Better Together:
From the U.S.A. to the U.K.,
HCA Healthcare colleagues stand in unity to learn and serve
Message From the CEO

HCA Healthcare colleagues.

This year has been another year where our HCA Healthcare family continues to exemplify how we are better together. Each one of you brings our mission to life, whether you provide direct patient care or support those who do.

While our commitment to our mission is centered around providing high-quality care to our patients, it also revolves around our commitment to our colleagues. The winter 2021 HCA Healthcare Magazine highlights some of the many growth and development opportunities available to our current colleagues (page 4) and to those entering the field for the first time (page 8). This level of support and collaboration allows our teams to provide unparalleled care when and where it’s needed most, from the laboratory (page 10) to the emergency room (page 12).

Our culture of collaboration is critical to the success of our mission, and our culture is what sets us apart within the healthcare landscape, both in the U.S. and abroad. HCA Healthcare UK delivers exceptional patient care across seven facilities in England.

We are proud of the support and partnership we have been able to provide to England’s National Health Service throughout the course of the pandemic (page 16). These are the moments when our colleagues’ faithfulness to their communities shines.

As an organization, we truly are better together. You prove that every day with your dedication to our patients and to each other. As the year comes to a close, I want to thank you for everything you do individually, and together, to care for and improve human life.

Sincerely,

Sam Hazen
CEO, HCA Healthcare

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Visit Magazine.HCAHealthcare.com for more stories about our incredible colleagues.

On the Covers

Front cover — Together, it is our colleagues who keep our mission alive every day. “We have been through the toughest times that we’ve ever seen in our lifetime,” said hospitalist Dr. Gerald Onuoha, pictured embracing a fellow colleague at HCA Healthcare’s TriStar Hendersonville Medical Center in Tennessee. “We have gotten through it because we have done it together. Our strength is in our love and support for each other.” Thank you to our colleagues for continuing to care like family.

Back cover — Kipp Walker, Patient Experience Concierge, Lake City Medical Center, Lake City, Fla.
Galen nursing students have access to the resources and facilities necessary to accelerate their clinical education.

"In the urgent care space, providing career advancement opportunities is crucial," says Jami. "These programs allow us, as an employer, to leverage new and existing talent to be placed in hard-to-fill positions due to their specificity. However, the overarching goal is to retain colleagues who have demonstrated our mission, vision and values."

**Natural Partners: CareNow and The College of Health Care Professions**

HCA Healthcare colleagues have access to many ways to grow their careers and also their skills as healthcare practitioners. A new partnership between CareNow and the College of Health Care Professions (CHCP) in Texas provides opportunities for educational and career advancement for limited medical radiologic technologists (LMRTs), tuition free. The partnership was designed to address the shortage of LMRTs throughout the industry.

"Every year, each state has new requirements or guidelines for licensing this position, which creates a void for this particular role," says Jami. "As an urgent care provider, we realized we had to act quickly. The decision was made to explore an internal program to meet the demands of each state and to provide a promotable pathway for our colleagues.

That search led CareNow officials to approach CHCP — educators in the allied-health field for more than 30 years — with the concept of establishing a new partnership. "Synergy between CareNow and CHCP was well aligned," says Jami, as both organizations were looking for a solution to the dwindling supply of LMRTs.

"The partnership was developed due to a larger trend across the nation, where brick-and-mortar schools shifted their curriculums from offering limited-scope LMRT programs to primarily offering full-scope radiologic technologist programs," says Jami. "Prior to approaching CHCP, they too were having internal conversations surrounding the growing need for medical assistants who are also certified to take radiographic images."

The CareNow/CHCP partnership was established in January 2021 and launched its first virtual LMRT classes with CareNow colleagues in Houston, Texas, and Las Vegas. The “classroom” portion of the CHCP-developed program is completely virtual, making it accessible to students from a variety of locations.

The LMRT program takes six months to complete, and it meets all the criteria required for students to apply for state licenses after they pass a board certification test administered by the American Registry of Radiologic Technologists. Students enrolled in the program need to be endorsed by their manager and human resources, and they must pass an aptitude test. CareNow colleagues must also earn a certificate of completion as a medical assistant and sign a two-year employment obligation. Upon successful completion of the test, CareNow will promote the colleague to a more technical position that provides higher earning potential. "The importance of offering programs to our colleagues is critical given the climate caused by the pandemic. Many colleagues are searching for stability and alternate professional avenues in an uncertain time," says Jami. "This program provides focus, promotability, flexibility and a different approach to conventional learning methods."

