Katie Opsasnick, MSN, RN, PCCN-K
Alicia Healey, BSN, RN, PCRN
Jean M. Boles, MSN, RN, CEN
Dana Lawrence, BSN, RN, CCRN
Lauren Schlegel, BSN, RN

As the pandemic began to spread, “People all of a sudden were calling you health care heroes. I always say, ‘What took you so long?’ I’ve always known you were health care heroes,” said Kevin B. Mahoney, CEO of UPHS, during the virtual awards ceremony. “Penn Medicine nurses exemplify the very best traits of all those who work in medicine. Time and time again, I am inspired by our nurses’ leadership and extraordinary dedication to our patients. I am so grateful for your agility, compassion, and ability to continue to bring rigorous science to everything we do.”

This year, five exceptional nurses from PPMC received awards honoring their commitment to promote evidence-based, patient-centered care and to create a stronger, healthier community.

Katie Opsasnick, MSN, RN, PCRN, K
nurse manager of Cupp 3 South, was awarded the Victoria L. Rich Transformational Leadership Award in recognition of her unparalleled work ethic and ability to seamlessly balance a positive attitude with the highest standards of professionalism. An approachable mentor, creative problem-solver, and thoughtful leader, Opsasnick is always willing to share guidance and constructive feedback in an effort to help her peers grow — both within her unit and beyond. As an active facilitator of the Professional Development Committee, she proved instrumental in building and implementing the educational components of the hospital’s new Career Advancement and Recognition of Excellence program for direct care nurses and nursing leadership. Aside from earning her the admiration of her colleagues, Opsasnick’s leadership has also led to measurable outcomes: 3 South’s Press Ganey scores continue to increase every year, and the unit consistently ranks in the 95th percentile for Nurse Communication scores.

Also key to Cupp 3 South’s success is
Alicia Healey, BSN, RN, PCRN, who received this year’s Dianne Lanham Award for Leadership. As a charge nurse, unit leader, and mentor for her peers, she works alongside Opsasnick to ensure that the unit — which cares for patients with cardiovascular conditions or undergoing thoracic procedures — runs smoothly. Always willing to step up and take initiative, Healey has served as both chair and co-chair of the Unit Council and is a member of the Products Committee. Over the past several months, she organized a trial of a new product that better connects EKG electrodes to remote telemetry (monitoring) units. She collected feedback from key stakeholders, then shared their comments with the committee and demonstrated that not only was the product beneficial for both patients and staff, but it also presented significant cost savings.

Emergency Department nurse
Jean M. Boles, MSN, RN, CEN, was presented this year’s Helen McClelland Award for Research and Innovation. Whether working with the ED’s Unit Council, Healthy Environment Committee, or Research Committee, Boles is committed to developing and implementing evidence-based improvements. She developed a research study to examine and measure violence in the ED — a complex issue that affects hospitals across the country. Under her guidance, a multidisciplinary task force was assembled, and the team put together a Violence and Aggression Behavior Bundle that outlines standardized de-escalation approaches in case an individual becomes violent or aggressive. The ED also piloted a new code response, Code Violet, to activate these interventions, and the code has been adapted across the hospital. Though it took time to translate her research into practice, Boles was confident that the impact would be worth the effort.

Like Boles, Dana Lawrence, BSN, RN, CCRN, a nurse in the Heart & Vascular Intensive Care Unit, is able to envision big-picture changes and bring them into reality.

Recently, a friend shared that she was struggling with some health issues. She had visited her primary care doctor and gynecologist and undergone two regimens of antibiotics, but nothing had changed. She was planning to travel outside of the country, and she was worried that her problems would worsen. She told me that she thought she might need a urologist. “Better yet,” I said, “I think you need a urogynecologist.” Two days later, she met with Uduak Andy, MD, chief of Gynecology at Penn Presbyterian Medical Center, and later that same week, she left for her trip with a new medication and peace of mind.

As a friend, I was happy to have helped — and as CEO of Presbyterian, I was proud to witness the impact of our new Women’s Health facility firsthand. Located on the 12th floor of Penn Medicine University City (PMUC), the new Penn Health for Women University City began welcoming patients in mid-April. With its light wood floors, blue tones, large waiting areas, and exam rooms flooding with natural light, the facility feels more comfortable than clinical. It also offers easy access to other specialists and primary care doctors located in PMUC, as well as those based across the street on the main hospital campus. By combining Urogynecology, Gynecology, and the PEACE Family Planning and Pregnancy Loss program into one central location, this comprehensive center ensures that patients of all ages can access convenient care — whether they need to undergo routine exams and screenings or minimally invasive surgery; receive treatment for bladder and pelvic floor disorders, or endometriosis and fibroids; or work with a compassionate care team who can help as they plan for a family, manage a miscarriage, or terminate a pregnancy.

As our Women’s Health teams continue to settle into their new space, I am excited to see how they will grow and enhance their services. I’m so grateful to everyone who played a part in opening this facility — your efforts will allow us to expand our reach and ensure women across our community can get the care and support they need.
Continued from front.

