CEN | UVA Health Prince William Medical Center | Behavioral Health In-Patient Unit
- Ingrid De Wit, BSN, RN, IBCLC, C-EFM | UVA Health Culpeper Medical Center | OB/GYN
- Jennifer Kauffman, BSN, RN | UVA Health Culpeper Medical Center | Emergency Services Department
- Terri Hull, BSN, RN, CCRN | UVA Health Haymarket Medical Center | Emergency Services Department



# Exemplary Professional Practice (continued)

## DAISY Award® for Nursing Excellence

Nurses go above and beyond to provide excellence in clinical care and compassion. The DAISY® Award is a national program that celebrates nurses by collecting nominations from patients, families, and co-workers.

We are proud of our 2024 DAISY® Award honorees:

### Haymarket Medical Center

Adrienne Halbach, RN, MedSurg

Belinda Lew, RN, PACU

Jamie Stern, RN, Kate Edwards, RN, Christine Keaveny, RN, Team Award

Angelo Estrellas, RN, MedSurg

### Prince William Medical Center

Liberty Flores, RN, ICCU

Jeremy Judd, RN, ICCU

Pooja Bhatta, RN, ICCU

Carlie Gately, RN, Mother Baby

### Culpeper Medical Center

Alayna Beamer, RN, ICMU

Shannon Day, RN, Recovery Room Surgical Services

Melissa Mainville, RN, IMCU

Sarah Mullins, RN and Megan Wacker, RN, Team - Wedding







## Primary Stroke

### Prince William Medical Center

- Primary Stroke Center Certified — The Joint Commission
- Get with The Guidelines® – Stroke Gold Plus Target: Stroke Elite Honor Roll

### Haymarket Medical Center

- Primary Stroke Center — The Joint Commission
- Get with The Guidelines® – Stroke Silver

## American Heart Association Get With the Guidelines®

### Prince William Medical Center

- Primary Heart Attack Center Certified
- Get with The Guidelines® – Coronary Artery Disease STEMI Receiving Bronze Plus

### Culpeper Medical Center

- Acute Heart Attack Ready — The Joint Commission
- Get With The Guidelines Coronary Artery Disease

## Total Hip and Knee

UVA Health Culpeper Medical Center continues its focus on early ambulation for post-operative patients, preparation for same-day discharge, and overall patient experience. This program is currently certified by The Joint Commission and is preparing for its next certification survey in 2025.

## Baby-Friendly Hospital

UVA Health Culpeper Medical Center earned the Baby-Friendly Hospital designation from Baby-Friendly USA, recognizing its commitment to supporting breastfeeding mothers and their babies. This means they adhere to specific standards of care, including promoting breastfeeding, educating mothers, and providing lactation support.

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# New Knowledge, Innovation, and Improvements

## Epic Rollout UVA Health Culpeper Medical Center

As part of the integration into UVA Health, Culpeper, Haymarket, and Prince William Medical Centers, along with the UVA Community Health Medical Group ambulatory clinics, joined UVA Health's enterprise infrastructure to ensure a seamless care experience for patients across all locations. The final integration was moving UVA Health Culpeper Medical Center and its ambulatory clinics onto the Epic electronic medical record system.

In 2023, UVA Health Culpeper Medical Center marked a major milestone in our journey toward unified, system-wide excellence with the successful transition to UVA Health's Epic electronic health record and supporting IT applications. UVA Health Haymarket and Prince William Medical Centers completed Epic integration at the end of FY 2023. Training and optimization continued into the early part of FY24.

This transition was not only a technological upgrade — it was a transformational step forward in aligning our workflows, standardizing best practices, and improving the experience for both our patients and our team members. With Epic as our new foundation, we were able to streamline processes and introduce data-driven tools that support better outcomes and safer care delivery.