I’ve looked into the Family Nurse Practitioner (FNP) programs along with the Masters of Science in Nursing (MSN) for leadership at both Galen and the University of Texas at Arlington (either location will receive tuition reimbursement, removing the financial burden). I’m leaning toward Galen because I am interested in expanding my knowledge and career in leadership.

— Briana Ladson, R.N., BSN Clinical Nurse Coordinator Methodist Hospital San Antonio, Texas
HCA Healthcare’s acquisition of Galen College of Nursing has given our nurses incredible access to the largest academic practice partnership in the nation, according to Galen CEO Mark Vogt.

“This ability to have a direct relationship with a practice partner enhances the integration of evidence-based practice in our curriculum,” says Mark. “[This] translates into excellence in patient care, especially as the role of nurses in healthcare continues to evolve and elevate. Another benefit is students having the opportunity to learn in the clinical settings where they will eventually practice.”

To meet the needs of nurses currently with HCA Healthcare, Galen now offers several online programs that are specifically designed to expand proficiency while lowering the barriers to entry. Galen’s R.N. to BSN program — which can be completed in as little as 12 months — features an option in which Galen bills HCA Healthcare directly, allowing eligible colleagues to incur no out-of-pocket tuition expenses. Additional online programs offered by Galen include two master’s degrees. The first, Nursing and Healthcare Leadership, is designed to promote the leaders needed to inspire the nation’s more than 3 million registered nurses. The other, Nurse Educator, aims to cultivate teachers to develop the more than 1 million new R.N.s that government officials say are needed to address the current critical healthcare needs. For both programs, eligible nurses can receive a cost savings of 33% — $350 instead of $525 per credit hour — for a total tuition cost of $12,600.

It didn’t take long for the collaboration between Galen and HCA Healthcare to be realized, says Mark. “We can now align our expansion with their needs to support new nurse development as well as leverage the organization’s support and resources to accelerate the process where it is needed most.”

Ashley’s Story

In November 2020, 32-year-old Ashley Vertuno, FACHE, became HCA Healthcare’s youngest CEO. She took the reins of JFK Medical Center North Campus in West Palm Beach, Fla., a 245-bed acute care facility with an adjoining 88-bed behavioral health unit and some 650 colleagues total. That appointment exceeded even her own expectations.

“I wanted to be a hospital CEO by 35, so I beat my goal by three years,” says Ashley, now 33. “I can’t believe I’ve been here almost a year.”

Growing up in Richmond, Va., Ashley was familiar with HCA Healthcare. After earning her undergraduate degree in business administration and management from Virginia Commonwealth University and her master’s in health administration from the University of South Carolina, she took a position with HCA Healthcare’s Physician Services Group as a practice manager overseeing two physicians’ offices with Centerpoint Medical Center near Kansas City, Mo.

Though she hadn’t planned to leave HCA Healthcare, Ashley developed a great working relationship with the CEO at Centerpoint and followed her mentor to California and a position with TriStar Healthcare. Four years later, Ashley was again on the move, returning to HCA Healthcare as chief operations officer at Westside Regional Medical Center in plantation, Fla.

Ashley says there were several factors that drew her back, including a strong history of mentoring. “The other key is the patient promise,” she says. “Our mission, above all else, is that we’re committed to the care and improvement of human life. The patient promise really resonates for me.”

This attribution is reflected in the leaders who have supported Ashley during her career, colleagues like Barbara Simmons, R.N., CEO at Westside Regional Medical Center, and Heather J. Rohan, FACHE, a former HCA Healthcare CEO in Florida and Tennessee and president of the TriStar Division.

“The thing that I’ve learned from [Heather] is you have to raise your hand,” says Ashley. “There’s something you want, you have to let people know. My boss, Barb, knew when I came in as the COO that I wanted to be at CEO.

“It comes down to having a conversation with your supervisor and just letting them know you’re interested in exploring [new opportunities]. It’s about relationships and connecting to other people. That’s very important.”

Today, Ashley finds herself in the role of mentor, encouraging others to pursue their goals — not only through her position at HCA Healthcare but also via her work with professional associations, such as the American College of Healthcare Executives. She’s driven, in part, because she still has more to achieve. “I’m still growing, and I’m still learning. Every day I learn something new. I cannot tell you how supportive my peers have been. That speaks volumes about the culture that we have at HCA Healthcare.”
Investing in Our Future

Developing the next generation of mission-driven caregivers starts with education and opportunity.