Christopher Edwards, MD, chief of Emergency Medicine at PPMC, appreciates more than the sight of an empty waiting room in the Emergency Department (ED). This means that patients are being connected to the care they need when they need it, without long wait times or overcrowding. Following the successful rollout of the Presby EnhanceED initiative, that sight has become more frequent over the past five months.

Presby EnhanceED aims to tackle capacity challenges and improve the patient experience with an optimized triage process and a three-track flow model. By rapidly assessing patients when they arrive, then assigning them to either the super track, mid track, or acute care designation, the process and a three-track flow model. By rapidly assessing patients when they arrive, then assigning them to either the super track, mid track, or acute care designation, the

A: I grew up in West Philadelphia and attended John Bartram High School for Human Services. Penn’s partnership with the school allowed students to actually work four hours per school day in human services positions, and from this experience, I knew I wanted to be a part of the Penn community. In 1982, a temp agency assigned me to a yearlong clerical position in the department of Organ Transplantation at the Hospital of the University of Pennsylvania. Five months after leaving, I was recruited for that position as a permanent employee. In 2000, I moved to PPMC to assist the chief of Surgery. Since then, I have worked with Nursing Administration, Nursing Education, and Psychiatry; presently, I work in the Executive Office.

A: We’re truly a family. We like to catch up and share our lives outside of work. With COVID-19, our providers are so busy that my goal is to do anything I can to make their lives easier — answering patients’ questions, scheduling appointments, angiographies, and vascular procedures, anything they need. I’m so proud to wear my badge and tell people where I work.

A: It is not as easy as you might think. You have to multi-task and stay as organized as possible. I might think that I’m going to come in and finish something from the previous week, but then I’ll get a call that we need to schedule a procedure, and that requires authorization from the patient’s out-of-state insurance. As I’m on the phone with the insurance company, I’m also patient’s out-of-state insurance. As I’m on the phone with the insurance company, I’m also

A: I relocated to the new ACC right as COVID shut everything down. Not only did I have to make significant strides toward our metric goals. The average door-to-provider time has reduced to 21 minutes (the goal is 20 minutes). Though the changes are currently only in effect Monday through Friday between 9 a.m. and 8 p.m., these early successes suggest that the team will be able to translate the changes to the evening shift during the second phase of the project.

“Who goes live with a new workflow in the middle of a pandemic?” Edwards said. “But the staff have been amazing. This has been a whole overhaul of the way that we process patients, and we have learned a lot from their feedback.” For example, COVID-19 revealed that a bigger footprint was required to care for acute patients, while a smaller footprint could accommodate super/mid track patients; this led to some adjustments to the staff in each area.

“Tll have been some growing pains,” he said, “but these changes have been possible because our nurses, techs, and staff want to create the best experience they can.”

The ED’s Successful EVOLUTION

APPLAUDING PPMC’S UNSUNG ADMIN HEROES

Administrative professionals may largely work out of the spotlight, but their efforts ensure that every unit and department is stocked, staffed, and scheduled. Across the hospital, PPMC’s dynamic, detail-oriented admins offer clerical and organizational support, maintain inventories and calendars, coordinate meetings and events, communicate with patients and vendors, and much more. With their technical skills, problem-solving abilities, and extraordinary capacity to juggle tasks, they keep the hospital running smoothly even on the busiest days. To get a glimpse of the admin experience, read the perspectives of three essential staff below.

Q: What was your path to Presby like?

Q: What advice would you give to other admins?

Q: What do you enjoy most about your job?

Q: What would others find most surprising about your role?

Q: What motivated you to overcome challenges in your role?

Q: Do you have a favorite work memory?

For PFROFESIONALISM & PATIENT CARE

PRESBY NURSES SET NEW STANDARDS

to fruition with thoughtful actions. For example, when a ventricular assist device (VAD) policy was updated, Lawrence volunteered to create video of herself changing a VAD dressing to provide a visual resource for her colleagues. Her dedication to providing excellent care to a highly specialized patient population and ensuring other staff can do the same earned her this year’s Lillian Brunner Award for Exemplary Practice. Since joining PPMC in 2012, Lawrence has become a role model for her coworkers and nurses on other units. Not only does she have exceptional assessment skills and advanced knowledge of anatomy and pathophysiology, but she is eager to share her insights during interdisciplinary rounds and during one-on-one interactions.

Finally, the Rosalyn J. Watts Award for Community/ Patient/Family Relationships was conferred to Lauren Schlégel, BSN, RN, a nurse in the Trauma/Surgical Intensive Care Unit, in recognition of her willingness to go above and beyond to brighten the darkest days. During the height of the COVID restrictions, for example, Schlégel coordinated a time with a patient’s family and friends, instructed them to gather across the street, and decorated the patient’s window so they could easily spot it. When the day came, she positioned the patient by the window and gently raised his arm to wave at the group. A family member wrote a letter thanking Schlégel for her compassion, noting, "Even in the middle of a pandemic, the staff remains innovative and supportive, and for that our family is grateful!"