

2016-2017 Nursing Biennial Report

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From left: Alan Williamson, Vice President, Medical Affairs; Martin Massiello, Executive Vice President and Chief Operating Officer; Ann Mostofi, Vice President, Patient Care Services and Chief Nursing Officer; Michael Landes, President, Foundation; and Aubrey Serfling, President and Chief Executive Officer, pictured in the Annenberg Health Sciences Building at Eisenhower.

Photo Credit: Taiji Song Roth

Dear Nursing Colleagues



On the cover of this report, you will see what it means to be a nurse at Eisenhower Health. It is not by chance that nurses chose to associate their profession with these words, because passion for excellence is the hallmark of an Eisenhower nurse.

As we celebrate the many accomplishments of the last two years, we remain committed to work with Eisenhower's medical staff and all of our professional colleagues to continue our journey as a high performing, and relationship-based caring organization. We will continue to raise the bar in patient care, patient safety and patient satisfaction.

I commend the many nurses who have pursued and are pursuing advanced education and specialty certification. I am also proud of Eisenhower nurses who have joined together to create a shared vision of compassion and clinically exceptional caring through the entire continuum, encompassing maintenance of health and healing in every setting in which nursing care is rendered.

It has been an honor and privilege for me to support the extraordinary work of my nursing colleagues. Their stories and achievements are truly my inspiration.

Ann Mostofi

Ann Mostofi, MSN, RN, NEA-BC
Vice President, Patient Care Services and Chief Nursing Officer

Reflections from Executive Leadership



In earning Magnet® accreditation in 2015, Eisenhower proved its commitment to nursing excellence and to providing the kind of excellent care our community has come to expect from Eisenhower. Just as impressive, however, is what all of you have accomplished in the three years since achieving Magnet recognition – a significant number of BSNs and advanced degrees, evidence-based research, innovative projects for continuous improvement – all hallmarks of dedicated and engaged colleagues who bring their best to the calling of being a nurse. Thank you for your ongoing commitment; you have made an indelible mark on the culture of Eisenhower Health.

G. Aubrey Serfling
President and Chief Executive Officer



I often say that Eisenhower is an amazing place and I know our nurses believe it, too. In the past year, Nurses.org recognized Eisenhower as the best place in California for nurses to work based on reviews submitted by our nurses. Our nurses' level of engagement in providing excellent patient care has only grown since we achieved Magnet recognition at Eisenhower. I thank all of you for your continued desire to make Eisenhower Health an amazing place to grow as professionals and care for patients with the utmost professionalism and clinical excellence.

Martin Massiello
Executive Vice President and Chief Operating Officer



In the two years since Eisenhower achieved Magnet® status, we have seen continuous innovation from our nursing staff and an unwavering commitment to improving the quality and safety of the care that we provide our community. The hard work of our nurses, physicians and staff has led to various ranking agencies, including US News and World Reports and the Centers for Medicare and Medicaid Services, ranking Eisenhower among the top hospitals in the country. More importantly, it has had a tangible impact on the lives of our patients and their families.

I extend my deepest appreciation to our nursing staff and leadership for their continued commitment to excellence in healthcare and fulfilling the mission and vision of Eisenhower Health.

Alan Williamson, MD
Vice President, Medical Affairs

ABOUT EISENHOWER HEALTH

Hospital Profile: July 1, 2016 to June 30, 2017	
Licensed beds	463
Net patient revenue	\$667,709,132
Inpatient admissions	19,784
Number of patient days	79,402
Average length of stay	4.0
Number of outpatient visits	314,243
Number of Emergency Department visits	83,129
Number of surgeries	16,680

Eisenhower Health's nursing team is made up of registered nurses, licensed vocational nurses and patient care assistants.

	RNs	LVNs	PCAs
Number employed	1002	178	216
Skill mix	71.6	13.1	15.3
Average length of service	8.51	4.45	6.67





Empowered Nurses

The Foundation of Eisenhower Health's Nursing Professional Practice Model

The Professional Practice Model (PPM) defines the organizational mechanisms through which nurses are able to develop as professionals and advance nursing practice. Empowered nurses are the foundation of the PPM that supports organizational leadership, the nurse and patient environment, and the advancement of nursing practice. When nurses are empowered, they are able to elevate nursing practice and prepare future nurses through professional development.

Eisenhower Health's Nursing Professional Practice Model was designed by a subcommittee of the Magnet Ambassador Council and rolled out during the November 2013 Nursing Congress. Through shared governance meetings and nursing forums, the Magnet Ambassadors gathered ideas for the new model. They translated these into a storyboard illustration that would become the new PPM. The symbolic representation of the PPM is the

cornerstone of nursing relationships, values, organizational nursing structures and practices.

The beautiful desert environment surrounded by mountains sparked the idea for the background. The sun in the model bears the words, "Making a Difference Together Every Day". The tram that transports visitors daily from the desert floor to the snow-topped mountains provided the symbolism and connection for the delivery of Relationship-Based Care from outpatient to inpatient settings and home.

The PPM is displayed prominently in public view on nursing units and in ambulatory departments which generates dialogue with patients, family members and visitors about the model. Patients, family members and visitors have commented on the uniqueness of the model that also educated them about all aspects of care provided by nursing staff.

Nurses Week Gift Bags of Gratitude

By late spring desert life is calming down, but not on the Eisenhower campus where there's a sense of excitement, a hint of anticipation in the air. Fluff the tissue paper and cue the delivery trucks, Greg and Stacey Renker are bringing a little Christmas...in May. Gift bags filled with Guthy-Renker® products find their way to 1,300 Eisenhower nurses.

For well over a decade, the Renkers have been honoring the nursing staff during National Nurses Week, which always ends on Florence Nightingale's birthday on May 12. It's their way of saying, "thank you," for the incredible service and dedication nurses bring to their patients and community. The Renkers know firsthand the importance of exceptional nursing care.

"The care we received from the doctors and nurses at

Eisenhower was second to none," Stacey states in a *Healthy Living* magazine article chronicling their experiences. Adds Greg, "And when you're given a second chance, make sure those around you know how much you appreciate them!" So, what's in that bundle of appreciation? It's brimming with an assortment of Guthy-Renker's best-selling brands — hair care products, body lotions, cosmetics and personal care items. It's a swag bag of Hollywood proportions.

"When Nurses Week rolls around each year, I'm overwhelmed by the Renkers' generosity," marvels Ann Mostofi, MSN, RN, NEA-BC, Vice President, Patient Care Services and Chief Nursing Officer. "I can't think of another company or person who would reach out with such a large material gift, and one that's so meaningful to so many nurses."



Greg and Stacey Renker

"A big part of nursing is taking care of patients and pampering them at times," says Marielena Cid, BSN, RN, CDE, PHN, Manager, Eisenhower Diabetes Program, and 2015 Nurse of the Year. "It's nice to be on the receiving end of that gesture!"

That sentiment reverberates through every department. Emergency Department nurse Susan Veldey, RN, 2016 Nurse of the Year, is deeply grateful to the Renkers for the acknowledgement. "You have no idea what an impact that a bag of cosmetics and such can have on a person," she notes. "Thank you for thinking of us, for caring enough to send a gift our way, and going out of your way to make me feel special and appreciated."

The Renkers aren't the only ones to notice the incredibly talented nursing staff deployed at Eisenhower. This year, Nurses.org named Eisenhower

as the number one hospital for nurses in California, and it remains the only Coachella Valley hospital to achieve Magnet® recognition by the American Nurses Credentialing Center (ANCC) Magnet Recognition Program. That is rarefied air, given that only seven percent of the nation's nearly 6,000 hospitals hold this prestigious designation for nursing excellence and outstanding patient care.

"When we had our first Magnet survey, Mr. Renker made a special point to meet with the surveyors along with the administrative team," Mostofi relates. "He talked about nursing care and as a board member what it meant to the community, and how important nursing care was for patients. That was very meaningful to us."

"The gift from the Renkers is like the icing on the cake," she adds.



Marielena Cid, BSN, RN, CDE, PHN
Eisenhower Diabetes Program Manager
2015 Nurse of the Year



Susan Veldey, RN
Eisenhower Emergency Department
2016 Nurse of the Year



Gifts to Advance Education

Generous Support of Eisenhower's Nursing Staff

Eisenhower Health nurses are so grateful to the generous donors who have made continuing education and attendance at professional nursing conferences possible.

The generosity of our donors provides resources for education and training that permits us to transform the health of our patients through the power of nursing.

Gratitude is a powerful expression of the heart ...

"Attending this conference made me a more confident nurse, with real life skills that I can use when I care for my patients."

"I learned so much about different treatment protocols and ways to provide care for patients with strokes. I am looking forward to sharing this information with my co-workers."

"I had never been to a Magnet Conference before. I was so overwhelmed by the volume of evidence-based presentations. I identified several projects that could be implemented on my unit. I am so proud to be Magnet nurse."

**Mr. and Mrs.
Gary P. Brinson**

The Brinson Foundation

Since 2006

The Coeta and Donald
Barker Foundation

Since 2007

Eisenhower Health Assists Taiwan Adventist Hospital *Magnet Journey*

The American Nurses Credentialing Center's (ANCC) Magnet Recognition Program® is fast becoming an international phenomenon. Although there are only five countries outside the United States with Magnet hospitals, nurses from other countries are learning about Magnet at conferences around the world.

Magnet Recognition® is the highest national recognition any hospital can receive, demonstrating excellence in nursing. In fact, it was Eisenhower's reputation as a Magnet Hospital that compelled Taiwan Adventist Hospital (TAH) to approach us for help to prepare for Magnet designation and share their journey to nursing excellence.

Two groups of nurses from TAH visited Eisenhower Health for a week in both June and August 2016. The purpose: to learn about Magnet, the necessary infrastructure required to support Magnet and how nurses use their authority, autonomy and accountability as they care for patients and families.



Left to right: Taiwan Adventist Hospital RNs— Jody Chang, Mandy Liu, Sophia Lin, and Nicole Hung



Left to right: Taiwan Adventist Hospital RNs— Hong-Ying Li, Li-Lin Wang, Jasmine Shen, and Michelle Chao

In January of 2017, Pauline Liu, MSN, RN, Magnet Project Manager, TAH; Connie Chow, MSN, RN, NEA-BC, Chief Quality Officer, TAH; and Heather Hsu, PhD, RN, Vice President / Chief Nursing Officer, TAH, visited for a second time. Their visit focused on the role of transformational leadership in supporting a Magnet culture.



Left to right: Taiwan Adventist Hospital Nurse Leaders— Pauline Liu, MSN, RN, Magnet Project Manager; Connie Chow, MSN, RN, NEA-BC, Chief Quality Officer; and Heather Hsu, PhD, RN, Vice President/Chief Nursing Officer

Below: Hospital/Nursing Leadership and Clinical Nurses participate in the 2017 Magnet Program Professional Exchange



Taiwan Adventist Hospital has applied for Magnet destination and is actively completing required documentation for an April 1, 2019 submission date. In November 2017, Dixon Bennett, MSN, RN, PMHCNS-BC,

Director, Magnet Program, traveled to Taiwan to work with the staff to complete a gap analysis and review exemplars for their Magnet document. We are all so very proud of their growth and accomplishments.



Recognition for seven American participants who attended the conference.

Susan Veldey, fourth from left

Vietnam Nurse Project

First established by Gregory Crow, EdD, RN, in 2007, the Vietnam Nurse Project is an ongoing academic service partnership between the University of San Francisco School of Nursing and Health Professions and health care colleagues in Vietnam. The project is focused on improving the health and well-being of the people of Vietnam by improving the education, training and practice of the nurses who serve them. The project's goals include working closely with nurse leaders and the Vietnam Nurses' Association to develop leaders. Leaders will partner with the Ministry of Health and the Ministry of Education and Training in Vietnam to develop more effective nursing education and practice.

