Nursing at a Glance

Nurses’ Week 2010
Theme: Giving Care That Makes a Difference in the Lives of Others

The Week of May 2nd

Sunday, May 2
9:30 – 11:30 AM
Continental Breakfast, delivered to all units by Nursing Leadership

Monday, May 3
10:00 – 11:00 AM
Open Forum with Deb Baker, Chief Nurse Executive: Auditorium

4:00 – 6:30 PM
Nursing Awards Presentation: Cafeteria. Reception to follow in the Lynch Board Room

Tuesday, May 4
10:00 – 11:00 AM & 2:00 – 3:00 PM

Wednesday, May 5
10:00 – 2:00 PM
“Clicking on Clinical Resources” An Introduction to the Nursing Website. Dining Room 2, Drop in anytime

2:00 – 4:00 PM
Nursing Council Appreciation Reception Lynch Board Room

Thursday, May 6
7:00 – 10:00 AM
Staff Breakfast North side of the cafeteria

10:00 – 11:00 AM
Nursing Grand Rounds: Multidisciplinary Rounding Project, Presented by the Step Down Unit Auditorium

11:30 – 1:30 PM
Nursing Poster Presentation Stanton Lobby

2:00 – 3:00 PM
Open Forum with Deb Baker Auditorium

Friday, May 7
7:00 – 4:00 PM
Uniform and Stocking Sale North Side of the Cafeteria

All Shifts: Cookie Distribution and Skin Care Committee Reference Book

Nurse Week Committee Members 2010:
Colette Taylor, N8, Joellyn Sullivan, N3, Dottie Devanna, CNS, Debbie Baker, Nursing Administration, Becky Logiudice, CNS, Pat Lavin, Nursing Administration, Jane Osgood, Nursing Administration, Mary Jo Sharkey, Nursing Administration, M. Susan Donnelly, Food and Nutrition, Vanessa Halpin, Community Relations, Marcia Benser, Quality and Safety, Barbara Yee, Cardiology, Lois Howry, Nurs Staff Devel., and Leslie Schneiderhan, CNS
National Nurses Week is celebrated annually from May 6 (National Nurses Day) through May 12, the birthday of Florence Nightingale. The festivities to honor National Nurses’ Week at Mount Auburn Hospital will be from May 3 through May 8. It is during this week that we take pause to celebrate and honor the dedication and commitment of the 600 plus nurses employed by Mount Auburn Hospital.

The Nurses Week Committee at Mount Auburn Hospital has once again been busy planning a celebratory week. The committee sought input from our Nursing Councils for consideration in the planning. One of the councils suggested we consider a guest speaker who delivered a more entertaining message for our staff. The committee contracted with Mary Ellen Rinaldi to present “Life Lessons and Laughter”, which will be an entertaining and humorous discussion with staff. Also, our Nurses Week Committee selected a theme for festivities this year: “Mount Auburn Nurses: giving care that makes a difference in the lives of others.” A theme that reflects the passionate nursing care our professionals at Mount Auburn Hospital provide.

The past year was another accomplished year for the Division of Nursing. The Councils and our Shared Governance Model continues to flourish with the enhancement of Unit Based Councils throughout the organization. Our outstanding Press Ganey Scores and Improved Nurse Sensitive Quality Outcomes are evidence of the hard work done by members of our councils. Every nursing unit has a representative on each council. Councils are chaired by staff nurses who provide direction and leadership to the groups.

Electronic MAR and BMV (Bedside Medication Verification Systems via scanning) have gone live on two of our inpatient units. The remainder of the inpatient units are scheduled to go live with this technology over the upcoming year. This technology has advanced patient safety and helped to support the daily workflow for our nurses.

We have implemented “Patient Rounding” on each of our inpatient units. Intentional rounding of our patients has yielded positive outcomes with a reduction in Pressure Ulcers, Reduction in Falls, Reduction in call lights, and improved staff and employee satisfaction.

We remain diligent in our efforts to achieve Magnet Status. Last year we set a goal to improve the number of specialty certifications amongst the nursing staff. We still have room for improvement to achieve national certification rates of approximately 20%. Over the upcoming year there will be a push to improve our rating as we build this into our proposed Clinical Ladder program.

The Nursing Councils have adopted the Relationship Model from which to develop our Nursing model of care. This will serve as the means to frame Kristen Swanson’s Caring Theory, which was identified as the nursing theory to enrich our nursing practice.