Investing in the future means investing in the colleagues of the future, and for HCA Healthcare, it’s a very intentional, multipronged approach. Since 2015, HCA Healthcare has committed millions of dollars to historically Black colleges and universities (HBCUs) to provide scholarships and internships for high-achieving students. This year, HCA Healthcare made its most significant commitment to date: $10 million over the next three years to HBCUs as well as Hispanic-serving institutions (HSIs).

“Nursing is a huge need,” says Sharon Dixon Gentry, AVP for Education and Strategic Partnerships in HCA Healthcare’s Diversity, Equity and Inclusion Department. “The goal is to create a pipeline of talent by building strategic, innovative partnerships, providing future healthcare leaders with myriad opportunities to connect with HCA Healthcare.”

The partnership has mutual benefits, as well. For example, nursing professors could join a hospital board to learn firsthand about industry needs and challenges. “This level of intentionality in creating deep relationships is historic for HCA Healthcare,” says Sharon. “These initiatives are literally changing lives.”

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The Power of Gen Z

“T’was the night before Christmas, and all through the HCA Healthcare campus, the halls were filled with the sound of students planning for graduation and internships. Myles was one of these students, and he knew that he needed to plan carefully in order to land his dream job with HCA Healthcare.”

DAIKERRA SWEAT
Intern, Human Resources
Sarah Cannon, the Cancer Institute of HCA Healthcare

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The Value of HBCUs and HSIs

Myles aims to dispel any misconceptions about HBCUs and HSIs.

“They’re not second-tier institutions by any means. I graduated from a very competitive high school. I was accepted by some of the most prestigious institutions in the country. I chose to go to an HBCU — not by force, but by lack of opportunity. People aren’t here because they weren’t accepted elsewhere, which I think is a common misconception. The teachers here are Ph.D.s. The students here are top students. They ranked high in their high school class. We’re just as intelligent and prepared for the workforce as anybody else.” — Myles Harris

Relieving the Burden

Daikerra, a first-generation college student, says that being an HCA Healthcare Scholar helped alleviate the worry about how she was going to pay for her education.

“I’m a testament to the fact that this scholarship helps offset the cost for students like me who can’t really afford it,” she says. “I wanted to be an example for not only myself, but also for my siblings and my parents, that I can do this. I’m extremely grateful that I was selected to be a scholar.”

For more information about our partnerships, visit HCAhealthcare.com/about/diversity-equity-inclusion

MYLES HARRIS
Associate Project Manager
Information Protection and Security

Real World Prep

Myles has always had a knack for numbers, so he thought he might become a financial advisor or a stockbroker. Then he met someone who told him about the many career opportunities offered by HCA Healthcare.

“You can use the skills that you’ve really good at — money, numbers and statistics — in other fields, too,” he says. “It opened my mind, and that’s when HCA Healthcare kind of walked into my life. It’s been here ever since.”

During his junior year at Fisk University, Myles received an internship through the HCA Healthcare Scholars Program. The internship was key in his decision to pursue a career with HCA Healthcare after graduation.

“I always tell people that what I love so much about HCA Healthcare, in general, is that when you come here for an internship, they don’t treat you the way interns typically get treated. In my other internships, I was basically an errand person or a paper pusher,” Myles recalls. “I made sure everybody had their coffee, or I delivered a paper from this place to the next. With HCA Healthcare, they gave me applicable, on-the-job training that actually had value to the enterprise and gave me a sense of responsibility. “That was crucial to me because it gave me the opportunity to actually get real experience that was pivotal to getting me prepared for graduation,” says Myles.

His internship was so successful that Myles continued working for HCA Healthcare through his college graduation. He juggled his job with academics, as well as managing clubs, campus organizations and other extracurricular projects. Myles is now an associate project manager in Information Protection and Security.

“I work on cybersecurity and identity access projects,” says Myles. “These help protect and provision access to users in our facilities and outside of our enterprise.”

Helping People Who Help People

Daikerra Sweat, a Fisk University psychology major, knows she has a passion for people.

“I’m in the business of joy, just whatever I can do — whether that’s customer satisfaction or ultimately helping someone out,” she says.

After completing a human resources internship with a biopharmaceutical technology company, she felt compelled to learn more about it. “It dealt with people, processes and onboarding. So many things that factor into human resources, and I thought, ‘I like this. I need to explore it more.’”