This past year Susan Veldey, BSN, RN, CEN, participated in the Vietnam Nurse Project. She and a colleague, Ann Nguyen, MSN, RN, WSC, Regional Medical Center of San Jose, worked with the National Hospital for Tropical Diseases in Hanoi. Their project focused on improving nurses' knowledge of fluid balance in critically ill patients. In October 2017, Susan traveled to Vietnam to attend the sixth Vietnam Nursing Science Conference where outcomes of all projects were presented by participating hospitals. While there, Susan provided a lecture on Triage and Rapid Assessment of Emergency Room Patients to the nurse practice councils at Viet Duc Friendship Hospital and National Hospital for Tropical Diseases in Hanoi.

Note: A portion of this article was sourced from the University of San Francisco's website.

The DAISY Award for *Extraordinary Nurses*

The DAISY Foundation was established in 1999 by the family of J. Patrick Barnes who died of complications of the auto-immune disease Idiopathic Thrombocytopenia Purpura (ITP) at the age of 33. DAISY is an acronym for **D**iseases **A**ttacking the **I**mmune **S**ystem. During Pat's eight-week hospitalization, his family was awestruck by the care and compassion his nurses provided not only to Pat but also to everyone in his family. One of the goals they set in creating a foundation in Pat's memory was to recognize extraordinary nurses everywhere who make an enormous difference in the

lives of so many people through the super-human work they do every day.

The DAISY Award is an international program that rewards and celebrates the extraordinary compassionate and skillful care given by nurses every day. Eisenhower Health is proud to be a DAISY Award Partner since January 2017, recognizing nurses throughout the year with this special honor. To find out more about the program, please visit DAISYfoundation.org.

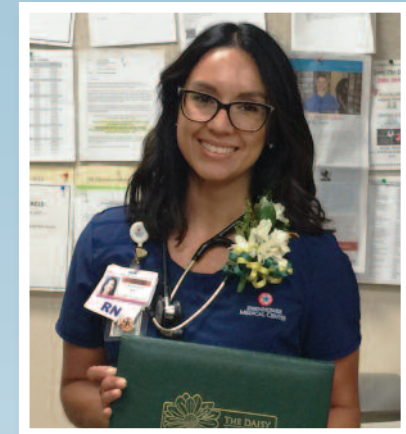


DAISY AWARD WINNERS



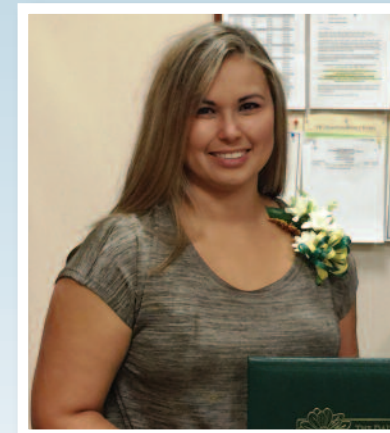
Quarter 1 – 2017

Marina Lorentz, RN, Clinical Coordinator
Tenny Emergency Department



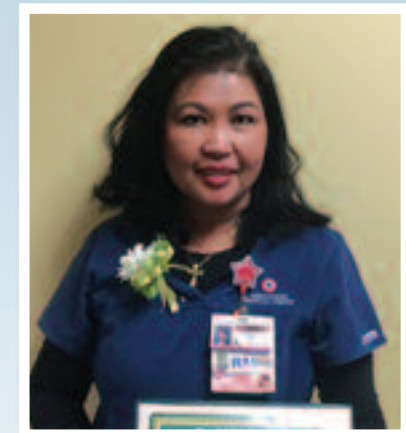
Quarter 3 – 2017

Gabriela King, RN
Critical Care



Quarter 2 – 2017

Dulce Litch Valenzuela, BSN, RN
Critical Care



Quarter 4 – 2017

Nerissa Sac, ADN, RN, OCN
Medical/Surgical – 3 East

2016 Nursing Excellence Awards



**2016 Eisenhower Health
Nurse of the Year**
Susan Veldey

Awards in each category:

Nursing Excellence: Inpatient
Anne Dyer, RN, 4 East

Nursing Excellence: Outpatient/Procedural
Susan Veldey, BSN, RN, CEN

Nursing Excellence: Clinic Division
Sally Wright, RN, Clinic Division

Advanced Practice Nurse
Barbara Fulmer, MSN, RN, GNP-BC, CWOCN,
CWCN-AP, Inpatient Wound Care

Clinical Nurse Change Agent/Thought Leader
Christy MacKewen, RN
Inpatient Rehabilitation Center

Innovation/Creativity in Nursing Practice
Brian Esser, BSN, RN, SCRNP, 3 North

Exemplary Practice as Teacher/Patient Advocate
Rosemary Flaherty, RN
Eisenhower Schnitzer/Novack Breast Center



2016 Nursing Excellence Award Winners

Left to right: Christy MacKewen, Rosemary Flaherty, Sally Wright, Susan Veldey, Barbara Fulmer, Anne Dyer, and Brian Esser

Eisenhower Health's Nursing Excellence Awards formally recognize registered nurses for their efforts to promote and advance the nursing profession, for displaying caring and commitment to patients, families and co-workers, and for demonstrating leadership in the nursing profession.

Congratulations, and thank you to every nominee and to each award recipient.

The Nurse of the Year winners were selected by their peers from among three Nursing Excellence Award winners (Inpatient, Outpatient/Procedural and Clinic Division).



2017 Nursing Excellence Award Winners

Front row, left to right: Aleth Mangosing-Ignacio; Jessica Truax; Kera Arias; and Maria Robinson.

Back row, left to right: Ann Mostofi, MSN, RN, NEA-BC, Vice President, Patient Care Services and Chief Nursing Officer; Sandra Schulz, Scholarship Chair, Eisenhower Health Auxiliary; Bobbie Galindo; Jeffrey Donardt; Taina Allen; and Alan Williamson, MD, Chief Medical Officer.

2017 Nursing Excellence Awards

Awards in each category:

Nursing Excellence: Inpatient
Jessica Truax, BSN, RN, Intensive Care Unit

Nursing Excellence: Outpatient/Procedural
Taina Allen, RN, Cardiac Catheterization Lab

Nursing Excellence: Clinic Division
Bobbie Galindo, BSN, RN
Eisenhower Lucy Curci Cancer Center Infusion Center

Advanced Practice Nurse
Aleth Mangosing-Ignacio, MSN, RN, NP-C, CCRN
Employee Health

Clinical Nurse Change Agent/Thought Leader
Jeffrey Donardt, RN, CRRN
Inpatient Rehabilitation Center

Innovation/Creativity in Nursing Practice
Kera Arias, BSN, RN, Quality Improvement

Exemplary Practice as Teacher/Patient Advocate
Maria Robinson, BSN, RN, Urgent Care



2017 Eisenhower Health Nurse of the Year

Jessica Truax



Left to right: Cera Salamone, Lynne Malestic and Modern Family's Eric Stonestreet

Lynne Malestic

Extraordinary Healer for Oncology Nursing

Each year to celebrate oncology nurses, CURE® magazine gives readers a unique opportunity to honor one special oncology nurse who has dedicated their career to helping patients with cancer, their families and their oncology co-workers. Nominated by co-worker Cera Salamone, Lynne Malestic, RN, of Eisenhower Lucy Curci Cancer Center, was selected from more than 50 nominees to be named the 2016 CURE® Extraordinary Healer® for Oncology Nursing. Malestic was recognized at an awards ceremony and celebration hosted by Eric Stonestreet of television show Modern Family on April 28, 2016 in San Antonio, Texas.

"This is an amazing honor, considering what I do on a daily basis does not seem extraordinary to me...it's just what I do to help families and co-workers," says Malestic." Being recognized nationally — along with the other finalists — is a testament to the outstanding oncology nurses nationwide, who provide services and support around the various types of cancers that deeply affect so many people beyond the patients. I'm truly blessed to be able to assist families and others on a daily basis."

Salamone wrote in her essay submission about Lynne Malestic: "A normal day for Lynne includes many hugs, tears of joy and tears of empathy sprinkled amongst her safe, evidence-based practice and collaboration with physicians to provide a healing environment like no other."

Specifically, Salamone nominated Malestic for her experience with one couple that spanned several years. In brief, Malestic cared for the wife through her cancer diagnosis to her passing, with in-hospital support, by hosting the family for holidays, by moving the wife to Malestic's home to support hospice care, and much more. Most stories would end there, but she repeated her extraordinary support when the husband was diagnosed with cancer several years later. Malestic and her family then cared for him during his active treatment through the end of his life. And her influence carries over to her home, as her 16-year-old daughter, Lauren, is so inspired by her mother she plans to go into oncology nursing.

From Five Star Outlook May 2016

Medical Surgical Nurses *of the Desert*

Recognizing the value of empowering nurses with valuable educational resources, a working group of Eisenhower Health nurses formed a local chapter of the Academy of Medical Surgical Nurses (AMSN). Since its initiation in March 2015, Medical Surgical Nurses of the Desert has grown to 35 members.



Medical Surgical Nurses of the Desert Chapter Officers

Left to right: Monica Lerma, Secretary; Erica Desalva, President; Craig Eaton, Treasurer; and Robin Cavaliere, Vice President

Membership has been extended to nurses in the outpatient setting, as well as to nurses from neighboring hospitals. These efforts assist in connecting nurses with others who share the same compassion and commitment, and in providing the latest practice updates across the continuum of care. In February 2018, Medical Surgical Nurses of the Desert was granted full chapter membership by AMSN — Medical Surgical Nurses of the Desert, Chapter #621.

Additionally, this group is firmly committed to the community. Grass roots events have been held to raise scholarship funds for local high school students interested in nursing careers. Medical Surgical Nurses of the Desert recently awarded their first \$1,000 scholarship to a local nursing student.



Medical Surgical Nurses of the Desert, Chapter #621

Shared Governance

Enhancing Advanced Nursing Practice

The shared governance council for Advanced Practice Nurses (APN) defined a gap in standardized procedures and privileges for Nurse Practitioners (NPs) within Eisenhower Health. As a result, they began a collaborative project designed to increase the value of NPs, enhancing quality of care and strengthening their roles through proper privileging.

This process has promoted interdisciplinary cooperation and understanding of professional roles between NPs, PAs and physicians. The unified Privilege Form was developed from the standards identifying initial privileges and privilege renewals for all midlevel providers or NPs. The project goals were met with a collaborative transparent process that elevated and supported the NPs in providing quality care to the patients they serve.



Advanced Practice Nursing Council

Front row, left to right: Barbara Fulmer, MSN, RN, GNP-BC, CWCN-AP, Manager, Inpatient Wound and Ostomy Care; Tiffany Bell-Davlanter, MSN, RN, FNP-C, MSQA, CPEN, Nurse Practitioner, Eisenhower Primary Care; Kathleen Wheeler, DNP, FNP-BC, RN, Nurse Practitioner, Eisenhower Urgent Care; Aleth Mangosing-Ignacio, MSN, RN, FNP-C, Nurse Practitioner, Employee Health; and Alice Kraker, MSN, NP, Oncology.