We embark on yet another successful year for Nursing at Mount Auburn Hospital. I thank you all for your tireless efforts and the compassionate care you provide for our patients. With a focused eye on our patients and their families, we will continue our successful journey.

To each and every one of you, Happy Nurses’ Week.

Dialogue with Deb

Deb Baker, RN, MBA

Professional Accomplishments & Achievements in Nursing

**Cath Lab:** The Cardiac Cath lab staff in conjunction with the ER staff won the 2010 Team Patient Safety Award for their collaborative work in decreasing Door to Balloon Time for Acute MI patients. The Cath Lab nurses also presented a Nursing Grand Rounds in February 2009 on Door to Balloon Time.

**W2:** Anne Huntington, RN, Nurse Manager of Wyman 2, will receive her Masters in Nursing from Framingham State College on May 16th, 2010.

**Travel Medicine:** Karen Avery, RN, BSN, CTH,® and Rhonda Martin, RN, BSN, MPH, PGDTM, presented a poster at the International Society of Travel Medicine (ISTM), in Budapest, on The Role of Travel Medicine in the Development of a Global Nursing Program (MEND).

**Needham 3:** Along with other disciplines, N3 trialed and implemented a daily multidisciplinary discharge rounding process in an effort to improve the patient’s discharge experience.

**Diabetes Education:** Becky Anthony, RN, BSN, CDE recently became a certified insulin pump trainer.

In November 2009, the Diabetes Self-Management Education Program at Mount Auburn was nationally recognized by the American Diabetes Association (ADA). Achieving Recognition status certifies that our Diabetes Education program meets the national standards of care for diabetes management.

Becky Anthony, RN and Stacy Dimonica, RN are participating in a project focused on addressing the high incidence of Type 2 diabetes among Latinos in Waltham.

Stacey DiModica, RN, BSN, CDE and Becky Anthony, RN, BSN, CDE presented Nursing Grand Rounds, March 2010, on “Insulin Therapy Strategies for the Hospital Nurse.”

**Walk-In-Clinic:** Jayne Germano is currently attending UMASS, Boston to obtain her BSN.
Professional Accomplishments & Achievements in Nursing

**Stroke Nurse Coordinator:** Marie McCune, BS, RN, Stroke Nurse Coordinator presented “Effective Collaboration: EMS/ Hospital teams working together to improve communication and patient outcomes.” for the SCORE group, Stroke Collaborative Reaching for Excellence which included the AHA/ASA and the DPH. Marie is also involved in writing a grant with the Northeast Cerebrovascular Group about early stroke recognition and the importance of calling 911.

**ICU:** Presented Nursing Grand Rounds on the Cardiovascular patient population with a focus on the patient experience in April 2009.

**MICU:** Kerry Fleming participated in a course provided by the Wound Care Education Institute (WCEI) and will be a wound care resource nurse.

**Step Down Unit:** Will be presenting Nursing Grand Rounds on May 6th on their experience with Multidisciplinary Rounding.

**IV Team:** Presented a Nursing Grand Rounds on Iron Overload in June 2009.

**Operating Room:** Vanessa Amaral, RN was part of a 16 member Emergency Life Project (HELP) medical team that went to Honduras in March 2009 and provided health care to residents of remote mountain villages.

Donna Cyr, RN, collaborated in a research study on the effects of Reiki on anxiety in women in a pre-op holding area at Beverly Hospital. The work will be presented in a poster presentation in New Orleans April 2010.

**Nursing Staff Development:** Dottie Devanna, RN, ACNS-BC, presented a poster entitled, “Improving Skin Care Outcomes Using NDNQI Data”, at the Massachusetts Organization of Nurse Executives (MONE) quarterly meeting on September 11, 2009. Dottie was also recertified as a Clinical Nurse Specialist in Adult Health, ACNS-BC.

Becky Logiudice, MS, RN had a poster and an abstract accepted at the American Thoracic Society Conference on the educational approach in the implementation of a Rapid Response System. Lois Howry, RN has volunteered to work with the Lexington Medical Reserve Corps.

Sue Hoban, MS, RN became a certified wound care nurse (Wound Care Certified, WCC).

**South 3:** Presented Nursing Grand Rounds, November 2009 on caring for the long-term hospitalized patient.

**N7:** Several of the nurses have become train the trainers in EMAR / BMV and have been very helpful in the implementation of EMAR and BMV on N8.

Maria DeAngelis participated in a course provided by the Wound Care Education Institute (WCEI) and will be a wound care resource nurse.

**Neurology:** Susan Nutille, RN, MSCN, from the MAH Multiple Sclerosis Center, recently achieved recertification as a Certified Multiple Sclerosis Nurse.