- **Simplification:** Connect patient records to specialists and clinicians for complete visibility.
- **Coordination:** Create a unified platform for all of UVA Health.
- **Optimization:** Maximize the value of each module/application. Efficiency: Achieve economies of scale with experts on a single platform.
- **Consistency:** Minimize errors and rework.

## Alaris Pump Integration

In the months following our Epic go-live, we prepared for the next phase of our integration: aligning our IV pump technology with the UVA Health standard. On October 16, 2023, we launched the integration of Alaris IV pumps with Epic. This upgrade, intentionally timed after our initial Epic implementation, was designed to minimize disruption and allow our teams to adapt to change in a supportive, stepwise manner.

The integration of IV pumps with Epic introduced several key safety and efficiency enhancements:

- IV pumps are automatically programmed for medication dosing based on the patient's medical record.
- Nurses benefit from a streamlined process for medication administration, reducing manual entry and the risk of error.
- Clinical teams received comprehensive training — including both computer-based learning and in-person sessions — to ensure they felt confident and well-prepared for the transition.



- Dedicated super-users and at-the-elbow support were made available throughout the go-live period to provide real-time assistance and reassurance.

By reducing manual steps in medication delivery and enhancing real-time data accuracy, we are creating a safer and more efficient care environment. Most importantly, these changes reflect our ongoing commitment to innovation, patient safety, and the professional growth of our nursing team.

Together, these milestones exemplify our dedication to delivering high-quality care through thoughtful, system-wide integration and support.

## Zoll Defibrillator and AED

Additionally, UVA Community Health implemented new Zoll AED3 Defibrillators in all three Medical Centers, UVA Community Health Medical Group clinics, and provider-based clinics associated with Culpeper Medical Center.

Zoll defibrillators have enhanced technology for real-time feedback on CPR and CaseReview.

Defibrillators and AEDs were transitioned to the UVA Health operational standard for resuscitation equipment beginning March 5, 2024.

To support readiness, all impacted team members completed required in-person training to become familiar with new equipment and operational changes.

## Bedside Printers

**Objective: Reduce patient labeling errors by supporting bedside labeling (best practice).**

In the past, nurses and other clinical support staff had to leave a patient's room to scan or retrieve lab results, interrupting care and delaying critical documentation. With the implementation of bedside printers in individual hospital rooms, this process has been significantly streamlined. The printers allow clinical staff to print necessary labels and documents without leaving the patient's side, promoting continuous care and reducing the time spent away from the bedside.

This shift not only enhances efficiency but also aligns with best practices in patient safety and workflow optimization. By minimizing the movement required for routine tasks, bedside printers help reduce errors, improve the accuracy of specimen labeling, and support a smoother, more focused nursing workflow. Overall, the presence of bedside printers contributes to a safer, more efficient, and patient-centered care environment.



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# New Knowledge, Innovation, and Improvements (continued)

## Upright Care (Culpeper and Haymarket Medical Centers)

Upright Care (UR) in hospitals treats patients with non-emergent conditions or awaiting test results in a seated position rather than lying down. This approach improves patient flow, reduces wait times, and enhances the patient experience.

The Emergency Department team at UVA Health Haymarket Medical Center adopted UR in January 2023 focusing on vertical planning. UR begins as soon as a patient enters the Emergency Department, where they are assessed and roomed by acuity.

Since relaunching UR in 2024, current utilization of our UR care model sees approximately 42% of patients moving through our UR care, ensuring that the sickest patients are seen faster and that our upright patients are treated sooner and departing sooner. This has led to us meeting our goals of patients being discharged from the department in a timely manner in line with our standard length of stay. Left without being seen remains at less than 0.5% and overall patients are seen quicker by a provider, given care sooner, and discharged timely.

## Robotic-Assisted Surgery

UVA Health Culpeper Medical Center has expanded its surgical services to include robotic-assisted surgery. These surgeries are minimally invasive, offering patients less pain, lower infection risk, reduced blood loss, shorter hospital stays, and smaller scars. The new robot enhances the Center's investment in robotic-assisted surgery, allowing patients to receive innovative treatments locally without needing a referral or traveling to another facility.