Back row, left to right: Ann Mostofi, MSN, RN, NEA-BC, Vice President, Patient Care Services/CNO; Amy Hetherington, DNP, RN, FNP-BC, Orthopedics; Kathleen Schomer, MSN, FNP-BC, Orthopedics; Jill Hall-Crum, MSN, RN, NP-BC, SANE-A, Eisenhower Primary Care; and Eileen Davies, MSN, FNP-BC, Hospitalist Group.

No Pass Zone

Everyone understands the concept of a no passing zone when driving a car. The Fall Prevention Team developed a program using the concept of the no pass zone. The no pass zone program requires that no employee pass the room of a patient in need of immediate help. The program involves all members of the health care team, including executive leaders, dietary aides, housekeeping staff, therapists, and the nursing care team, in the prevention of falls by



meeting patient needs pre-emptively, and in the moment. Staff is being trained to identify a patient who might be at risk of falling due to an unmet need.

The program was piloted on a medical surgical unit. Following the pilot, the fall rate decreased. “No pass zone” success is based on increased attentiveness from all hospital staff. Due to the success of the pilot program, the no pass zone program is being rolled out to all units in 2018.

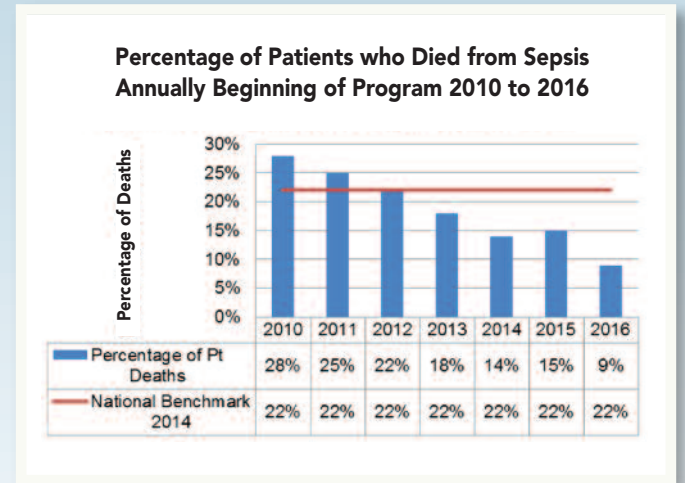
Sepsis without Borders

Sepsis and ultimately septic shock are serious medical conditions associated with high death rate. These conditions are challenging to diagnose and require rapid and comprehensive treatment to assure patient survival. Nurses and physicians at Eisenhower Health have worked for six years to develop a comprehensive program that improves the overall prevention and treatment of sepsis and septic shock. This program has reduced Eisenhower Health’s sepsis mortality rate from 28 percent to nine percent which is well below the national average.

Under the direction of Tina Wallum, MSN, RN, CCRN, NE-BC, nurses monitor laboratory results, round on at risk patients, and intervene earlier to prevent the progression of sepsis. This program, including staff education, awareness, and reinforcement of protocol, has resulted in saving lives. In 2017, this program was awarded \$12,000 by the American Excess Insurance Exchange (AEIX) Risk Management Annual Award of Excellence for excelling in safety and liability reduction.



ICU’s “Wall of Saves” shares images of patients with sepsis whose lives were saved, reminding employees and physicians of the significance of the work they do every day. (Photos used with permission.)



Ambulatory Care Nursing

Nurses at Eisenhower Health have assumed a new specialty role that is evolving daily, as patient care has expanded into primary care clinics and outpatient service areas. Nurses have become experts in complex chronic diseases using innovative approaches to care coordination. Nurses interact with patients by phone, by email, in the office and at home. They assist with access and transition throughout the continuum of care. Coordinating with primary care physicians, specialty physicians, nursing homes, home health agencies, and other community partners, they assist patients in navigating the complex health care system. Sue Evaro, BSN, RN, a nurse navigator at Eisenhower Health, summarizes the new role as



Nurse navigator Sue Evaro, BSN, RN, (left) with Wendy White, MD

“...comprehensive nursing in the community setting. I love the daily challenges, as it is never the same. I interact with the patient care team, which may include physicians, therapists, social workers and case managers, in an effort to remove barriers. At the same time, I work closely with the patients and their support system to ensure a positive outcome. I have such a wonderful feeling when I can facilitate a positive outcome.”

Board Certified Endocrinologist Wendy White, MD, states, “Working with the nurse navigators, like Sue, has been wonderful. It has made such a positive impact in the way we are able to care for our patients with diabetes.”

Chasing the Perfect Handoff Transforming Hospital to Skilled Nursing Facility Communication

Eisenhower Health is very proud of its role as a leading innovative health care partner in the Coachella Valley. Collaboration with other community health providers, is key to this success. An example of a valley-wide project, initiated by nurses, is a collaborative of skilled nursing facilities with Eisenhower Health’s Case Management department. Health care workers at the skilled nursing facilities need to receive information about the patients who are being transferred. The collaborative developed a handoff process to communicate important patient information during the transition from the hospital to other health care facilities.

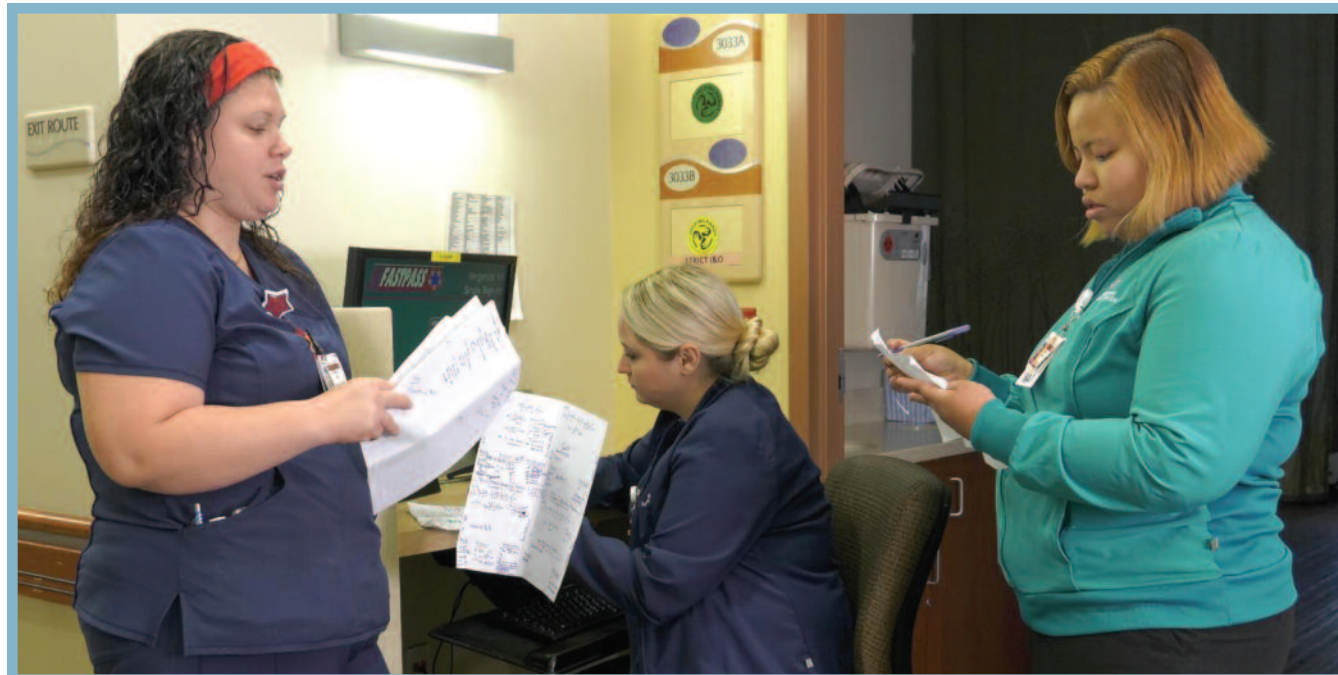
Jean Douglas, Director, Case Management, convened a Skilled Nursing Facility (SNF) Collaborative Committee. Using the electronic health care record, a standardized form was developed that provides information resulting in better patient care. The transition of care is seamless and safer; care may continue uninterrupted and without delay. The SNF Collaborative continues to meet quarterly, providing a forum for open communication and collaboration, bridging gaps and developing constructive solutions, demonstrating commitment to patient-centered care.

Zone Nursing

A Novel Approach to Improved Metrics

In hospitals, staff traditionally works at a central nurse's station. Wendy Edwards, Director, 3 South – the hospitalist unit – disrupted this work flow by placing nurses in mini stations outside the patient rooms. This innovative model has increased patient satisfaction scores and decreased patient falls. Physicians and nurses have commented on the positive impact this

approach has had on communication. Wendy was recently invited to speak about this project at the Association for California Nurse Leaders' Annual Conference held in Monterey, California. This project demonstrates the impact of creative use of evidence and the power of shared governance.



Left to right: Lindsey Moreno-Zaragoza, RN; Annelise Milan, RN; and Precious Pascual, NA

DNR Suspension During the Perioperative Period: The Patient Perspective

Nurses at Eisenhower Health engage in a combination of evidence-based practice and nursing research. A great example is the work of Debbie Hiestand, MSN, RN, CAPA, Coordinator, Same Day Surgery. She wanted to assess a patient's knowledge and feelings about current practices surrounding their do not resuscitate (DNR) status during surgery. Eisenhower Health's current policy is to suspend this status during surgery. During patient interviews, she found that even when patients are dealing with end-of-life issues, they wanted to be informed. They also expressed a desire to participate in decision-making about their DNR status during the perioperative period as it relates to quality of life.

Results of this research are being published in a peer review journal, and were presented at the 22nd Nursing Odyssey Conference, Sigma Theta Tau, in Ontario, California. Debbie has shared this information with physician partners, who are addressing a potential change in protocol, in order to comply with patient wishes.



Debbie Hiestand, MSN, RN, CAPA, presenting her poster at the 22nd Nursing Odyssey Conference in Ontario, California.

Nurse-Sensitive Indicators

Nurse-sensitive indicators are the elements of patient care directly affected by nursing care. The history of nurse-sensitive indicators in its earliest form is linked to Florence Nightingale’s quest to improve the quality of nursing care. In 1999, the American Nurses Association officially defined nurse-sensitive indicators and developed the National Database of Nursing Quality Indicators (NDNQI) in order to provide a comparison to measure outcomes.

Eisenhower Health nurses proudly participate in the data collection, assessment and evaluation of nurse-sensitive indicators such as fall rates, hospital-acquired pressure ulcers, central line-associated blood stream infections, catheter-associated urinary tract infections and ventilator-associated pneumonia/ventilator-associated events. Each indicator is compared to the NDNQI benchmark with similar organizations. Any increase in rates leads to examination of evidence-based nursing practice. Resolutions are developed that are best practice and lead to positive outcomes. Nurses examine results on a monthly basis, and continually adapt their care to provide the best possible experience and outcome for every patient across the continuum of care.