Daikerra also feels a strong connection to Sarah Cannon, the Cancer Institute of HCA Healthcare, because her mother once worked at a cancer center. “She was the first face that patients saw, and I saw the impact that she had on others. Even though she wasn’t the doctor or the person running the test, she still had a hand in what, ultimately, the goal was. I liked what she was doing. It really brightens my day to know that I’m helping someone who’s helping someone.”

The Value of HBCUs and HSIs

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“They’re not second-tier institutions by any means. I graduated from a very competitive high school. I was accepted by some of the most prestigious institutions in the country. I chose to go to an HBCU — not by force, but by lack of opportunity. People aren’t here because they weren’t accepted elsewhere, which I think is a common misconception. The teachers here are Ph.D.s. The students here are top students. They ranked high in their high school class. We’re just as intelligent and prepared for the workforce as anybody else.” — Myles Harris

In Support of HBCUs and HSIs, HCA Healthcare has:

• Committed $1 million to Tennessee State University, funding internship opportunities and supporting the growth of the Health Information Management program (2015)
• Committed $1 million over four years to fund HCA Healthcare Scholars at Fisk University, providing scholarships, career planning and internship opportunities for high-achieving undergraduates (2019)
• Committed $10 million over the next three years to HBCUs and HSIs, offering scholarships and internship programs to students interested in healthcare careers and related fields (2021)
The wonder — some may even say, the miracle — of medicine is that it is tangible. For the most part, you can see it. You can feel it. A nurse takes your vitals — temperature, blood pressure and so on — and then starts an IV. A surgeon makes an incision. Physicians examine and palpate the body to locate sources of discomfort. X-rays, MRIs, CT scans, ultrasound, and other diagnostic procedures produce remarkably clear images of musculoskeletal systems and internal organs. But there’s another side of medicine that happens largely out of sight and out of earshot: Welcome to the laboratory.

The work product of the lab is information,” says Joanne Trout, MBA, MT (ASCP), president of HCA Healthcare Laboratory Services and CEO of HCA Healthcare Integrated Regional Laboratories. “It’s one of the few areas whose contribution to healthcare touches nearly every patient and informs nearly every caregiver regarding patient clinical status, treatment needs and care progression.”

In short, labs play a vital, if often unseen, role in providing top-quality care. In 2020, during the pandemic, HCA Healthcare’s domestic labs and their nearly 9,000 colleagues performed more than 91 million diagnostic tests processed by HCA Healthcare laboratories in 2020.

The bonds forged through the pandemic effort both highlighted the role labs play in healthcare and strengthened the collaboration between the laboratory and other providers and departments.

— Joanne Trout, MBA, MT (ASCP) President, HCA Healthcare Laboratory Services CEO, HCA Healthcare Integrated Regional Laboratories

“Choosing the right test for the right clinical scenario involves understanding the studies the manufacturer has performed and comparing prevalence of disease while balancing supply,” says Joanne. “As new tests such as those for detecting COVID-19 antibodies came to market, lab officials evaluated the professional literature to determine how that test would be employed; they also addressed physician concerns.”

“Often we are the physician behind the physician or the staff member behind the clinical care team. I personally realized during the pandemic how many people now know what the laboratory does and how the laboratory participates in healthcare. Patients, public news outlets, government and administrators all supported the lab more than I’ve ever seen.”

— Heather Signorelli, DO, Vice President and Chief Laboratory Officer for HCA Healthcare Laboratory Services
Ready Always

HCA Healthcare’s trauma and emergency services continue to raise the bar.

With today’s 24/7 news cycle, we are more readily exposed to a growing number of large-scale disasters, whether human-made or natural. “Over the last five years, the number of emergencies our facilities have responded to is incredible, and it continues to increase every year,” says Jake Marshall, MPS, CEM, FF/NRP, senior director of HCA Healthcare’s Enterprise Preparedness & Emergency Operations. “Last year [2020], HCA Healthcare facilities activated their emergency operations centers to respond to more than 900 incidents. Even before the COVID-19 pandemic, we were in the high 800s.” Jake is tasked with determining “how we can bring HCA Healthcare’s scale and scope to emergency operations so that we’re able to provide these resources and support in a much more efficient manner.”

“We define an incident as any event that may have the potential to disrupt our clinical or business function,” he says. “So it’s not just our numerous responses to wildfires in California or hurricanes in Florida. Our facilities are constantly working with our community partners to prepare for large ‘mass gathering’ events.”

Many HCA Healthcare hospitals play key community response roles for large events, such as [sports championships] or a presidential debate. Any time there’s a large gathering of people, there are not only pertinent security concerns, “but also people naturally will have unfortunate medical emergencies,” says Jake.