UVA Health Culpeper, Haymarket, and Prince William Medical Centers offer robotic-assisted surgeries.

- Culpeper Medical Center completed **338** cases
- Haymarket Medical Center completed **508** cases
- Prince William Medical Center completed **71** cases



## Practice Changes

### Clinical Practice and Patient Safety

- **August 2023: Medication Titration Range Orders (ICU)** | Implemented titration range orders to align with Joint Commission standards, enhancing patient safety and nursing efficiency.
- **Sept 2023 – June 2024: Telemetry Alarm Reduction (ICCU)** | Led a 66% reduction in telemetry alarms to mitigate alarm fatigue and improve safety.
- **January 2024: Hourly Foley Care Implementation** | Standardized Q4-hour Foley catheter care after HAI stand-downs, increasing compliance and reducing CAUTI risk.
- **Feb – April 2024: CLABSI Prevention Audits** | Increased compliance in IV line documentation and Curoc cap use from ~30% to >80% following safety event.

### Patient Experience and Communication

- **October 2023: Trio Rounding Implementation** | Developed a consistent interdisciplinary rounding model to enhance communication and improve patient experience.
- **November 2023: Patient Experience Symposium** | Co-created and led a system-wide symposium that set the foundation for multiple human experience improvements.
- **December 2023 – March 2024: Functional Tech Model Launch** | Introduced intentional rounding model with tech log and charge audits; adjustments based on feedback led to better day shift engagement and patient satisfaction gains.
- **March 2024: Discharge Call Standardization** | Led scripting, simulation, and reporting improvements for all UC discharge calls to enhance post-discharge communication.

### Quality and Regulatory Improvement

- **Throughout FY24: Hospital Acquired Infections/Injuries (HAI) Reduction Campaigns** | Conducted stand-downs post-HAIs and made evidence-based practice changes; Med/Surg units achieved a 50% reduction in HAPI.

### Periodic Performance Review

Community Health implemented a more structured approach to evidence-based practice (EBP) initiatives led by Nursing. This included the use of a Periodic Performance Review (PPR) presentation format, which offered a consistent way to document the details of each initiative and highlight its impact and outcomes.

By establishing three distinct types of PPRs as standard practice, teams were encouraged to consistently engage with the model, leading to greater alignment and clarity at both the unit and department levels. This structured approach not only refocused efforts but also supported meaningful progress in patient

# New Knowledge, Innovation, and Improvements (continued)

experience, quality improvement, and team member engagement across the organization.

## Financial Stewardship and Staffing Efficiency

- **July 2023 – June 2024: Agency Use Reduction** | ICCU reduced agency utilization by 90%, ICU by 47%, through targeted hiring (42+ new team members).
- **Throughout FY24: Outpatient Infusion Optimization** | Hired PRNs and implemented flex shifts to match peak times; shortened visit lengths to accommodate more patients.
- **May 2024: Rabies Vaccine Flow Redesign** | Collaborated with ED to create a nurse-run rabies clinic to streamline outpatient needs.

## Wound Care and Equipment Optimization

- **Oct 2023 – March 2024: WOCN Efficiency Improvements** | Reallocated supplies and purchased surgical nippers to reduce contamination risk.
- **January 2024: Prevalence Study Standard Work** | Co-developed standardized quarterly prevalence study process with WOCN for improved documentation and flow.
- **April 2024: Molnycke Pressure Injury Work Group** | Participated in vendor collaboration to improve skin integrity products and pressure prevention strategies.

## Sustainability Committee

The UVA Community Health Sustainability Committee believes that environmental and community health are important parts of the care we provide. We follow our ASPIRE values — accountability, stewardship, professionalism, integrity, respect, and equity — to make sure we take care of the environment while providing excellent patient care.