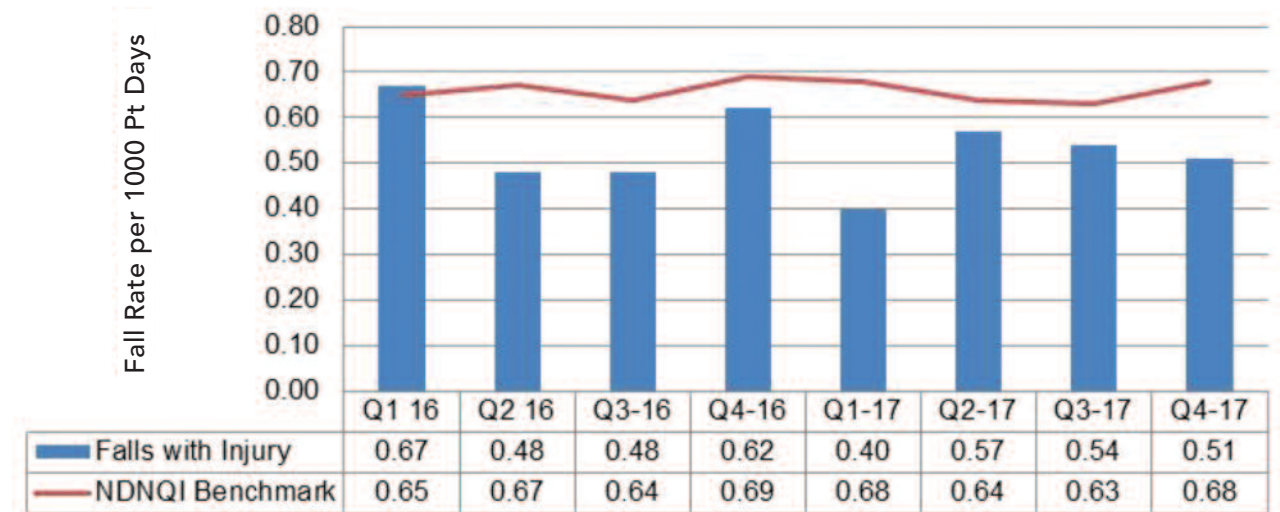
Nursing Quality Impacts Outcomes at Eisenhower Health

Falls

Preventing patients from falling while in the hospital is a priority and involves everyone’s participation on the health care team. Eisenhower has a very active Fall Prevention Team that is engaged in the design and ongoing evaluation of the many elements involved with fall prevention. Fall Prevention Team nurses have focused on prevention with the development of initiatives such as the No Pass Zone — utilizing the entire health care team to increase care and attention for meeting all patient needs that may prevent a fall. Global awareness has impacted the fall rate by decreasing falls; this demonstrates to our patients the power of teamwork. This is one example of the many activities that has resulted in Eisenhower’s total patient fall rate outperforming the NDNQI benchmark mean for seven out of eight consecutive quarters (*Figure 1*).

Figure 1

Total Patient Injury Falls Per 1,000 Patient Days



Eisenhower Health’s total patient injury falls has outperformed the NDNQI database mean for seven of eight consecutive quarters.

Hospital-Acquired Pressure Injuries

A pressure injury, sometimes called a bedsore, is damage to the skin or underlying tissue, caused by pressure, friction and moisture. These injuries often occur when patients have limited mobility and can’t change positions in bed on their own. All patient care providers are trained in pressure injury prevention.

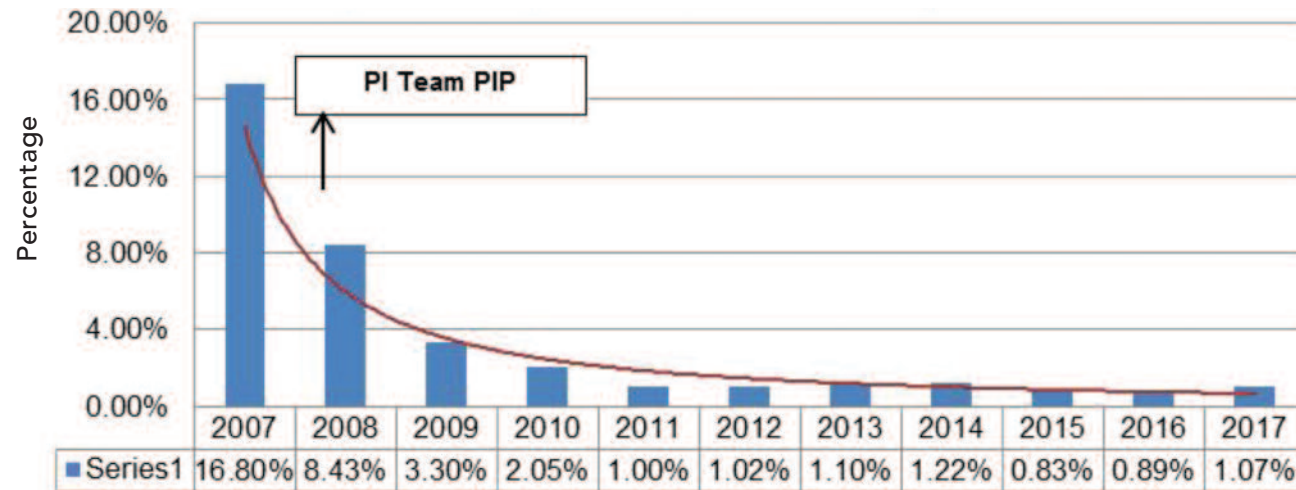
Providing good skin care, regularly assisting patients to change positions in bed, and using pressure-reducing cushions, mattresses and other devices are some of the many techniques used to prevent pressure injuries.

An aggressive prevention injury program (PIP) was implemented in the second quarter of 2007 in response to an increased incidence of skin injuries. This evidence-based program was developed by

a nurse-led team of expert skin care specialists and front line staff. As a result, the incidence improved dramatically to about one percent annually. (Figure 2).

Figure 2

Annual Percent of Patients with Hospital-Acquired Pressure Injuries



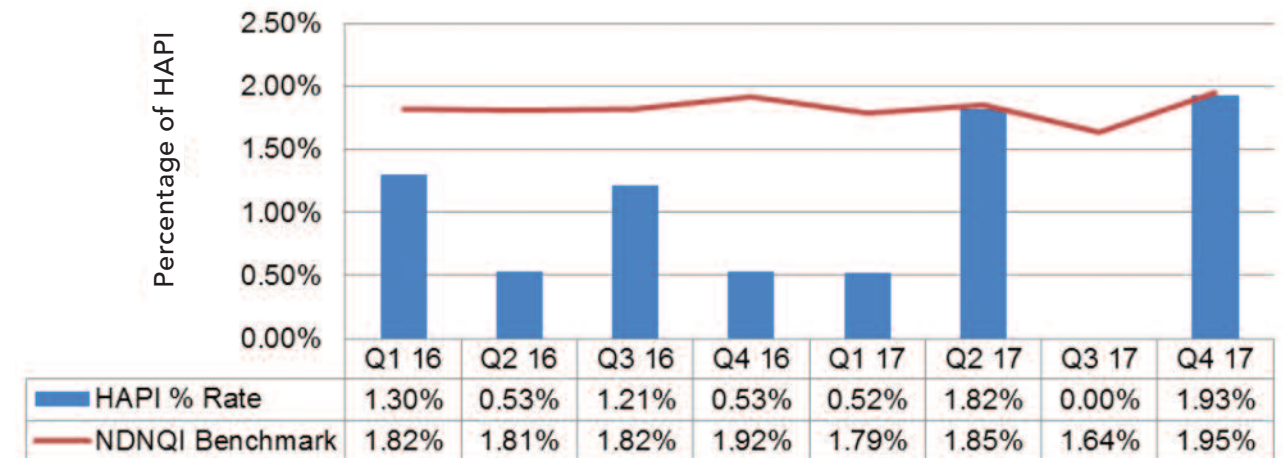
Eisenhower Health's hospital-acquired pressure injury rate has outperformed the NDNQI database mean for 25 consecutive quarters.

As a result of the Pressure Injury Prevention Program implemented in 2007, the incidence has improved dramatically to about one percent annually. Bimonthly journal club article reviews, combined with continual surveillance and reinforcement of all prevention elements help drive the incidence down. In 2013,

the team developed an early mobility program. This team embodies exemplary nursing practice that has led to 25 consecutive quarters where Eisenhower's hospital-acquired pressure injury rate has outperformed the NDNQI benchmark mean (Figure 3).

Figure 3

Percent of Surveyed Patients with Hospital-Acquired Pressure Injuries



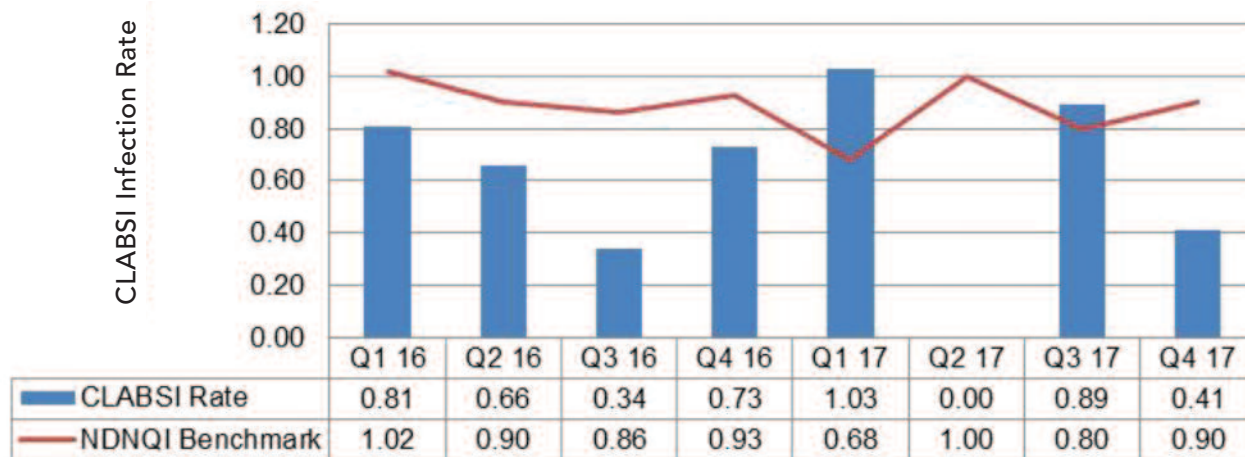
Central Line-Associated Blood Stream Infections

Central lines, or central venous catheters, are most often inserted in the neck, chest or arm. These lifesaving catheters may be used to provide medications and fluids to severely ill patients and may remain in place for several weeks. A central line-associated blood stream infection (CLABSI) occurs when germs in or on the catheter enter the bloodstream. These infections can lead to serious complications, even death, especially for critically ill patients.

In 2012, an upward trend was indicated in these types of infections. A nurse-led team convened and examined evidence-based nursing practice and potential opportunities to standardize practice. A program utilizing a de-clotting agent and standardized cleansing processes were implemented. As a result, Eisenhower Health's performance has exceeded the goal of being below the National Health Care Safety Network (NHSN) and NDNQI benchmarks for six of eight consecutive quarters (Figure 4).

Figure 4

Central Line-Associated Blood Stream Infections per 1,000 Central Line Days



Eisenhower Health's central line-associated blood stream infection rate has outperformed the NDNQI database mean for six of eight consecutive quarters.

