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TERESA LAMBERT MBA, BSN, RN

Vice President of Patient Care Services/ Assistant CNO

Compassionate Leader | Creative Change Agent | Seasoned Administrator

Developing cost-effective services and efficient processes that accelerate growth and deliver quality outcomes for more than 15 years

Award-winning **Nursing Leader** with long-time history of devising successful initiatives that produce mission-critical results in areas of process improvements, service-line expansion, and expense reductions for acute-care hospital. Dual background as administrator and nurse provides a 360-degree perspective of healthcare. Solid record of flexing up and down based on patient load to balance business goals and clinical needs. Creative problem-solver who sees change as an opportunity and embraces challenges. Strong leader who demonstrates accountability and maintains high standards for staff performance. Collaborates with key stakeholders and cross-functional teams to achieve business goals.

Areas of Expertise

- ✓ Employee Engagement

✓ Patient Satisfaction

✓ Strategic Planning
- ✓ Expense Control

✓ Physician Relations

✓ Training & Development
- ✓ Financial Forecasting

✓ Service Line Expansion

✓ Workflow Planning

LEADERSHIP HISTORY

CHI St. Vincent Hot Springs Hospital-Hot Springs, Arkansas
An acute-care, 282-licensed bed hospital (Formerly St. Joseph Mercy Health Center and Mercy Hospital of Hot Springs)

Vice President of Patient Care Services/Assistant CNO

July 2020-present

Responsible for all nursing operations for the entire hospital. Involved in advising senior management on best nursing practices, creating retention programs, establishing compensation wages, managing nursing budgets, planning new patient services, conducting performance assessments, and representing nurses at board meetings.

Key Achievements:

- ▶ Shared Governance Accreditation June 2023

Clinical Director Nursing

April 2014-July 2020

Promoted to deliver strategic guidance to all in-patient floors and critical care units. Ensure compliance with licensing and regulatory standards of practice and care, such as Arkansas State Board and Joint Commission. Provide ongoing, clinical continuing-education opportunities for staff. Lead over 500 employees, including managers, supervisors, nurses, patient care techs, monitor techs, and unit coordinators. Manage \$65M operating budget.

Key Achievements:

- ▶ Magnet Designation Oct 2020
- ▶ Service Line Expansion: Led implementation of the Comprehensive Joint Replacement Bundle Program through the Centers for Medicare and Medicaid Services (CMS). Have achieved \$1.2M in refund

for the program from CMS. Achieved recognition as an Advanced Center of Excellence for Total Hip and Total Knee Replacements from the Joint Commission in 2018. Top performing program in all of CHI.

- ▶ **Quality Improvement:** Worked to decrease CAUTI and CLABSI incidence for the facility. Led efforts to develop nurse driven protocols for urinary catheter removal, mobility, and telemetry removal. Led falls reduction team and reduced falls with injury on every inpatient nursing unit during FY '19. Helped to lead team to develop process to decrease blood culture contamination to less than 3% for the last two years. Data presented at national CommonSpirit meeting and currently being submitted for publication. Successfully led through Joint Commission inspections, as well as Arkansas Department of Health surveys.
- ▶ **Project Management:** Created designated Clinical Evaluation Unit (CEU) to care for observation patients. Started with six beds, but quickly expanded to twenty-one. Successfully wrote and submitted the Exemplary Professional Practice (EP) sources of evidence for the Magnet application for the facility. Led efforts to successfully implement acuity based staffing for nursing areas.
- ▶ **Employee Engagement:** Increased employee engagement scores to above the 90th percentile during tenure by implementing employee-led process improvement teams that meet monthly to address issues and concerns. Hold staff accountable for actions, including following policies and procedures. Increased inpatient nursing participation from 55% to 97% on last survey. Outperformed national standards for all areas on nursing NDNQI satisfaction survey. Worked to develop and implement the Clinical Ladder for RNs and PCTs. Currently serve as the accountable executive for both programs. System co-lead for development and rollout of "Kindness Matters" material and class. Participated in teaching forty-four classes and reaching approx. 1400 employees. Developed and help implement "Mission Reset" to replace annual nursing skills fair.
- ▶ **Patient Satisfaction:** Spearheaded the "Good to Great" efforts for all of the inpatient nursing units to include rollout of nurse leader rounding, bedside shift report, unit coordinator rounding, hourly rounding, and support-coach-support. Have seen consistent improvement in patient satisfaction scores since 2018. Account administrator for My Rounding and Patient Call Manager. Led team to implement bedside report between Med-Surg units, ICU and the procedural areas.
- ▶ **Strategic Planning:** Served as Nursing Executive Rep Sponsor in the development and rollout of Shared Governance. Helped to develop current structure and currently represent Nursing Administration on the Practice Council. Helped to develop the strategic plan for nursing for the facility through 2021.
- ▶ **Physician Relations:** Have built strong working relationships with the physicians practicing in facility. Facilitated the rollout of multidisciplinary rounds on the inpatient nursing units with the Hospitalist group.