In April 2024, UVA Community Health launched the **Nursing Sustainability Committee**, a subgroup in the enterprise-wide committee, to positively influence change in a collaborative environment that improves our ability to care for our community and decrease our carbon footprint.

From working to eliminate the use of single-use plastic ‘personal belongings’ bags to implementing a **QR code-based hygiene product menu** to lessen waste while improving the patient experience (patients order what they need instead of pre-stocking rooms with unneeded items), we sought sustainable alternatives to support both environmental goals and patient dignity.

**Medical Equipment Recovery of Clean Inventory (MERCI).** UVA Community Health began its partnership with the MERCI program to donate expired but usable medical supplies, ensuring these items are diverted from landfills and repurposed to support healthcare in under-resourced communities. Additionally, we





collaborated with various medical missionary organizations to donate unused and opened medical supplies, extending the life of valuable resources and supporting global health efforts.

## Evidence-Based Practice Symposium

On Monday, May 6, 2024, nurses and healthcare professionals from all four Medical Centers at UVA Health gathered for a full day dedicated to advancing evidence-based practice (EBP). The EBP Symposium focused on the critical importance of using a systematic approach to integrate the best available evidence into clinical decision-making. This inspiring event reinforced the power of evidence-based practice to drive innovation, ensure quality, and foster a culture of continuous improvement in healthcare.

Attendees participated in interactive sessions that highlighted how EBP is transforming nursing practice across the institution. Nurses leading EBP projects shared their experiences and insights, showcasing initiatives that have led to meaningful changes in clinical practice and improved patient outcomes.

The symposium provided participants with practical tools and strategies to enhance their own practice. By the end of the day, participants were able to:

- Form a well-structured clinical question using the PICO (Population, Intervention, Comparison, Outcome) format
- Apply inclusion criteria to evaluate literature for relevance and applicability to EBP projects
- Utilize the Johns Hopkins Appendix E tool to appraise research articles critically
- Understand and articulate the role of literature synthesis in the EBP process

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# Empirical Quality Results

## Barcode Scanning

During the first nine months of FY24, our average compliance was 89.8%. In the very first month of targeted improvement efforts, we reached the organization's goal for the first time that year with a 96.3%. Overall, we finished FY24 with a compliance rate of 91.9%.

## Workplace Violence

During FY24, UVA Community Health strengthened our commitment to workplace safety through a multi-faceted approach to workplace violence (WPV) prevention and response. Key initiatives included:

- Completion of our first formal WPV risk assessment and a broader risk assessment survey.
- Ongoing WPV and active shooter training provided during every new employee orientation and upon clinic request.
- Increased presence of Public Safety Officers at Emergency Department entrances and main lobbies across all acute care Medical Centers.
- Began the planning of metal detector installation in Emergency Departments and behavioral health units, monitored 24/7 by Public Safety and BHIP team members (to be implemented in 2025).
- Enhanced physical security through expanded camera systems, upgraded access control, and department-specific monitoring capabilities. Efforts are also underway to prevent unauthorized hospital access from adjacent buildings.
- Regular collaboration between Public Safety, Emergency Management leadership, and local law enforcement to coordinate safety efforts and emergency response planning.

These proactive measures underscore our dedication to maintaining a safe environment for patients, staff, and visitors.

## Degree Advancements

The **Clinical Career Ladder** provides a structure to promote professional growth and behaviors that support organizational goal achievement. Through our commitment to continuous improvement, clinical nurse feedback is used to make enhancements to the advancement process while preserving the rigor, transparency, and integrity of the program. This ensures the ladder continues to recognize excellence in clinical practice, leadership, and professional development, while remaining aligned with evolving frontline needs and best practices.



## Nursing Board Certifications

This fiscal year we had a BSN rate of 65%. The FY24 professional board certification rate is 20%.