Catheter-Associated Urinary Tract Infections

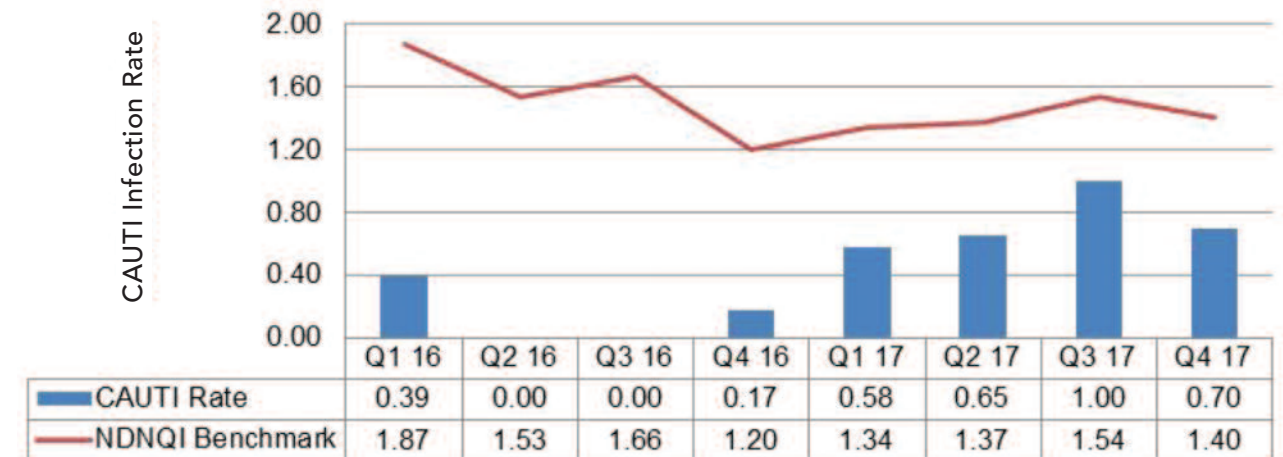
A urinary catheter is a thin tube placed in the bladder to drain urine into a bag. Catheter-associated urinary tract infections (CAUTIs) are infections caused by bacteria that have entered the urinary tract during the catheter's insertion, through the catheter tube, or through the catheter's external surface.

In 2012, it was noted that there was an upward trend in these types of infections. A nurse-led team

convened and examined evidence-based nursing practice and potential opportunities to standardize practice. A program called X-Foleyate was developed utilizing standardized hygiene protocols, attention to early removal, and closed catheter systems, standardizing care throughout the health center. As a result, Eisenhower Health has outperformed the NDNQI benchmark for 20 consecutive quarters (Figure 5).

Figure 5

Catheter-Associated Urinary Tract Infections per 1,000 Catheter Days



Eisenhower Health's catheter-associated urinary tract infection rate has outperformed the NDNQI database mean for 20 consecutive quarters. Data pictured is for the last 8 quarters.

Ventilator-Associated Events

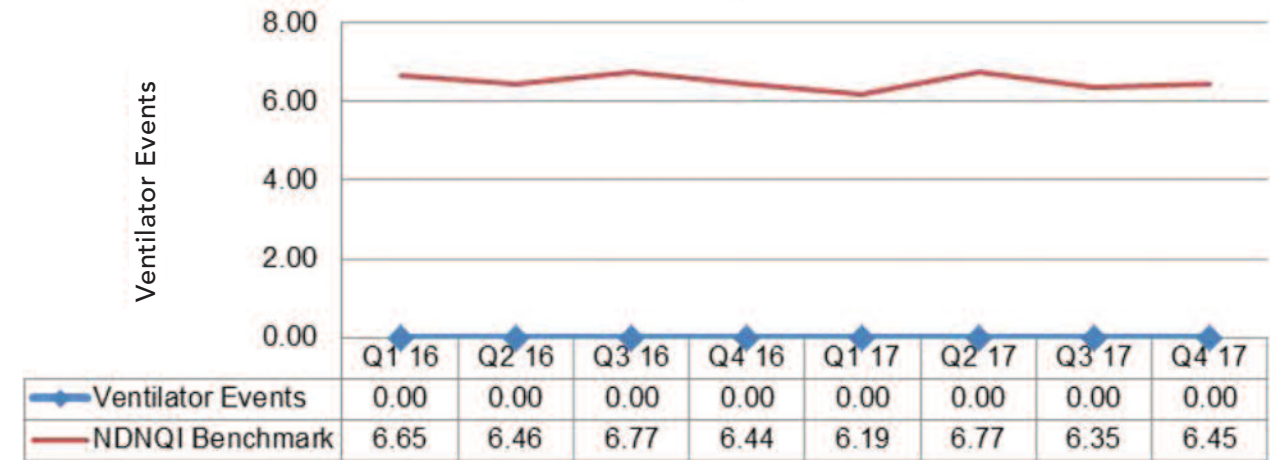
Ventilator-associated events (VAE) occur when germs multiply in the lungs of patients using a ventilator to help them breathe. This causes fevers, chills, difficulty breathing, increased sputum and other pneumonia symptoms. These infections can lead to serious complications, even death, especially for critically ill patients.

In 2010, a nurse-led multidisciplinary team was convened to address national guidelines and decrease the rate of VAE. A multitude of nursing interventions, such as oral hygiene, respiratory hygiene, and elevation of the head of the bed, were implemented utilizing the electronic documentation system to improve early communication and continuation of care elements.

Ongoing assessment and reinforcement has led to positive outcomes. Eisenhower Health has outperformed the NDNQI benchmark mean for 27 consecutive quarters with a ventilator-associated event rate of zero (Figure 6). This is a true example of nurses leading the charge to improved outcomes providing exemplary care.

Figure 6

Ventilator-Associated Events per 1,000 Ventilator Days



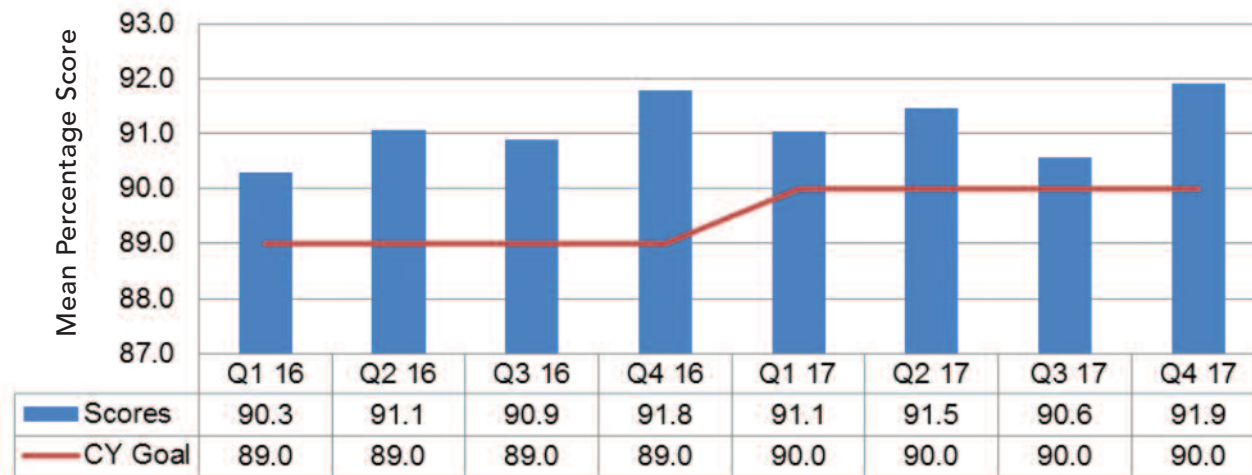
Eisenhower Health’s ventilator-associated event rate has outperformed the NDNQI database mean for 27 consecutive quarters. Data pictured is for the last eight quarters.

Patient Satisfaction

Eisenhower Health's commitment to providing a superior patient and family experience continued through 2016 and 2017. Eisenhower Health uses multiple approaches to listen to patients by obtaining their feedback. The Press Ganey® satisfaction survey and the NRC Health survey are two methods of obtaining this information. Eisenhower nurses have a

substantial impact on patient satisfaction. Initiatives implemented over the past two years have demonstrated that patients and families feel very positive and confident with the courtesy extended by the nursing staff. The results demonstrate continual improvement in providing the highest level of care and courtesy to patients every day.

**Patient Satisfaction (Inpatient and Outpatient)
Press Ganey® Q1 2016 through Q4 2017**



The composition scores for all nursing satisfaction outperformed the internal benchmark for eight consecutive quarters.

Annenberg Pavilion 4 North



Left to right: Leah Carbonneau, RN; Rebecca (Wes) Widmer, US; Sandra Josephson, US; Grace Agnus-Amersbach, MSN, RN, FP-ANP; Kristina Durkton, BSN, RN; Kristen Kassner, BSN, RN; and Tanya Crager, BSN, RN, ONC, Director, 4 North

Eisenhower Health also participates in the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) which is a patient satisfaction survey required of all hospitals in the United States by the Centers for Medicare & Medicaid Services.

The survey is for adult inpatient units. At Eisenhower, the Department of Nursing recognizes the inpatient unit that has achieved the highest HCAHPS scores each week. One unit with consistently high HCAHPS scores is 4 North (pictured above).

Eisenhower Health Nursing Engagement

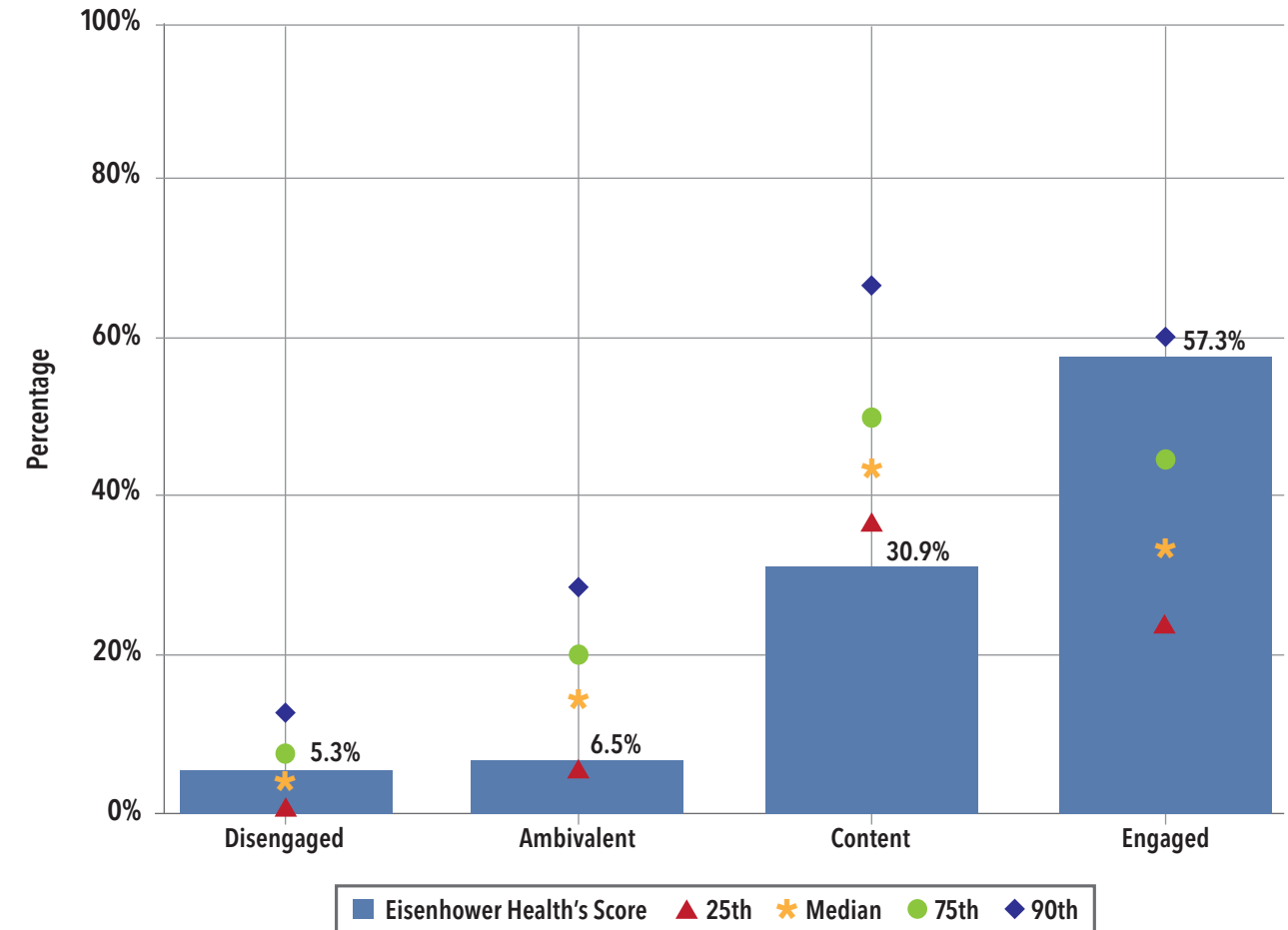
Eisenhower Health conducts a biennial employee engagement survey. Pictured right are results from the most recent survey which demonstrate the employee engagement of Eisenhower's registered nurses as compared to The Advisory Board Company's 25th percentile, median and 75th percentile among their national database. The participation rate for RNs as identified by clinical nurse job categories was 78 percent. In analyzing and evaluating the level of engagement among nurses, it is apparent that nurses are generally engaged and positively focused throughout the organization.