Then there is the reality of ever-changing factors in the communities served by HCA Healthcare. “A lot of it has to do with growing populations,” says Jake, adding that more people are moving to disaster-prone areas, such as coastlines at risk for storm damage and remote, heavily forested regions at risk for wildfires. Michael Wargo, R.N., BSN, MBA, PHRN, CMTE, vice president of HCA Healthcare’s Enterprise Preparedness & Emergency Operations, explains that it’s the job of a specialized group at HCA Healthcare to identify potential threats and disasters and create response plans to address them so patient care isn’t adversely affected.

The result of that job is the development of a network of individual emergency response plans customized for each HCA Healthcare facility. Collectively, the network constitutes a national emergency response plan, a readiness guide that requires almost constant review and revision. “Every time we have an emergency at any level, we do what’s called an after-action review, where we go through and look at the lessons we learned,” says Jake. “What did we do incredibly well? What can we improve the next time?”

Greater Scale for Greater Scope of Care

“And because of the organization’s scope and scale, those lessons don’t just stay [internal],” he says. “We take those lessons and build them into our enterprise-wide emergency and disaster response plans.”

That scale is immense, says Michele K. Zigor, MSSN, R.N., vice president of Trauma Services and Clinical Operations Support. She has direct oversight of the clinical, administrative and operational elements of 106 trauma centers (more than 5% of trauma centers nationwide), which together treat roughly 165,000 patients annually (nearly 4% of trauma patients nationwide). “Trauma centers range from Levels 1 to 4, depending on the population and number of specialists required to be in-house or on call. Level 1 facilities, for example, have specialists in-house, while a Level 4 is designed to stabilize patients prior to transport elsewhere for further treatment. Each facility plays a key role in providing and improving patient care.”

“Right now, we have a central registry – the HCA Healthcare Trauma Data Center,” says Michele. “We have close to 600,000 patients in it.” That information is shared with state and national regulatory agencies and the American College of Surgeons, collaborations that help drive valuable research and raise the bar of quality care. Mike explains that HCA Healthcare is committed to equitable patient care, which means emergency response plans must be tailored to fit the size and location of each community we serve. That’s why the emergency response plan for Del Sol Medical Center in El Paso, Texas — where 46 people were shot at a Walmart store in August 2019 (see page 15) — may differ from the plan for Sunrise Hospital and Medical Center in Las Vegas, Nev. (where, in October 2017, a lone gunman shot 581 people during an outdoor concert, resulting in a total of 867 injuries).

“From an enterprise level, our planning needs to be scalable across all communities,” says Mike. “We plan for the population within a community for our everyday ‘normal’ trauma cases, such as motor vehicle crashes, even the occasional shooting. In Las Vegas, where you have a much larger population, we have to assume the risk is different. My job is to look at the risk of where our facilities are and anticipate-our everyday volumes.”

That responsibility doesn’t change, even in the face of overlapping emergencies. Hurricane Ida, which devastated a number of Louisiana communities this past summer, is a perfect example. “As one of the worst storms to hit New Orleans was ravaging that community — 16 years to the day since Hurricane Katrina hit those same areas — our hospitals were still actively responding to the surge of the COVID-19 delta variant,” says Jake. “By investing in emergency operations as a whole, HCA Healthcare has an organizational resilience that few others have.

“We make sure that, no matter the emergency, we are able to provide the exact same level of care to the patient at the bedside,” he says. “Caring for and improving life is our mission, and our team is blessed to help our teams across the company do just that, no matter what.”

By investing in emergency operations as a whole, HCA Healthcare has an organizational resilience that few others have.

— Jake Marshall, MPS, CEM, FF/NRP
Senior Director of HCA Healthcare’s Enterprise Preparedness & Emergency Operations
A Texas Winter To Remember

By necessity, emergency response plans for HCA Healthcare facilities must be organized, able to adapt to ever-changing circumstances.

Last winter in Texas, bitterly cold temperatures and power outages led to a number of broken pipes in community water treatment plants. Those damaged pipes created a severe water shortage that affected many local businesses, including HCA Healthcare facilities.

The emergency response solution at the time, according to Jake, was to have tanker trucks transport water to the hospitals, which were running on generators. But the subzero temperatures threatened to freeze the water in those tanker trucks, which were parked outside.

“We have a really intelligent, super-creative team at one of our facilities down there in Texas,” says Jake. “They said, ‘Now, every hospital in our organization can benefit from that hard-earned experience and that unique innovation.’