BSN or Higher Degree Rate	
FACILITY	Fiscal Year 2024
Culpeper	Data Collection began FY 2025
Haymarket	69%
Prince William	65%

Professional Board Certification Rates	
FACILITY	Fiscal Year 2024
Culpeper	Data Collection began FY 2025
Haymarket	15%
Prince William	17%

The growth and development of our registered nurses is a top priority. Achieving national certifications in one's nursing specialty increases both professional pride and competency. Research and clinical evidence indicate that high RN professional board certification rates correlate with improved patient care outcomes. All RNs are encouraged to pursue certification in their specialty.

## Turnover

Overall Turnover Data	
FACILITY	Fiscal Year 2024
Culpeper	16.4%
Haymarket	11.8%
Prince William	15.5%

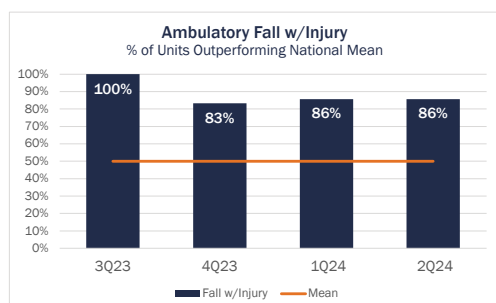
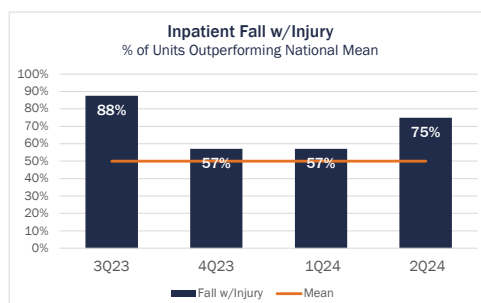
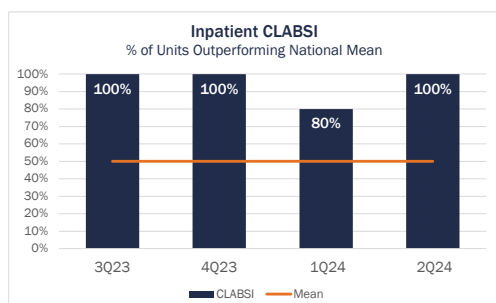
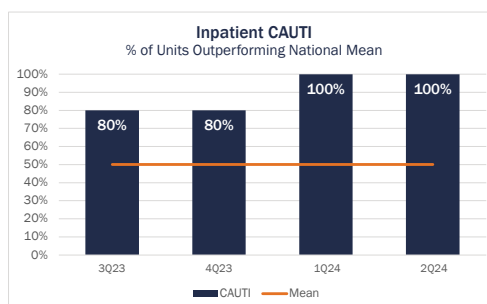
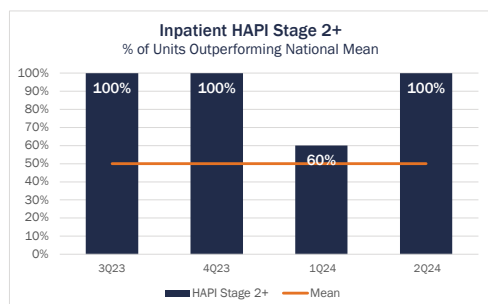
In 2024, UVA Community Health hired 209 registered nurses. New graduate nurses, working in their first job, accounted for 48 of these hires. By onboarding new nurses and supporting their growth, we saw lower turnover rates. This required teamwork with Talent Acquisition, Professional Practice, and unit staff. We made sure to hire the right people for our exceptional workplace culture, and we provided standardized professional development to help them succeed. Our thorough professional practice approach helped reduce first-year voluntary nurse turnover by 15.5%, leading UVA Community Health to a historically low turnover rate in 2024.