At Eisenhower, 57.3% of the registered nurses are engaged which is at the 88th percentile of the database mean. Organizationally, 58.3% of the overall staff are engaged which is at the 91st percentile of the database mean.

The Advisory Board has recognized Eisenhower Health with the *Workplace of the Year Award for 2017* and *Workplace Transformation Award for 2017* based on national ranking of results from employee opinion surveys. Historically, Eisenhower Health was the recipient of the Advisory Board's *2013 Excellence in Engagement Award* and *Gallup Great Workplace Award* for 2009 and 2011.

In August 2017, Nurse.org, the web's leading career site for nurses, recognized Eisenhower Health as the number one best hospital for nurses to work for in the state of California. For more than two years, Nurse.org collected more than 1,853 reviews from nurses at 314 California hospitals about their workplace satisfaction. Reviews in California revealed that Eisenhower Health has one of the highest levels of satisfaction among its nurses; a 4.8 star rating with 100 percent of the nurses surveyed recommending the hospital as an employer.

RN Engagement Profile Aggregated at the Organizational Level

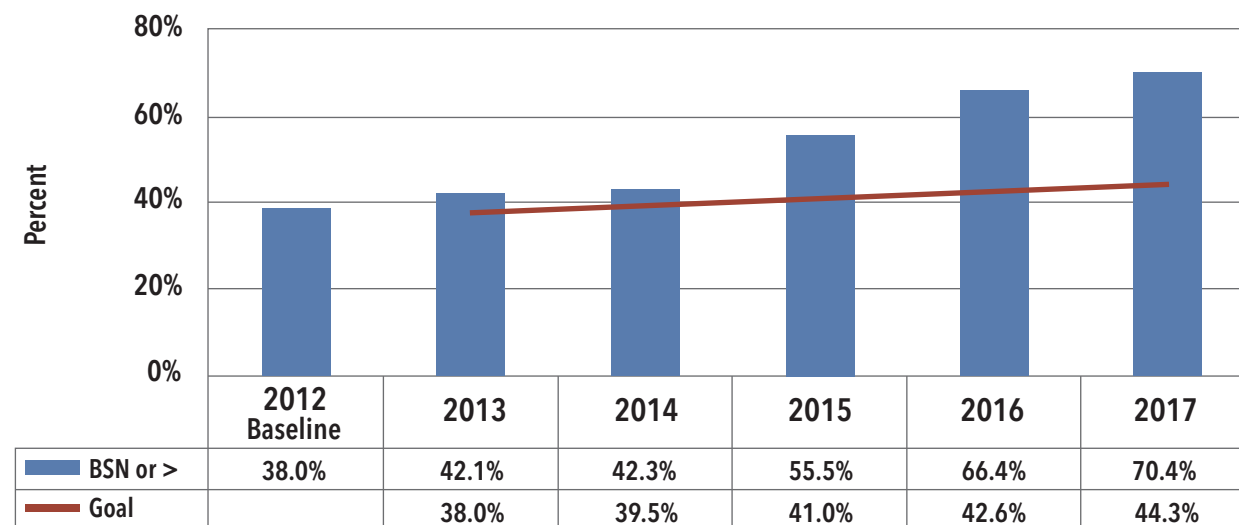


Eisenhower Nurses Pursue Baccalaureate and Graduate *Nursing Degrees*

During the past decade, a number of factors have converged to radically alter the environment in which health care is provided, subsequently changing the nature of the role and responsibilities of nurses. In October 2010, the Robert Wood Johnson Foundation and the Institute of Medicine (IOM) jointly released *The Future of Nursing: Leading Change, Advancing Health*, referring to the report as a blueprint for transforming the American health system by strengthening nursing care and better preparing nurses to help lead reforms. The report calls for increasing the percentage of nurses holding the Bachelor of Science in Nursing (BSN) degree or higher to 80 percent by 2020. Eisenhower Health has made the BSN a requirement for entry level employment and supports the BSN for all nurses.

Nursing at Eisenhower Health is both an art and a science, incorporating many aspects of patient care and the spirit of caring based on current and relevant research and evidence-based practice. Enhancing critical thinking skills is a prerequisite to continuously providing and improving patient care. Professional responsibility and educational advancement is encouraged. Coaching, mentoring, flexible schedules and tuition reimbursement are strategies utilized to facilitate a nurse's return to school for educational advancement. The percentage of clinical nurses with a baccalaureate and higher nursing degree increased from 38 percent in 2012 to 75 percent in 2017. The current percentage for California nurses with a BSN or higher degree is 61 percent (HealthImpact).

RN Nursing Education Level: Baccalaureate Degree or Higher



Highest Nursing Degree Completed	2012	2013	2014	2015	2016	2017
Nursing Diploma	6.0%	6.0%	5.5%	2.1%	.5%	.5%
Associate Degree in Nursing	56.0%	52.0%	52.2%	42.5%	34.0%	29.1%
Baccalaureate Degree in Nursing	32.0%	35.0%	37.0%	46.6%	29.1%	60.6%
Master's Degree in Nursing	6.0%	7.0%	5.2%	8.3%	5.9%	9.0%
DNP, DNSc, PhD in Nursing	0.0%	0.1%	0.1%	0.5%	0.2%	.8%

Nursing Advancement at Eisenhower Health

Please join us in congratulating our nurses who have achieved national certification:

Accredited Case Manager (ACM)

Jean Douglas, ACM
Diana Sanchez, ACM
Traci Thomas, ACM

Advanced Oncology Clinical Nurse Specialist (AOCNS)

Barbara Bigelow, AOCNS

Ambulatory Care Nursing Certification (RN-BC)

Jamie Burnett, RN-BC

Certified Ambulatory Perianesthesia Nurse (CAPA)

Debbie Hiestand, CAPA
Kathleen Place, CAPA

Certified Care Coordination and Transition Management (CCCTM)

Doris Velasquez, CCCTM

Certified Case Manager (CCM)

Cynthia Jones, CCM
Sue Stypulkowski, CCM

Certified Clinical Breast Examiner (CBEC)

Rosemary Flaherty, CBEC
Tracey Gomez, CBEC

Certified Clinical Research Coordinator (CCRC)/ Professional (CCRP)

Stephanie Farrell, CCRC
Patty Garcia, CCRC
Sharon Kunic, CCRP

Certified Critical Care Nurse (CCRN)

Clandes Acacio, CCRN
Ruth Ah Siu-Gandy, CCRN
Elaine Alexander, CRRN

Cindy Balch, CCRN
Lisa Berg, CCRN
Sara Bonthron, CCRN
Karen Copeland, CCRN
Zacharie Cyrus, CCRN
Desiree Darling, CCRN
Sheryl Davidson, CCRN
Tess Doble, CCRN
Heaven-Lee Douglas, CRRN
Sheenah Fernandez, CCRN
Rose Garcia, CCRN
Jaime Gonzalez, CCRN
Clara Christine Harvey, CCRN
Jessica Hendrix, CCRN
Starla Hess, CCRN
Kedra Jingles, CCRN
Anna Lauricella, CCRN
Irma Leos, CCRN
Charisse Losito, CCRN
Wayne Lowder, CCRN
Aleth Mangosing-Ignacio, CCRN
Dawn Master, CCRN
Estela Milward, CCRN
Janet Noseworthy, CCRN

Teresita Parina, CCRN
Jerry Park, CCRN
Phu Pham, CCRN
Sarah Putvin St. John, CCRN
Irene Rice, CCRN
Dana Rome, CCRN
Eleanor Rose, CCRN
Gabriela Sapetto, CCRN
Venus Sayegh, CCRN
Fran Scott, CCRN
Cheli Shea, CCRN
Mary Spies, CCRN
Richard St. Claire, CCRN
Honor Van Gorp, CCRN
Christina Wallum, CCRN
Cathy White, CCRN
Danuta Wojnar, CCRN

Certified Critical Care Nurse with Cardiac Medicine Subspecialty (CCRN-CMC)

Christine Layer, CCRN-CMC
Teresita Parina, CCRN-CMC
Phu Pham, CCRN-CM

Certified Critical Care Nurse with Cardiac Surgery Subspecialty (CCRN-CSC)

Clara Christine Harvey, CCRN-CSC
Christine Layer, CCRN-CSC

Phu Pham, CCRN-CSC
Honor Van Gorp, CCRN-CSC
Cathy White, CCRN-CSC

Certified Diabetes Educators (CDE)

Marielena Cid, CDE
Socorro Gonzalez, CDE
Melina Hurtado, CDE
Yuri Krochmaluk, CDE

Certified Emergency Nurse (CEN)

Meagan Beavers, CEN
Stephanie Bergstrom, CEN
Junar Bohol, CEN
Myra Casibang, CEN
Allen Cortez, CEN
Josemaria Crystal, CEN
John Dix, CEN
Rhoda Fedelin, CEN
Agnes Jove, CEN
Audora Macklin, CEN
Natalie Ortega, CEN
Katherine Pelland, CEN
Irene Rice, CEN
Dorothy Seitz, CEN
Ana Valdez, CEN
Susan Westphal, CEN
Ervin Xhufka, CEN

Certified Flight Nurse (CFN)

Meagan Beavers, CFN

Certified Hospice and Palliative Care Nurse (CHPN)

Barbara Bigelow, CHPN
Lisa Ingham, CHPN
Sandra Rosen, CHPN

Certified Infection Control (CIC)

Mike Connors, CIC

Certified Medical Surgical Registered Nurse (CMSRN)

Savannah Alvarado, CMSRN
Merlyn Byers, CMSRN
Craig Eaton, CMSRN
Carolyn Gladwell, CMSRN
Doris Velasquez, CMSRN
Shannon Zornado, CMSRN

Certified Nephrology Nurse (CNN)

Linda Buffington, CNN
Kum Ok So, CNN

Certified Nurse Operating Room (CNOR)

Robin Berkoff, CNOR
 Jody Cap, CNOR
 Claudia Cargill, CNOR
 Kenya Cleary, CNOR
 Michael Griswold, CNOR
 Robert Hambly, CNOR
 Laurie Hannan-Reagan, CNOR
 Valerie Heaslip, CNOR
 Dorothy Jones, CNOR
 Cheryl Lefore, CNOR
 James Maderick, CNOR
 Barbara McKnight, CNOR
 Emanuele Monaco, CNOR
 Wanda Neufeld, CNOR
 Mike Padilla, CNOR
 Dayle Parrett, CNOR
 Ruby Principe, CNOR
 Patricia Romanella, CNOR
 Cera Salamone, CNOR
 Joan Thiel, CNOR
 Patricia Thornbury, CNOR
 Sonia Thorne, CNOR
 Rick Westergard, CNOR
 Judy Young-Levey, CNOR