The Importance of Crisis Training

How do you improve the finest emergency-response system in the healthcare industry? You expand it to include next-level post-trauma care. Michael says new crisis-training programs are focusing on “crisis management and critical incident stress debriefing teams.” Those teams will include behavioral health experts who are specifically trained to “go in and debrief our clinical staff, who talk to the folks who witnessed the tragedy and had to care for those victims. And they debrief our own staff, psychologically.”

Similar training programs have existed in pockets throughout HCA Healthcare, but the current plan is to formalize them and apply them across the enterprise.

Stephan Flaherty, M.D., medical director of Trauma at Del Sol Medical Center in El Paso, Texas, says hospitals can learn from the military, which has developed programs for personnel who have served in some of the world’s most dangerous places. Dr. Flaherty, a 24-year Army veteran who led Del Sol’s response to the 2019 mass shooting at Walmart (see next section), says his own experience dealing with mass casualties and the stress of trauma care, such as the pandemic, has taught him the importance of resilience.

“Enjoy your time with family, make sure to eat well, and get your rest. Do something fun,” he says. “Whatever you do for personal religion or spirituality, make sure you make time for that, too. You have to give time to those things in addition to giving time to taking care of your patients, because if you don’t, then the impact of this, long-term, is going to be much worse. We have to pay attention to these things.”

Shattering the Calm in El Paso

On a Saturday morning in August 2019, a lone shooter walked into a Walmart in El Paso, Texas, and began shooting. In the blink of an eye, 46 people had been wounded, 23 mortally. Eleven victims were taken to Del Sol Medical Center, a Level 2 trauma center, and another 13 to University Medical Center of El Paso. Dr. Flaherty learned about the shooting before the news hit the airwaves. “Everybody knew about this by way of social media before there were any official announcements — that something was going on,” he says. “Before the hospital mass-casualty plan could be activated, people were already there. They didn’t just throw their shoulders and say, ‘It’s my day off, somebody else will take care of this.’ People said, ‘Wow, my community needs me. I’m on my way’.”

Del Sol CEO David Shimp was notified of the shooting by Dr. Flaherty via text and knew immediately that the hospital’s emergency response plan was kicking into high gear. His first phone call was to the chief operating officer at HCA HealthCare sister facility, Las Palmas Medical Center, 10 miles away.

“I said, ‘I don’t know how many victims there are, but we’re going to need your teams. We’re going to need your anesthesiologists, and we’re probably going to need extra trays and sets,’” says David. “And, sure enough, as part of the HCA Healthcare family, they showed up in force as well.”

Not just physicians and nurses, but colleagues from every department at the facility, including therapists and technicians, who knew intuitively what to do. Jorge Mendoza, an emergency department (ED) technician, prepared transfusion sets in the trauma bays. Larry Reese, OR materials management coordinator, made sure the ORs had bags of saline for all necessary flushes.

Del Sol’s pharmacy director, Christina Sanchez, set up satellite pharmacies in the ED, OR and Intensive Care Unit (ICU) with the necessary drugs and medications for a mass-casualty incident. “It was just this unbelievable outpouring of how we came together as a healthcare community,” says David. The hospital had seven operating rooms engaged simultaneously, while other staff members performed triage or other assessment duties to make sure the higher-risk patients were cared for first.

The Del Sol response was exceptional but not unexpected; every hospital nationwide is required to hold biannual disaster drills covering a wide range of incidents. In October 2018, Del Sol Medical Center participated in a coordinated statewide exercise with other facilities in Texas to deal with simulated coordinated attacks on multiple cities. Then, when faced with a real-life disaster, that hospital’s emergency plan “came together perfectly,” says Dr. Flaherty. “It really did.”

“I’m very proud of the staff for their professionalism, responsiveness and expert medical care. Really it was across the whole hospital. Thinking back, we all realized that we had a response before we were asked for a response.”
The “Walk” That Started in the U.K. Ends in Nashville

After the pandemic’s stay-at-home orders, what better way to encourage HCA Healthcare UK colleagues to reconnect and promote general well-being than a friendly competition? The Walk to Nashville challenge encouraged colleagues to get moving, be active and get in touch once again. It was organized in tandem with the popular well-being app Ondo, which promotes healthy habits through like-minded social communities.

Teams were formed — more than 70 names were suggested — and during June and July, steps were logged. At the end of the eight weeks, five winners were chosen. The prize? A trip to Nashville, Tenn., in 2022 to sample what the famed Music City has to offer, including a visit to HCA Healthcare headquarters. Together, the walking teams took nearly 90 million steps, with the highest average count for a single facility coming in at just under 500,000.