# Empirical Quality Results (continued)

## Prince William Medical Center Nursing Quality Metrics

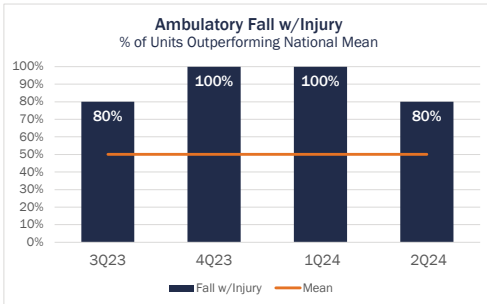
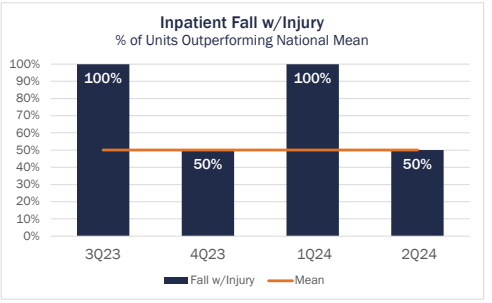
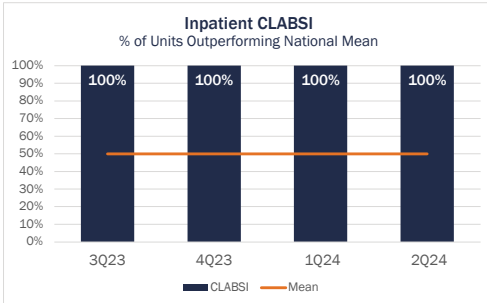
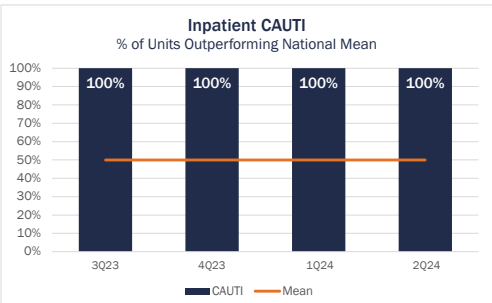
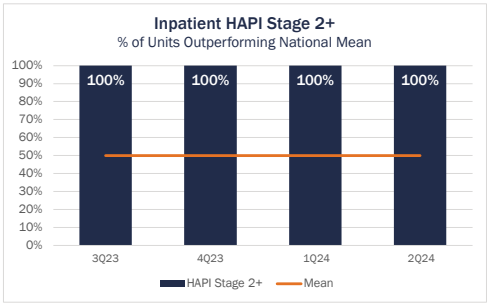
Units Outperforming National Mean							
METRIC	3Q23	4Q23	1Q24	2Q24	3Q24	4Q24	1Q25
HAPI 2+	100%	100%	60%	100%	80%	100%	60%
CAUTI	80%	80%	100%	100%	100%	100%	100%
CLABSI	100%	100%	80%	100%	100%	100%	100%
IP FALL W/INJURY	88%	57%	57%	75%	75%	100%	100%
AMB FALL W/INJURY	100%	83%	86%	86%	86%	86%	83%
TARGET	50%	50%	50%	50%	50%	50%	50%