Certified Oncology Nurse (OCN)

Nancy Cordova, OCN
 Christal Curry, OCN
 Bo Dunn, OCN
 Vicki Koceja, OCN
 Barbara Luhm, OCN

Lynne Malestic, OCN
 Abby Mata-Lopez, OCN
 Tijuana Parker, OCN
 Rebecca Pontiero, OCN
 Clara Rocha, OCN
 Kristi Rossignol, OCN
 Nerissa Sac, OCN
 Cathy Tatlow, OCN
 Jennifer Woltmann, OCN
 Marilyn Zullo, OCN

Certified Pediatric Emergency Nurse (CPEN)

Agnes Jove, CPEN

Certified Pediatric Nurse (CPN)

Diana Faugno, CPN

Certified Post Anesthesia Nurse (CPAN)

Kathleen Place, CPAN

Certified Professional Coder-Hospital (CPC-H)

Nancy Cordova, CPC-H

Certified Professional Health Care Management (CPHM)

Cheryl Catlett, CPHM

Certified Professional in Health Care Quality (CPHQ)

Cheryl Catlett, CPHQ

Stephanie Farrell, CPHQ
 Deborah Gonsalves, CPHQ
 Delee Panasuk, CPHQ
 Maureen Reiley, CPHQ

Certified Professional in Patient Safety (CPPS)

Tim Beringer, CPPS
 Janet Mirabella, CPPS

Certified Radiology Nurse – Interventional Radiology (CRN)

Julie Davis, CRN

Certified Registered Nurse First Assistant (RNFA)

Lara Belongia, RNFA
 Michael Griswold, RNFA
 Emanuele Monaco, RNFA

Certified Registered Nurse of Infusion (CRNI)

Tijuana Parker, CRNI

Certified Rehabilitation Registered Nurse (CRRN)

Rochelle Abiang, CRRN
 John Basquez, CRRN
 Jeffrey Donardt, CRRN
 William Donnelly, CRRN
 Michael Green, CRRN
 Beverley Ingelson, CRRN
 Julia Kim, CRRN
 Raquel Larios-Duarte, CRRN

Rachel Lebrun, FNP-C, CRRN
 Christy MacKewen, CRRN
 Matthew Mitchell, CRRN
 Darren Parada, CRRN
 Timothy Patterson, CRRN

Certified Vascular Access Nurse (VA-BC)

Sheryl Davidson, VA-BC
 Susan Westphal, VA-BC

Certified Vascular Nurse (RN-BC)

Mary Fakehany, RN-BC
 Lisa Fontes, RN-BC

Clinical Nurse Specialist – Adult Psychiatric Mental Health Nursing Board Certified (PMHCNS-BC)

Dixon Bennett, PMHCNS-BC

Family Nurse Practitioner Board Certified (FNP-BC)/Geriatric Nurse Practitioner Board Certified (GNP-BC)/Nurse Practitioner Board Certified (NP-BC)/Certified Family Nurse Practitioner (FNP-C)/Certified Nurse Practitioner (NP-C)/Adult Gerontology Nurse Practitioner Board Certified (AGNP-BC)/Advanced Oncology Certified Nurse Practitioner (AOCNP)

Fnu (Al) Alfandy, FNP-BC
 Megan Anderson, FNP-BC

Grace Angus-Amersbach, FP-ANP
 Mary Beare, FNP-BS
 Tiffany Bell-Davlatantes, FNP-BC
 Michelle Brilee, FNP-BC
 Jon Colbert, FNP-BC
 Barbara Fulmer, GNP-BC
 Tracy Gomez, FNP-BC, AOCNP
 Marianne Gregorich, FNP-BC, CMT
 Jill Hall-Crum, FNP-BC
 Kimberly Hancock, FNP-BC
 Laurie Hannon-Reagan, FNP-BC
 Amy Hetherington, FNP-BC, DNP
 Svetlana Lana Hezkiya, NP-C
 Ellen Kelley, FNP-BC
 Alice Kraker, FNP-BC
 Rachel Lebrun, FNP-BC, AOCNP
 Lilia Lopez, FNP-BC
 Dana Lovorn, FNP-BC
 Rosa Lucas, FNP-BC
 Aleth Mangosing-Ignacio, NP-C
 Carol Marietta, FNP-BC
 Monique Mester, FNP-BC
 Amanda Moyer, NP-BC
 Carlo Orozco, FNP-BC
 Morgan Rigopoulos, FNP-BC
 Rocio Ruelas, FNP-BC
 Kathleen Schomer, FNP-BC
 Russell Simon, FNP-BC
 Donna Smith, FNP-BC
 Cari Sudmeier, FNP-C
 Sandra Uhrig, FNP-BC
 Michael Ward, FNP-BC

James Watson, FNP-BC
 Kathleen Wheeler, FNP-BC, DNP
 Sheri Wysocki, FNP-BC
 Roula Younes, FNP-BC

Healthcare Accreditation Certification Program (HACP)

Maureen Reiley, HACP
 Cera Salamone, HACP

Inpatient Obstetric Nursing (RNC-OB)

Laurie Hannan-Reagan, RNC-OB

Legal Nurse Consultant Certified (LNCC)/Certified Legal Nurse Consultant (CLNC)

Christal Curry, LNCC
 Sonia Thorne, CLNC

Nursing Administration Advanced and Nursing Administration (NE-BC)

Ann Mostofi, NEA-BC
 Dorothy Jones, NEA-BC
 Ellen Lefebvre, NE-BC
 Mary Ann McLaughlin, NE-BC
 Matthew Mitchell, NE-BC
 Joan Randall, NEA-BC
 Sue Romkena, NE-BC
 Cera Salamone, NE-BC
 Christina Wallum, NE-BC

Nursing Informatics (RN-BC)

John Lussier, RN-BC
Louis Rotondo, RN-BC

Nursing Professional Development (RN-BC)

Yvonne Matetich, RN-BC

Orthopedic Nurse Certified (ONC)

Arlene Arpuli, ONC
Tanya Crager, ONC
Ramone Deely, ONC
Vernon Melchor, ONC
Anna Miller, ONC
Yasmine Ong, ONC
Nanette Pickowitz, ONC
Charlene Stephenson, ONC
Lucindia Williamson, ONC

Progressive Care Certified Nurse (PCCN)

Tess Doble, PCCN
Diana Evans, PCCN
Stephanie Jones, PCCN
Macky Macapagal, PCCN
Yvonne Matetich, PCCN

David Peel, PCCN
Mary Sanchez, PCCN
Venus Sayegh, PCCN
Fran Scott, CCRN, PCCN
Joan Thiel, PCCN
John Thompson III, PCCN

Sexual Assault Nurse Examiner – Adult (SANE-A) and Pediatric (SANE-P)

Jill Hall-Crum, SANE-A
Diana Faugno, SANE-A, SANE-P
Vicki Hanson, SANE-A

Stroke Certified Registered Nurse (SCRN)

Jane Berardini, SCRN
Zacharie Cyrus, SCRN
John Dix, SCRN
Jose Dozal, SCRN
Sharon Gallo, SCRN
Norma Jacquez, SCRN
Carol Marietta, SCRN
Jody Pedersen, SCRN
Phu Pham, SCRN
Richard Reagin, SCRN
Sue Romkema, SCRN
Mike Samu, SCRN
Sushma Verma, SCRN

Wound Care Certification (WCC)/Wound Ostomy Continence Nurse (WOCN)/Certified Wound Care Nurse (CWCN)/Certified Wound Ostomy Continence Nurse (CWOCN)/Certified Wound Ostomy Continence Nurse Advanced Practice Nurse (CWCN-AP)

Barbara Fulmer, CWOCN, CWCN-AP
Oscar Salazar, CWCN, WOCN
Susan Wolfe, WCC



Presentations, Publications and Awards

Award

Christina Wallum, MSN, RN, CRRN, NE-BC, and Kera Arias, BSN, RN

Sepsis without Borders

2017 American Excess Insurance Exchange (AEIX) Risk Management Annual Award of Excellence for Excelling in Safety and Liability Reduction

Award: \$12,000

Institutional Review Board Approved Research Projects

December 2016

K. Noorizadeh, MD; Rose Li, MD, PhD; and Beverley Ingelson, MHSA, MSN, RN, CRRN
The Analysis of the Effectiveness of a Palliative Care Program

September 2016

Debbie Hiestand, MSN, RN, CAPA, and Margaret Beaman, PhD, RN
DNR Suspension During the Periop Period: The Patient Perspective

July 2016

Ellen Lefebvre, MSN, RN, NE-BC; Kiran Dintyala, MD; and Margaret Beaman, PhD, RN
The Effect of a Nursing Leadership Stress Mastery Program

August 2016

Kristen Tanner, BAN, RN, and Tammera Anderson, BSN

How Does the Use of Electronic Tablets Impact Anxiety and Patient Empowerment in the Pre-operative Orthopedic Patients?

May 2015

Annette Brown, BSN, RN

The Impact of Smartphone Technology for Inter-professional Patient Care Communication in the Emergency Department and the Critical Care Units

Approved Quality Improvement Projects

Matthew Mitchell, DNP, RN, NE-BC, CRRN

Effects of Rehabilitative Nursing Certification on Patient Outcomes

Sue Romkema, DNP, RN, NE-BC, SCRNP

The Effects of Nursing Assistant Geriatric Specific Communication Education on Nursing Assistant and Older Patient Perceptions of Communication and Nursing Specific Care

Danuta Wojnar MSN, RN, CCRN

Shift Report: Communication Improvement Initiative

Phu Pham, MSN/Ed, RN, CCRN-CMC-CSC, SCRNP, CNRN, CPhT, and Nancy Wolf, MSN, RN, CRRN

Initial and Ongoing Verification of Feeding Tubes

Article Publications

Amy Hetherington, DNP, RN, AGACNP, ONC, and Kathleen Schomer, MSN, RN, NP-C

BONES: A postoperative plan of care and education program for total joint replacement patients. November 2016, Vol. 11, No. 11

Podium Presentations

April 19-22, 2017

Western Institute of Nursing Research Conference, Denver, CO

Ellen Lefebvre, MSN, RN, NE-BC, and Margaret Beaman, PhD, RN

The Effect of a Nursing Leadership Stress Mastery Program

June 2, 2017

2017 Southern California Nursing Evidence-based Practice Conference

Christina Wallum, MSN, RN, CRRN, NE-BC, and Bridgette McCarthy, MSN, RN

Nursing Leadership's Role in Supporting the EBP Plan and Journey

Lara Latham, MSN, RN

Making a Difference as a Clinical Staff Nurse through EBP

November 9, 2016

2016 Annual Nursing Congress: Empowering Nurses: Transforming Care at the Bedside, Rancho Mirage, CA

Lisa Blake, BSN, RN

Frontline Nurses as Safety Champions: A Case Study Demonstrating the Application of Evidence Using Transformational Leadership Principles

Destinee Lechuga, BSN, RN, and Rachel Cole, RN

Assessing Best Practice in an Acute Care Dialysis Unit

Brian Esser, BSN, RN, and Sharon Gallo, BSN, RN

Use of Interactive Tools to Increase Stroke Certified Nurse Designation

October 13-14, 2016

Sigma Theta Tau Odyssey 2016 Conference: Influence to Advance Global Health and Nursing, Ontario, CA