**South 4 / Stanton 3:** Erika Lofgren, RN and Kathleen Fitzgerald, RN, participated in a course provided by the Wound Care Education Institute (WCEI) and are working towards becoming WCS (wound care certified.) They are shadowing Susan Hoban and are members of the skin care committee.

South 4 / Stanton 3 nurses also presented a Nursing Grand Rounds in September of 2009 on caring for the psych patient on a medical / surgical floor.

Stanton 3 and Physical Therapy presented the Patient Mobility Project at Nursing Grand Rounds in January 2010.

**Community Outreach:** In October 2009, Mary Johnson, received a BCBS Foundation of MA grant entitled “Closing the Gap on Health Care Disparities”.

Mary Johnson also received a $17,500 grant from the Sanborn Foundation to provide a tobacco education program in partnership with the Arlington Public School System and a $5,000 grant from the Boston Prostate Cancer Walk to provide community education about prostate cancer as part of The Barron Center for Men’s Health mission.

**Collaborative Projects:** Marie Lanata RN, Judi Schoenberg RN, Becky Anthony RN, Marie McCune RN, Kris Martin, RN, and Gerry Nelson RN all participated in MAH’s Bridge to Health Care and Cancer/Cardiovascular Awareness Projects. These projects have received funding from Tufts Health Plan, Bank of America, Quest, and Genzyme. Topics included diabetes, heart disease, high blood pressure, stroke, screenable cancers and H1N1.

These presentations reached an audience of over 2000 people in over 50 seminars.

Judi Schoenberg and Mary Johnson presented at the Massachusetts Prostate Cancer Symposium 2009 “Straight Talk from Nurses”

**GI:** Through the recycling of cans/bottles the GI/Endoscopy staff have been able to provide Thanksgiving dinners at local food pantries, clothing and toiletries to women’s homeless shelters throughout metro-Boston and have contributed to the Merwin Memorial Free Animal clinic in Allston. The GI unit also worked in conjunction with the Massachusetts State Police to hold a toy drive during the holiday season.

25% of the Endoscopy staff have obtained their certification in Gastroenterology. The most recent staff member being Susan Mariani.

Kelli Marchant has returned to U-Mass Boston part-time to obtain her BSN.

Leah Szumita is completing her final semester concentrating on becoming a clinical specialist.

This past November Carolyn Campbell and Kelli Marchant were guest speakers at a GI Symposium held at the BIDMC. The topic they discussed was Celiac Disease.

**Hem Onc:** In Radiation Therapy an abstract entitled “Incorporating Integrative Medicine into Nursing Care: A Model for Radiation Oncology” by Karen Ingwersen, RN,MSN, CMT, Gretchen Dunoyer, RN, MSN, OCN, and Janice Maienza, RN, MSN, AOCN was accepted for publication in the Oncology Nursing Forum. It will be presented in a moderated poster session in May at the 30th annual ONS Congress in San Diego.

Millie Williams, Kathy Willey, Susan Fitzger, Paula Falzone, Violeta Alvarez, Gretchen Dunoyer and Judi Schoenberg are all maintaining their national OCN (oncology certified nurse) certification. Janice Maienza has the AOCN (Advanced Oncology Certified Nurse) certification.

**Wyman 3:** Millie Williams, Kathy Willey, Susan Fitzger, Paula Falzone, Violeta Alvarez recently completed and passed the exam at the ONS Chemotherapy and Biotherapy course given at MAH in March and April. This will help them maintain competency in chemotherapy and biotherapy administration and keep them current with national standards.

**Emergency Department:** was recognized for their achievement in Patient Safety for the development of the Physician in Triage Team Model. Anne Marie Lucien received her BSN this spring from Salem State College.

**Needham 8:** implemented BMV in early 2010. Anthony Ayag, RN will be attending the MS Annual Conference in San Antonio, TX. Anthony also writes questions for NCLEX on MS.
Nursing - Pharmacy Committee

The mission of the Nursing Pharmacy Committee is to improve and streamline the medication system from medication purchases to bedside administration. The Nursing - Pharmacy Committee has been meeting monthly since February of 2009. This committee has representation from each nursing area as well as pharmacists and pharmacy technicians.