# Haymarket Medical Center Nursing Quality Metrics

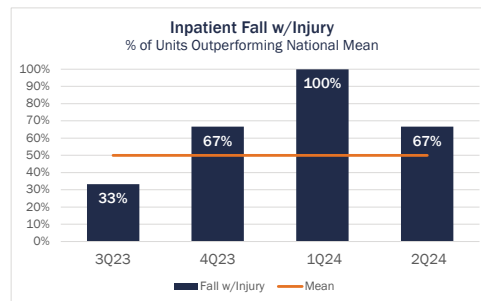
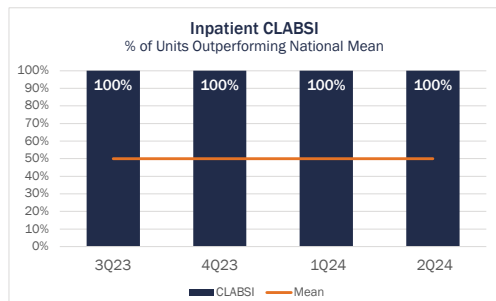
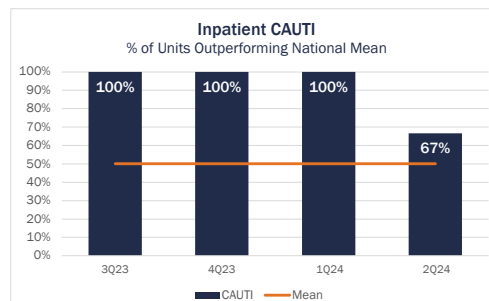
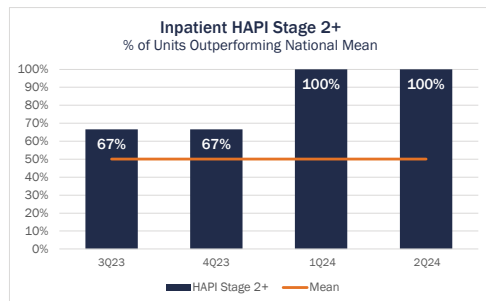
Units Outperforming National Mean							
METRIC	3Q23	4Q23	1Q24	2Q24	3Q24	4Q24	1Q25
HAPI 2+	100%	100%	100%	100%	50%	50%	0%
CAUTI	100%	100%	100%	100%	100%	100%	100%
CLABSI	100%	100%	100%	100%	100%	100%	100%
IP FALL W/INJURY	100%	50%	100%	50%	50%	100%	50%
AMB FALL W/INJURY	80%	100%	100%	80%	80%	100%	80%
TARGET	50%	50%	50%	50%	50%	50%	50%



# Empirical Quality Results (continued)

## Culpeper Medical Center Nursing Quality Metrics

Units Outperforming National Mean							
METRIC	3Q23	4Q23	1Q24	2Q24	3Q24	4Q24	1Q25
HAPI 2+	67%	67%	100%	100%	67%	67%	100%
CAUTI	100%	100%	100%	67%	100%	100%	67%
CLABSI	100%	100%	100%	100%	100%	100%	100%
IP FALL W/INJURY	33%	67%	100%	67%	67%	100%	67%
TARGET	50%	50%	50%	50%	50%	50%	50%







## Bed Placement/Throughput

Optimizing hospital throughput is vital to ensuring high-quality, safe, and timely patient care through:

- **Timely access to care** with reduced wait times and faster treatment.
- **Improved patient outcomes** with early diagnosis and treatment and continuity of care.
- **Enhanced patient safety** by avoiding overcrowding and reducing hospital-acquired complications.
- **Optimized resource utilization** with efficient use of beds and staff, and reduction of unnecessary admissions.
- **Higher patient satisfaction** by providing patients a better experience and fostering trust and confidence.
- **Financial and operational sustainability** by lowering costs with reduced lengths of stay and improved reimbursement.

Through the implementation of bed placement and throughput meetings, there has been a focused awareness on patient flow, timely access to care, improved patient outcomes, higher patient satisfaction, and financial operations.