Lena Kebaso, PhD, BSN

Follow Up Assessment of Discharged Oncology Patients

April 17-20, 2016

Nurses Improving Care for Healthsystem Elders (NICHE), Care Across the Continuum, Chicago, IL

Barbara Fulmer, MSN, GNP-BC, CWCN-AP, COCN, CCCN

Evidence-Based Practice for Wound Care Prevention in the Elderly

Annette Brown, BSN, RN, and Jean Douglas, BSN, RN, ACM

Chasing the Perfect Handoff: Transforming Hospital to Skilled Nursing Facility (SNF) Communication

Poster Presentations**October 5-6, 2017****22nd Joint Southern California Chapters, Nursing Odyssey Conference, Ontario, CA****Debbie Hiestand, MSN, RN, CAPA, and Margaret Beaman, PhD, RN**

DNR Suspension During the Periop Period: The Patient Perspective

June 2, 2017**2017 Southern California Nursing Evidence-based Practice Conference, Rancho Mirage, CA****Lara Latham, MSN, RN; Angel Bjierke, BSN, RN, OCN; and Mariana Lerma, RN**

Use of a Power Glide to Place Midline Intravenous Catheters on Patients Receiving Intravenous Infusions

Lena Kebaso, PhD, RN, and Margaret Beaman PhD, RN

Exploring Factors Associated with Hospital Readmissions of Patients with Cancer

Angel Bjierke, BSN, RN, OCN, and Bobbie Galindo, BSN, RN

Decreasing Anxiety of Patients Receiving Chemotherapy through a Treatment 101 Class for Patients and Families

Stephanie Farrell, MBA, BSN, RN, and Maureen Ross, RN

Randomized Control Trial Evaluating the Effects of Inhaled Aromatherapy on Nausea and Vomiting in Patient with Cancer Receiving Treatment in an Outpatient Cancer Setting

Kelly Preston, MSN, MHA, RN

New Graduate Nurse Stress Reduction

John Yuhas, BSN, BA, RN

Integrating Daily Mindful Meditation Opportunities into Workflow for Critical Care Nurses

Dana Rome, BSN, RN, CRRN, and Irma Leos, RN, CRRN

Rise and Shine, Move to Improve – Implementing Early Progressive Mobility and the ABCDEF Bundle in Critical Care

Dorothy Johnson Jones, MSN, RN, CNOR, NEA-BC

SBAR for the OR: The Effect of a Preoperative Briefing Tool and Education on Negative Outcomes and Culture of Safety

Dorothy Johnson Jones, MSN, RN, CNOR, NEA-BC, and Toni Pellum MSN, RN

Perioperative Value Stream Analysis Yields Quality, Cost and Growth Outcomes

Clara Christine Harvey, BSN, RN, CCRN-CSC; Desiree Darling, BSN, RN, CRRN; and Karen Copeland, BSN, RN, CCRN

Mock Re-Sternotomy: Using High Fidelity Simulation to Improve Efficacy and Patient Safety in a Cardiac Intensive Care Unit

Amera Baylosis, BSN, RN; Arlene DeLapaz, BSN, RN; and Joan Randall, MS, RN, NEA-BC
Improving Safe Pediatric Vaccine Administration in a Family Medicine Residency Clinic**Robin Cavaliere, BSN, RN; Whitney Chavez, BSN, RN; and Craig Eaton, MSN, RN**

Medical Surgical Nurses Turning Vital Signs into Best Practice

Daryl Swanson, BSN, RN; Robin Cavaliere, BSN, RN; and Christy MacKewen, ADN, RN, CRRN

Evaluation of the Enculturation of the Professional Practice Model

April 27-28, 2017**American Nurses Association ANCC Pathway to Excellence Conference, Dallas, TX****Cera Salamone, BSN, RN, PHN, NE-BC, OCN, HACP; Raeln Anderson, BSN, RN; and Michael Connors, BSN, RN, CIC**
Operating Room Traffic Patterns**April 19-22, 2017****Nurses Improving Care for Healthsystem Elders (NICHE), Care Across the Continuum, Austin, TX****Kera Arias, BSN, RN**
Sepsis: The Silent Killer**Sue Effinger, MHA, MSN, RN, SCRNP, NE-BC, and Paul Sokoloff, MBA, MSN, RN**

The case for GRN and service excellence at a facility

April 1-6, 2017**Association of Operating Room Nurses Annual Conference, Boston, MA****Cera Salamone, BSN, RN, PHN, NE-BC, OCN, HACP; Raeln Anderson, BSN, RN; and Michael Connors, BSN, RN, CIC**
Operating Room Traffic Patterns**February 5-8, 2017****Association of California Nurse Leaders 39th Annual Conference: Soaring to New Heights as Nurse Leaders, Anaheim, CA****Cera Salamone, BSN, RN, PHN, NE-BC, OCN, HACP; Raeln Anderson, BSN, RN; and Michael Connors, BSN, RN, CIC**
Operating Room Traffic Patterns**Sue Effinger, MSN, MHA, NE-BC, SCRNP, and Jody Pedersen, BSN, RN, SCRNP**

The What, Why, and How of Saving BRAINS

November 9, 2016**2016 Annual Nursing Congress: Empowering Nurses: Transforming Care at the Bedside, Rancho Mirage, CA****Christine Gustafson, BSN, RN, PCCN; Lenah Kebaso, PhD, BSN, RN; and Anna Lauricella, BSN**
Turn, Turn, Turn: A Team's 10 Year Journey to Sustain Pressure Ulcer Prevention**Robin Cavaliere, BSN, RN; Daryl Swanson, BSN, RN; and Christy MacKewen, ADN, RN, CRRN**
E2 (Empowerment & Enculturation): A Professional Practice Model Developed for Nurses by Nurses**Annette Brown, BSN, RN; Margaret Beaman, PhD, RN; and Wendy Edwards, BSN, RN**
Clinical Communication Transformation Via Secure Smartphones**Joan Randall, MS, RN, NEA-BC; Kim Vonhaden, BA, RN; and Rose Garcia, BSN, RN**
Implementation of Self-Directed Clinic Orientation**Christine Johnstone, MHA, MSN, RN; April Lopez, BSN, RN; and Jamie Burnett, RN**
Development of a Primary Care Team Clinic Communications Protocol**Kera Arias, BSN, RN**

Catching a Killer: Reducing Sepsis Mortality Through Early Detection and Coordinated Response

Poster Presentations (cont.)

Maria Florina; Aleth D. Mangosing-Ignacio, MSN, RN, NP, CCRN; and Kathleen Wheeler, DNP, RN
The Process: Creation and Revision of Hospital Standardized Procedures, Protocols, and Privileges for Nurse Practitioners

Cera Salamone, BSN, RN, PHN, NE-BC, OCN, HACF; Raeln Anderson, BSN, RN; and Michael Connors, BSN, RN, CIC
Operating Room Traffic Patterns

Sarah Blaisdell, BSN, RN; James Osisanya, MBA, RN; Tijuana Parker, MSN, RN, OCN, CRNI; Kelly Preston, BSN, RN; and Marcela Rodriguez, RN
CLABSI Prevention: Implanted Venous Ports

Jane Berardini, RN; Britney Monson, BSN, RN; and Carlos Go, BSN, RN
Inpatient Stroke Management

Mike Samu, RN; John Dix, BSN, RN; and Kathy Cash, BSN, RN
ED Stroke Nursing Team: Door to Drug Time: Performance Improvement Project Stroke Patient Call Backs

Lina Kao, RN; Michael Reynolds, RN; and Crystal Rodriguez, RN
Patient Satisfaction, Eisenhower's Five Star Orthopedic Health Center Way

Danuta Wojnar, MSN, RN
PENS: Preventing Infections, Never Simpler

Stephanie Foster, RN; Rachel Susca, RN; Lauren Swanson, BSN, RN; and Karyn Yemoto-Snider, BSN, RN
Admission Skin Assessment

Jennifer Matthews, BSN, PHN, RN; Victoria Bernal, BSN, RN; Chelsea Staffs, RN; Victoria Santibanez, BSN, RN; and Simone Williams, BSN, RN
Nurse Shift Report: Evaluation of a Handoff Communications and Its Effects on Nursing Care

Meredith Chafe, RN; Florence Mercado-Garcia, RN; Lisa Webster, BSN, RN; and David Welch, BSN, RN
Bedside Shift Report: Improving Patient Care, Satisfaction and Safety

Johanna Cullip, BSN, RN; Tara Szydlowski, BSN, RN; and Wendy Rascon, BSN, RN
P.A.I.N.

Joel Rebel, RN; Jennifer Ferrer, RN; and Lenah Kebaso, PhD, BSN, RN
Patient Call Back After New Cancer Diagnosis

Bridgette McNamara, BSN, RN, and Tressa Norton-Rosales, BSN, RN
Death in the Emergency Room: Are We Ever Ready?

Jeffery Galyardt, BSN, RN, and Brenda Rodriguez, BSN, RN
Patient Lost Belongings

Ann Bullard, RN; Leslie Teran, BSN, RN; and Jaclyn Schmitz, BSN, RN
A program for Early Ambulation for Bariatric Patients

November 2-4, 2016
Hospital Quality Institute Annual Conference, Respect, Reliability, Resilience

Kera Arias, BSN, RN
Catching a Killer: Reducing Sepsis Mortality Through Early Detection and Coordinated Response

October 14, 2016
37th UPNAAI Educational Conference, Crossing and Closing the Gap: Nursing Then and Now, League City, TX

Maria Florina Aleth D. Mangosing Ignacio, MSN, RN, NP CCRN, and Kathleen Wheeler, DNP, RN
The Process: Creation and Revision of Hospital Standardized Procedures, Protocols, and Privileges for Nurse Practitioners

October 13-14, 2016
Sigma Theta Tau Odyssey 2016 Conference: Influence to Advance Global Health and Nursing, Ontario, CA

Danuta Wojnar, MSN, RN
PENS: Preventing Infections, Never Simpler

October 5-7, 2016
ANCC National Magnet Conference, Orlando, FL

Christine Gustafson, BSN, RN, PCCN; Lenah Kebaso, PhD, BSN, RN; and Anna Lauricella, BSN
Turn, Turn, Turn: A Team's 10 Year Journey to Sustain Pressure Ulcer Prevention

Robin Cavaliere, BSN, RN; Daryl Swanson, BSN, RN; and Christy MacKewen, ADN, RN, CRRN
E2 (Empowerment & Enculturation): A Professional Practice Model Developed for Nurses by Nurses

July 20-22, 2016
Summer Institute in Nursing Informatics: Informatics at the Crossroads of Care Coordination, Baltimore, MD

Annette Brown, BSN
Chasing the Perfect Handoff: The Missing Link to Interoperability

April 21-23, 2016
America Nursing Informatics Association, San Francisco, CA

Annette Brown, BSN
Clinical Communications Transformation – The Power of Secure Smartphones at the Bedside

January 31 – February 3, 2016
Association of California Nurse Leaders 38th Annual Conference: The Power of Us! A Force for Change

Annette Brown, BSN, RN; Margaret Beaman, PhD, RN; and Wendy Edwards, BSN, RN
Clinical Communications Transformation Via Secure Smartphones

Christina Wallum, MSN, RN, CRRN, NE-BC, and Dana Rome, BSN, RN, CCRN
Rapid Response "Routine Rescue Rounding"

Annette Brown, BSN, RN; Jean Douglas, BSN, RN, ACM; and Cynthia Larocque
Chasing the Perfect Handoff

