Stephanie Drobny, MS-HSL, RN, CPHQ, LSSGB

RN Director Medical Surgical Service Line at Banner Health

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Greeley, Colorado, United States
Hospital & Health Care

Previous positions

NOCO RN Sr. Manager for Outpatient Oncology and Infusion at Banner Health

Clinical Performance, Assessment, and Improvement (Quality) Program Senior Manager at Banner Health

Education

University of Colorado Denver, MSN, Health Systems Leadership

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Background

Summary

Strategically focused nursing leader certified in healthcare quality with confirmed success driving improvements in system and hospital wide programs, department management, process and policy development and improvement, customer service, and education of adult learners. Recognized for ability to turn around under-performing programs and departments, identify deficiencies and opportunities, and develop innovative cost-effective solutions for enhancing competitiveness, and increasing perceived value of established commodities.

Experience

RN Director Medical Surgical Service Line

Banner Health

March 2018 – Present(1 year 9 months)Greeley, CO

Strategic oversight over the Medical Surgical Service Line encompassing 88 inpatient beds at North Colorado Medical Center.

NOCO RN Sr. Manager for Outpatient Oncology and Infusion

Banner Health

August 2016 – March 2018(1 year 7 months)Northern Colorado

I provide leadership oversight across two facilities and four units who provide outpatient infusion services. Nursing satisfaction with leadership increased 17.8% during my first year. In my first year service line productivity has been an average of 116%. In addition, patient satisfaction is leading the system in my departments with consistent likelihood to recommend scores above 90% for the past year.

Clinical Performance, Assessment, and Improvement (Quality) Program Senior Manager

Banner Health

September 2014 – August 2016(1 year 11 months)Worland, WY

Oversight of Clinical Quality in a critical access hospital. In the first year of my tenure, hospital wide compliance with Process Improvement went from 64% compliance to 87%. We also received the 2015 Quality Achievement Award for Mountain-Pacific Quality Health where we were recognized for our dedication to patient satisfaction and consistently obtaining above average quality of care outcomes for Medicare and Medicaid recipients.

Partnered with 5 Chief Nursing Officers and 2 Directors of Professional Practice as a founding member and Executive Sponsor of a regional Nursing Peer Review where small Critical Access Hospitals pool their resources and meet virtually to provide Nursing Peer Review to their colleagues. This improves the professional responsibility and the quality of nursing even when there are limited resources.

SHIP Grant recipient for a project to help reduce readmissions.

Executive Sponsor for Clinical Shared Leadership

ER Sr. RN Manager - Within six weeks of taking over the department my direct reports went from 34% to 100% complete on all regulatory requirements for validation of competencies. Took the department from 25% to 0% vacancy rate for full time positions and maintained 100% retention during my time as their Senior RN Manager.

Member of Pharmacy and Therapeutics Clinical Consensus Group.

Recommendations (1)

Staff RN

Banner Health

July 2013 – September 2014(1 year 2 months)Greeley, CO

Daily coordination of care for multiple patients in a fast paced Observational Unit in the acute health care setting.

North Colorado Medical Center Staff Advisory Council Communication Team Lead

Preceptor for nursing students during their Capstone experience.

Evidence Based Practice implementation team lead.

Recommendations (1)

Student Placement Coordinator

Banner Health

December 2009 – August 2013(3 years 8 months)Northern Colorado Medical Center

Coordination of the placement of over 1200 student experiences a year, covering 2 hospitals, 15 clinics, and EMS services across Northern Colorado. In addition I worked extensively in program research and development.

Researched, developed, and implemented Student Placement Program utilizing a never before used regional approach.

The program was wildly successful and has been rolled out to the entire Banner Health System.

Created an innovative program for nursing students in their final semester utilizing their capstone as an orientation to practice and working interview. This program projected savings of $250,000 per year for two hospitals alone in orientation costs.

Enabled students to be accepted into critical care areas that are not typically friendly to new graduates.

New graduates became OR nurses with a realized savings of 75% of orientation costs, all but eliminated turnover for these new grads in the pivotal first two years. This also decreased the strain on the ORs for these hard to fill positions.

Created the Drobny Interview Tool for standardizing the interview process which enabled small groups to interview a large number of applicants –dispersing the work load- with fair and reproducible score. Variation of scores reduced dramatically.