2009 Accomplishments:

• Revision of the list of override reasons in the Pyxis for medication discrepancy resolution
• The Committee had input in the Pyxis upgrades
• Medication safety with Emergency Department boarders is being reviewed
• Non-formulary medications now has a prompt in meditech for the family to bring the medications in from home
• The patient medication from home project has been completed with a kardex order, a policy, and a medication retrieval system

The committee members are also continuing to learn about each department's role and responsibilities in medication delivery. Part of this review included the demonstration of an order across the Physician, Pharmacy and Nursing modules and some opportunities to enhance the communication were explored.

Co-chairs: Doug Haskins, PharmD and Katie Murphy, RN, S4/ST3

Nursing Council Updates

Nursing Practice Council

The focus of the Nursing Practice Council is on defining, implementing, and maintaining the highest standards of clinical nursing practice consistent with evidence based practice, community, regional, and national standards.

2009 Accomplishments:

• Over the past year the Nursing Practice Council has continued to support the advancement of unit based councils.
  Every month the council members provide an update on recent projects and activities. The number of unit based councils has grown over the year and now all departments/units have a unit based council that meets regularly and effects practice.
• Based on the recommendations made from work done in the Nursing Research Council, the Nursing Practice Council has been working on
  o Naso-gastric tube placement confirmation by pH paper
  o Blood draw policy defining the use of the butterfly needle versus the straight needle and created an annual competency which was approved by the Professional Excellence Council
• A sub-group of council members has reviewed and revised the careplan documentation process in meditech and updated each careplan to reflect evidence based practice. The updated careplan documentation and careplans will be implemented in early June of this year.

Co-Chairs: Kerry Fleming, RN, MICU and Maria Gerth, RN, N3

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Nursing Research Council

The Nursing Research Council has worked diligently this past year to support nurses in their quest to promote patient care based on evidence-based practices. Questions solicited from nursing staff and councils generated literature/practice reviews on three separate clinical questions and led to the design, implementation, and reporting of two clinically-based research projects assessing current practices at Mount Auburn Hospital. The Council has communicated the results of these works to other nursing councils, nurses, physicians, and other stakeholders to generate improvement in patient care, safety, and satisfaction.

2009 Accomplishments:

• Confirmation of Nasogastric Tube Placement & Gastric Residual Volumes
• Accuracy of Peak and Trough Blood Draws through PICC Lines
• Occurrence and Severity of Phlebitis in Patients Receiving Peripherally-Infused Amiodarone
• Straight Needle Versus Butterfly Needle Phlebotomy Study
• “Laboring Down” Versus Immediate Active Pushing In Second Stage of Labor

For 2010, the Council has set goals to ensure that it continues to explore nurses’ clinical questions as well as strengthen and expand its expertise in conducting nursing research to support evidence-based practice. Further, the Council is cognizant of the importance of generating curiosity among all nurses to question practices, seek the evidence for best practices, and translate that evidence into action to improve the quality and safety of patient care. As such, the Council will explore strategies to reach out to influence and support nurses’ investigation of clinical questions and the transition of evidence to the practice arena.

Co-Chairs: Maria Britt, RN, IV Team and Nicole Walsh, RN, S3
The Professional Excellence Council

The Professional Excellence Council is responsible for improving and maximizing clinical knowledge and competency of the nursing staff. The Council is responsible for the development and implementation of performance evaluations, initial and annual competence validation, as well as the development and education of nursing staff.

2009 Accomplishments:

- Reviewed and discussed the National Data for Nursing Quality Indicators (NDNQI) RN Satisfaction Survey and took measures to improve our professional development scores. Based on survey results the council divided into 2 groups: education and the development of a clinical ladder.

- The education subgroup has been working on
  - Sustaining Nursing Grand Rounds which has showcased several great performance improvement efforts involving nursing throughout the hospital.
  - Develop a provider unit for the planning a continuing education programs. This will allow Mount Auburn to internally review educational content and offer contact hours.

- This clinical ladder subgroup has been working on a process and standards for an advancement program. This program will allow people to advance in their position. The clinical ladder has undergone many revisions as a result of staff input but we hope to have a pilot group apply this June. We will make revisions to the clinical ladder program as a result of the feedback we receive from the pilot with a goal of beginning the application process in the Fall of 2010.

Co-Chairs: Marie Richard, RN, S3 and Myrtha Derissaint, RN, N7

Patient Education Council

Good Communication = Healthy Patients

The Patient Education Council recognizes the importance of health literacy when educating patients and improving health outcomes. The information below has been formatted using health literacy principles such as; “white space”, “chunking of like material”, bulleted, and phonetic spelling.

Mission statement: To facilitate patient education by mentoring, fostering, and supporting colleagues in the development of teaching methods and materials.