PRINCE WILLIAM MEDICAL CENTER THROUGHPUT DATA																						
Name of Measurement	July, 23	Aug, 23	Sept, 23	Oct, 23	Nov, 23	Dec, 23	Jan, 24	Feb, 24	Mar, 24	April, 24	May, 24	June, 24	July, 24	Aug, 24	Sept, 24	Oct, 24	Nov, 24	Dec, 24	Jan, 25	Feb, 25	Mar, 25	GOAL
<b>Inpatient- ED Nursing</b>																						
Bed assigned to Occupied-ED	58	62	59	58	61	63	65	58	59	69	67	63	53	55	55	60	60	59	59	57	55	45 phased approach
Discharge order to DC (Median)	2.8	2.8	3	3	2.8	2.9	3.02	3.11	3.32	2.48	2.5	2.5	2.4	2.2	2.5	2.58	2.3	2.2	2.3	2.43	2.4	2 hours
Avg boarding min. per day-ED	129	166	129	156	197	196	188	157	186	186	241	191	103	164	234	247	172	212	163	175	316	60 mins
Discharge by noon %-Avg	9%	9%	11%	6%	5%	7%	6%	7%	6%	9%	6%	9%	8%	9%	7%	8%	8%	8%	8%	5%	8%	20%
<b>Nursing Supervisor</b>																						
Bed request to bed assign	101	152	135	124	133	167	159	96	167	224	120	172	80	124	144	157	207	104	137	115	118	30

CULPEPER MEDICAL CENTER THROUGHPUT DATA																						
Name of Measurement	July, 23	Aug, 23	Sept, 23	Oct, 23	Nov, 23	Dec, 23	Jan, 24	Feb, 24	Mar, 24	April, 24	May, 24	June, 24	July, 24	Aug, 24	Sept, 24	Oct, 24	Nov, 24	Dec, 24	Jan, 25	Feb, 25	Mar, 25	GOAL
<b>Inpatient- ED Nursing</b>																						
Bed assigned to Occupied-ED	35	36	36	35	33.2	37	37	37.8	35	39	33.5	32.2	29	34.3	31.6	28.5	29.8	30	33	37.5	31.33	20 mins
Discharge order to DC (Median)	142	126	157	212	257	161	154	147.6	230	211	187		159	176	155	165	179	198	194	196	183	100 mins
Avg boarding min. per day-ED	83	92	102	120	110	126.2	114	84	168	138	156	132	108	90	132	132	120	228	444	372	192	30 mins
Discharge by noon %-Avg	10.4%	11.2%	10.4%	9.2%	12.4%	8%	9%	13%	9%	13%	15%		12%	14%	8%	8%	11%	10%	7%	8%	8%	20%
<b>Nursing Supervisor</b>																						
Bed request to bed assign	55.4	62.3	76	73	78.8	99.8	72.5	64.6	69.8	70.2	69.5	74.3	55.7	60.6	66.3	74.3	64.5	88.3	120.33	122.2	73.66	10

HAYMARKET MEDICAL CENTER THROUGHPUT DATA																						
Name of Measurement	July, 23	Aug, 23	Sept, 23	Oct, 23	Nov, 23	Dec, 23	Jan, 24	Feb, 24	Mar, 24	April, 24	May, 24	June, 24	July, 24	Aug, 24	Sept, 24	Oct, 24	Nov, 24	Dec, 24	Jan, 25	Feb, 25	Mar, 25	GOAL
<b>Inpatient- ED Nursing</b>																						
Bed assigned to Occupied-ED	55.4	62.3	76	73	78.8	99.8	72.5	64.6	69.8	70.2	69.5	74.3	55.7	60.6	66.3	74.3	64.5	88.3	120.33	122.2	73.66	45 mins
Discharge order to DC (Median)	2.8	2.8	3	3	2.8	2.9	3.02	3.11	3.32	2.48	2.5	2.5	2.4	2.2	2.5	2.58	2.3	2.2	2.3	2.43	2.4	2 hours
Avg boarding min. per day-ED	129	166	129	156	197	196	188	157	186	186	241	191	103	164	234	247	172	212	163	175	316	60 mins
Discharge by noon %-Avg	9%	9%	11%	6%	5%	7%	6%	7%	6%	9%	6%	9%	8%	9%	7%	8%	8%	8%	8%	5%	8%	20%
<b>Nursing Supervisor</b>																						
Bed request to bed assign	55	57	79	105	53	106	79	45	70	64	43	47	58	60	39	37	62	64	72	87	104	30