By the Numbers

From March 2020 to March 2021, HCA Healthcare UK:

- Delivered 700,000+ patient interactions
- Delivered 1,500+ babies at The Portland Hospital (200 on behalf of NHS partners)
- Performed 4,000+ complex cancer surgeries on behalf of NHS patients
- Conducted 80,000+ outpatient and day-case appointments for cancer patients
- Treated 4,000+ time-critical NHS complex patients

“Traveling to Nashville was a once-in-a-lifetime opportunity, and I am so excited to see all there is to see. Colleagues who have visited Nashville have told me that the food is particularly good, so I am really excited for that.”
— Emily Waweru, Staff Nurse, The Portland Hospital

“Conducting the Walk to Nashville challenge was a great way to bring together colleagues from across HCA Healthcare UK whom we may never have met otherwise. I was so surprised to find out I was one of the lucky winners. It’s a once-in-a-lifetime opportunity, and I am so excited to see all there is to see. Colleagues who have visited Nashville have told me that the food is particularly good, so I am really excited for that.”
— Antonio Vincente, Healthcare Assistant, The Harley Street Clinic

“It was a very valuable experience, exercising while at the same time counting your steps. When I first received the email, I was shocked and thought it was a joke until the senior management team of London Bridge Hospital started to congratulate me. I couldn’t believe that I had been picked as a winner. It will be great to see all the sights of Nashville and maybe even see an NFL game or just the stadium.”
— John Garrett, Senior Staff Nurse, London Bridge Hospital

“Our experience at HCA Healthcare UK is all about, visit HCAhealthcare.co.uk.

“Our International Presence

From the U.S.A. to the U.K., HCA Healthcare’s mission never wavers.

It may surprise you to learn that our presence goes beyond the U.S. — across the Atlantic Ocean to the United Kingdom. With a world-class network of hospitals and specialist clinics, HCA Healthcare UK serves London and Manchester, England — and is a leading private provider of healthcare services alongside the National Health Service (NHS).

Since 1948, the NHS has operated as the U.K.’s publicly supported healthcare system (funded through general taxes) alongside the National Health Service (NHS). It serves the people power, HCA Healthcare UK has been, during the ongoing COVID-19 pandemic. Recent history has that been more evident than ever.

HCA Healthcare UK and the NHS serve the same patients, and their collective efforts have assisted the NHS in many ways, including:

- Tapping a wide range of resources, including people power, HCA Healthcare UK has been, and continues to be, part of the international response to COVID-19. Our U.K. colleagues have assisted the NHS in many ways, including:
  - Providing expertise in the form of dozans of staff temporarily working at NHS facilities, who responded to a variety of needs
  - Loaning hundreds of pieces of critical-care equipment such as ventilators to NHS partners to support their intensive-care capacity
  - Delivering time-critical care on behalf of the NHS and to privately funded patients
  - Delivering care in specially created “clean” facilities on NHS patients who do not have COVID-19 can be securely quarantined from infected patients

The cooperative spirit between the NHS and HCA Healthcare UK is a testament to “not only the hard work and expertise of our teams and consultant colleagues, but also a testament to the [organization’s] ethos that puts safety at the heart of everything we do,” says John Reay, President and CEO of HCA Healthcare UK. He describes being “overwhelmed but not surprised” by the commitment of colleagues willing to transfer to other work sites during the height of the pandemic.

“This care could continue because we adapted and respond quickly to provide the safest environments for care, even against the most challenging of backdrops. This also meant that we could support the NHS to the fullest extent.

“We are confident, but not complacent; we know that many patients are still anxious about coming into the hospital for care. We want to reassure patients that, while our hospitals and clinics may look a little different when they return, our teams remain unchanged in their dedication and ability to provide outstanding care.”

“We want to reassure patients that, while the ongoing COVID-19 pandemic will be our top priority, we are doing all we can to support the NHS and to privately funded patients.

For a closer look at what HCA Healthcare UK is all about, visit HCAhealthcare.co.uk.
Colleague Q&A: Much More Than a Job

There aren’t many career stops this multitalented nursing pro hasn’t made.

Judy “Jackie” Gosnell is a model of both consistency and constant movement. She started her medical career at Mission Health in Asheville, N.C., as a teenage licensed practical nurse. Nearly two decades later, she’s still at Mission Health but now holds a master’s degree in nursing leadership and is a nationally certified emergency nurse and registered trauma nurse. She was recently promoted to assistant chief nursing officer, overseeing roughly 450 colleagues.