Executive Director Outpatient Services

July 2006 – April 2014

Promoted to deliver strategic guidance to outpatient department and drive revenue through service line expansions. Continued to hold authority for outpatient services and GI lab but added oversight for breast center and prenatal clinic; sleep lab; outpatient surgery center; and clinical evaluation unit. Ensure compliance with licensing and regulatory standards of practice and care, such as Arkansas State Board and Joint Commission. Provide ongoing, clinical continuing-education opportunities for staff. Lead 102 FTEs, including nurses, nurse practitioners, sleep technicians, respiratory therapist, and housekeeping techs. Manage \$35M operating budget.

Key Achievements:

- ▶ **Project Management:** Initiated Total Joint Program, which decreased length of stay by 15%; increased patient satisfaction from 85th percentile to 93rd percentile; and saved \$400K in first year on costs of implants for total knee and hip replacements. Received two awards from Arkansas Foundation for Medical Care in recognition of Joint Program.
- ▶ **National Recognition:** First hospital in nation to win award from Institute for Healthcare Improvement for its Joint Program. Serve as mentor hospital to facilities interested in implementing similar program. Second hospital in Arkansas to be an Advanced Center of Excellence for Total Hip and Total Knee Replacements

- ▶ **Program Management:** Delivered operational turnaround to Sleep Lab, generating 40% growth and adding \$637.5K in additional revenue. Expanded services to accommodate growing patient traffic; created wait-list call process that reduced wait time for appointments from more than four weeks to fourteen days; kept lab open six nights per week instead of four to drive volume; and decreased sleep study interpretation time from five weeks to less than one week by incentivizing pulmonologist to read studies faster.
- ▶ **Women's Services:** Expanded services at prenatal clinic for Medicaid patients, who account for 60% of hospital's deliveries. Prepared proforma to justify initiative, showing that volume increases at expanded clinic would lead to increased deliveries and reimbursement for hospital. Won administrative approval to move clinic to larger space; increase nursing staff by two; and add financial counselor to guide patients applying for Medicaid. More than 90% of patients are now Medicaid-approved—up from 16% in 2009 when program launched.
- ▶ **Neurology Service Expansion:** Appointed by senior management to serve on Strategic Committee for Installation of Telestroke Program. Led implementation using LEAN Six Sigma tools in 2011, making hospital the first in Mercy system to go live with "telestroke."
- ▶ **Public Relations:** Spearheaded campaign to acquire \$650K mobile mammography bus, enabling hospital to continue serving five-county region that has the highest incidence of breast cancer in Arkansas.
- ▶ **Training and Development:** Led implementation of EMR in all areas of responsibility and provided support for other hospitals in Mercy system. Met all goals as set forth by CMS.
- ▶ **Leadership Recognition:** First winner of the "Ray Pelton Leadership Award" in honor of hospital's retired VP of HR. (Nominated by peers)

Outpatient Department Director

April 2004 – July 2006

Promoted to drive efficiencies, cut costs and introduce productivity standards to outpatient department, endoscopy lab, GI department and a lithotripsy contract service. Managed staff of 35 nurses and techs. Oversaw \$1.2M operating budget.

Key Achievements:

- ▶ **Productivity Improvements:** Drove outpatient productivity scores to 5th percentile and GI productivity scores to 3rd percentile in national benchmarking standards—up from 15th and 10th percentiles respectively. Effort involved sharing financial information with staff each pay period to increase their understanding and elicit their input on how to more efficiently manage staffing. Additionally, cross-trained all staff to work in at least two and sometimes more areas of departments to allow greater flexibility without compromising care. Trained staff to administer chemotherapy, expanding staff from two chemo-certified nurses to seven.
- ▶ **Efficiency Enhancements:** Conceived and rolled out pre-admission testing process, which decreased number of cancelled cases and led to OR cases getting started in a timely manner. Today, 97% of patients are pre-assessed, up from 20%.

Outpatient Department Charge Nurse

December 1997 - April 2004

Promoted to lead staff of 35 nurses and manage daily patient-care operations.

NURSING EXPERIENCE

CHI St. Vincent Hot Springs Hospital-Hot Springs, Arkansas

An acute-care, 282-licensed bed hospital (Formerly St. Joseph Mercy Health Center and Mercy Hospital of Hot Springs)

Home Health Supervisor

November 1994 – November 1997

Oncology Unit Charge Nurse

August 1987 – October 1994

EDUCATION & CERTIFICATIONS**Master of Business Administration (Focus on Healthcare Administration)**

Graduated 2017

Capella University, Minneapolis, Minnesota
Graduated with 4.0 GPA *summa cum laude*

Bachelor of Science in Nursing

Graduated 2015

University of Arkansas, Fayetteville, Arkansas
Graduated *summa cum laude*

Associate degree in Nursing

Graduated 1987

Texarkana College, Texarkana, Texas

Six Sigma Green Belt

Certified 2007

Oncology Certified Nurse

Certified 1997
(expired)

Extracurricular**ANA Membership****ArNA Membership****AONL Membership****Advisory Board for Henderson State University Dept of Nursing****Advisory Board for National Park College School of Nursing****Board Member for Cooper-Anthony Mercy Child Advocacy Center**