Patient Care Assistant

Banner Health

March 2006 – December 2009(3 years 9 months)

Provided personal care to patients in the acute care setting as well as provided administrative support to the unit.

Recommendations (1)

Home Hospice Caregiver

Private Care

July 2005 – March 2006(8 months)

Provided physical, emotional, and spiritual support for clients entering their last weeks of life.

Education

University of Colorado Denver

MSN, Health Systems Leadership

2013 – 2015

Masters of Science in Nursing with an emphasis in Health Systems Leadership, Scholarship recipient

Activities and Societies

Sigma Theta Tau International Honor Society

Golden Key Honor Society

Colorado Christian University

Bachelor's degree, Registered Nursing/Registered Nurse

2011 – 2013

Colorado Christian University

Bachelor of Science in Nursing - Outstanding Student of 2014 for the College, graduated Magna Cum Laude, nursing body Vice President,

Activities and Societies

Sigma Theta Tau, Student Nurses Association - Vice President

Publications

Making Patients Partners in Real-Time Electronic Charting

AJN, American Journal of Nursing: April 2017 - Volume 117 - Issue 4 - p 11

April 2017

I am humbled that the AJN chose to publish this article. We in health care need to transition from our patients being the objects of our charting to our partners to improve their health literacy.

Authors (1): Stephanie Drobny, MS-HSL, RN, CPHQ, LSSGB

Make Documentation a Two-Way Street by Lindsey Getz

For The Record Vol. 29 No.8 P.14

August 2017

My April 2017 AJN article was the focus of the feature article in For The Record Magazine.

Authors (1): Stephanie Drobny, MS-HSL, RN, CPHQ, LSSGB

Collaborative Rural Nurse Peer Review: A Quality Improvement Project

Journal of Nursing Care Quality

June 2018

Background: Peer review is an essential element of professional nursing practice. Local Problem: Implementing nursing practice peer review is a challenge in any organization; some characteristics of small and rural hospitals can make the task especially daunting. Methods: A team of nursing leaders and staff nurses from rural and critical access hospitals within 1 health care system was formed to make recommendations about implementing nursing practice peer review in the small rural facilities. Barriers included limited numbers of nurse reviewers by nursing specialty and inherent bias of reviewers due to personal knowledge of cases and nurses involved. Interventions: A collaborative rural nursing practice peer review council was created, with staff nurse and leader representation from 6 geographically distinct facilities. Results: The rural collaborative council has developed processes for case referral, reviewer assignment, investigation, and scoring founded on Just Culture principles. Satisfaction among staff nurses, reviewers, and Chief Nursing Officers has been high. Conclusions: Barriers to implementation of nursing practice peer review in rural hospitals can be mitigated through a collaborative approach, resulting in efficient and effective processes for small, rural, and geographically distinct hospitals.

Authors (6): Stephanie Drobny, MS-HSL, RN, CPHQ, LSSGB, Stephanie Drobny, MS-HSL, RN, CPHQ, LSSGB, Lisa Morris, Stephanie Drobny, MS-HSL, RN, CPHQ, LSSGB, Stephanie Drobny, MS-HSL, RN, CPHQ, LSSGB, Stephanie Drobny, MS-HSL, RN, CPHQ, LSSGB

Projects

Issue Brief for Observational Nursing

February 2014 – February 2014

This issue brief is a call for research and publication in the area of observational nursing as a specialty. Document is attached above.

Team Members (1): Stephanie Drobny, MS-HSL, RN, CPHQ, LSSGB

Skills & Expertise

Quality Improvement

Leadership

Inpatient Care

Healthcare Management

Nursing

Cerner

Medical Terminology

BLS

Patient Safety

Nursing Education

Registered Nurses

Hospitals

HIPAA

Public Speaking

Acute Care

Clinical Research

Telemetry

U.S. Health Insurance Portability and Accountability Act (HIPAA)

Process Improvement

Inpatient

Patient Education

Healthcare Information Technology

Medical/Surgical

EMR

Electronic Medical Record (EMR)

Leadership Development

Healthcare

Team Development

Critical Care

Medical-Surgical

Patient Advocacy

Basic Life Support (BLS)

Certifications

Certified Professional in Healthcare Quality

National Association for Healthcare Quality, License 00289650

March 2016 – December 2018