Jaclyn “Jackie” Gosnell
Assistant Chief Nursing Officer
Mission Hospital
Asheville, N.C.

Q: What is the scope of your work currently?
A: I serve the critical care service lines and the step-down units of Mission Hospital.

Q: What does that entail?
A: Basically, supporting a variety of levels, ensuring that leaders are developing, from front-line staff through to the director positions. And supporting the directors so they can support the managers and the supervisors of each unit. I’m a key stakeholder or a champion of certain projects throughout the organization as well as any new initiatives that may be coming about — anything to improve the quality of care for our patients. I also help get the resources that staff and patients require for an optimal experience and best patient outcomes.

Q: You have a number of irons in the fire. Do you prefer that pace?
A: (Lou). Predominantly, my nursing career has been in emergency medicine, and then the past four years I’ve spent in the trauma program. Both emergency and trauma require a lot of quick thinking.

Q: Were you always drawn to emergency medicine?
A: When I was first hired, I’d been a CNA in a nursing home for a year prior to that, and I knew that long-term acute care was not what I was looking for. I started on the orthopedic unit because that’s where I had done my clinicals. Being 19 years old, I didn’t really understand all of my options. But once I started in nursing school and got to see different areas of the hospital, I was quickly drawn to emergency medicine. I loved the rapid pace and the critical thinking it required. It was almost like constantly putting together a puzzle without seeing a picture of what it’s supposed to look like. And you had to shift pieces along the way. I just love that aspect of it.

Q: How has your work changed as your field has evolved over 20 years?
A: Healthcare in general has changed, so I’ve had to adapt with that as I’ve grown as a nurse. My focus and my style have shifted as I’ve changed positions. I started as an LPN, and then became a registered nurse, then a supervisor, then a manager, then a quality improvement advisor, then a director, and now I’m in this role. With each of those levels I had to adapt and still be able to drive change.

Q: Can you give us an example?
A: As you step up to another level, you may not be as involved in direct bedside care. But I still have to be able to produce outcomes and optimal patient results. Really, it’s engaging your front-line staff, your front-line leaders, and making sure they see the big picture and understand what the expectations are. It’s setting the bar for what those expectations are, and then making sure that you’re really empowering your staff. I feel like I’ve grown to be a more relationship-centered leader. I see being a leader as being a servant, not a dictator. When you look at leadership through those lenses, it really changes the way you lead.

Q: Is there anything you miss about the front-line aspect of your career?
A: I still get my fix for bedside care. I carry a trauma pager, and when I hear activations, if I have time, I will gown up. It earns you some street cred with your nurses if they see that you can be a helping hand as well. Even if that just means helping with a bed bath or transporting a patient.

Q: To what do you attribute your success?
A: Where I am is partially due to working my way up. Each level of leadership has brought a tremendous amount of value to my current situation because I can truly empathize with staff in each of those layers. When they present problems, I know where they’re coming from. It has really helped me connect with people. I can speak to them from the place they’re coming from and also see it from where I am.

Q: What is the credit due to in improving quality care?
A: It’s not the critic who counts; not the man who points out how the strong man stumbles, or where the doer of deeds could have done them better. The credit belongs to the man who is actually in the arena, whose face is marred by dust and sweat and blood, who strives valiantly; who strives in the arena, whose face is red with the dust and sweat of the struggle; who is the world; who with eyes on the prize, who looks not at the critics but at the beauty of the path. I can speak to them from the place they’re coming from and also see it from where I am.

Once I started in nursing school and got to see different areas of the hospital, I was quickly drawn to emergency medicine. I loved the rapid pace and the critical thinking it required. It was almost like constantly putting together a puzzle without seeing a picture of what it’s supposed to look like. And you had to shift pieces along the way.

— Jackie Gosnell, MSN, R.N., TCRN, CEN

inspirational speech by Theodore Roosevelt, “The Man in the Arena” (first delivered in 1910) that adorns a wall in her office:

“It is not the critic who counts; not the man who points out how the strong man stumbles, or where the doer of deeds could have done them better. The credit belongs to the man who is actually in the arena, whose face is marred by dust and sweat and blood, who strives valiantly; who strives in the arena, whose face is red with the dust and sweat of the struggle; who is the world; who with eyes on the prize, who looks not at the critics but at the beauty of the path.”

Says Jackie: “That is truly what I have tried to strive for, being ‘The Man in the Arena.’”
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