2009 Accomplishments:

- Learned about health literacy and teaching methods
- Educated other nurses about health literacy
  - Health Literacy Conference- Feb 2009
  - Mox’s during Health Literacy Awareness Month
- Drafted a plan to improve patient education that includes:
  - Link on the Caregroup Portal
  - Worksheet to develop or revise patient education material
  - List of current patient education materials.
  - Decision tree to identify material as either 1) Instructions, 2) Education or 3) Information.
- Consulting on the following brochures:
  - Preoperative Instructions
  - Managing Your Pain Together
  - Secondhand Smoke and Your Baby
  - Comfort Measures Only

Please contact us for assistance at:
Care Group portal/Nursing/Shared Governance/Patient Education Council.

Chair: Marie McCune, RN, Stroke Nurse Coordinator
Moving Nursing Forward

The Fall Committee is an interdisciplinary group that works at fall reduction strategies. This past year, we have participated with the VHA Rapid Adoption Network to develop best practices for fall prevention. During this time, we accomplished the following:

- Obtained new fall alarms and floor mats
- Revised the fall policy to include criteria for the use a neck collar
- Involved unit based councils in fall analysis and looking at environmental factors
- Involved pharmacy in the committee and fall follow-up

Through the work of this group and the benefits of the mobilization task force that is implementing mobilization devices (Stedy and Sara 3000), Mount Auburn has significantly reduced its falls with injuries.

Committee Members: Mike Ales, Hanh Chu, Nancy Couts, Dottie Devanna, Kelly Donahue, Sue Donnelly, Anne Huntington, Gayla Jackson, Pat Lavin, Janice Maienza, Brenda Martin, Katie McCarthy, Mary Meagher, Rachel Mele, Jayne Mulholland, Brigid Murphy, Betty Simard, Kim Sweetland, Jeannie Taylor, Al Wood, and Bob Wood

The Skin Care Team is a committee of staff nurses interested in becoming resource nurses in skin care. Part of the team initially attended a skin care conference. The information was used to develop a skin care educational initiative at Mount Auburn Hospital. The team has also developed a skin reference manual that will be distributed during nurse’s week. Lastly, the team has made recommendations on the skin aspects of the nursing assessment and flowsheets.

Committee Members: Anthony Ayag, Marion Campbell, Melissa Cotter, Maria DeAngelis, Felicia Dela Cruz, Dottie Devanna, Diane Feeley, Kathleen Fitzgerald, Kerry Fleming, Andrea Fulmer, Mary Getzoyan, Kim Hannon, Frieda Hoffmann, Lois Howry, Lauren Indelicato Jacquelin Laguerre, Erika Lofgren, Michelle McCormack

Critical Care Participation in The CUSP Study: The Comprehensive Unit based Safety Program (CUSP) Study is sponsored by the Agency for Healthcare Research and Quality (AHRQ) and in partnership with the Johns Hopkins University Quality and Safety Research Group. Many hospitals statewide are enrolled in this program to reduce central line associated blood stream infections (CLABSI). The MICU, SICU and Infection Prevention Department are currently participating in this project. The main focus of this study is to eliminate central line associated blood stream infections. The project team and staff members attend monthly phone conferences where project recommendations are discussed. Due to this project the MICU and SICU have implemented central line carts used during insertion of central lines, a central line checklist that is signed by the observer and the physician with a procedure note, and daily goal sheets to assist in team communication are also being revised. Since participating in the project our CLABSI rate is zero.

Emergency Department: Is presently working on a back to basics campaign and establishing an ED nursing journal club. The council also established a staff education program to decrease blood culture contamination.

Catheterization lab: All RNs will be working towards CCRN status as a group. They are also working on a research project to assess kidney function and dye usage.

Stanton 3/South 4: Have been doing follow up phone calls to all discharged patients which has increased the Press Ganey scores. They are currently working on a mandatory telemetry competency day for all telemetry nurses at MAH. This competency day will present education on pacing/defibrillation, bedside emergency/code blue, interpreting 12 lead EKG’s, and advanced arrhythmia / ACLS.

Main OR: Staff are updating the intra-operative sponge and instrument counts to assure and improve the quality and safety of the patients.

Day Surgery OR: Has established protocols for the safe and effective application of contact precautions in day surgery throughout the peri-operative process, thereby insuring the highest quality of care for their patients.

South 3: Have recommended that all post op patients be recovered in their hospital beds and transferred to their rooms in their beds. This has improved their comfort, eliminated painful stretcher to bed transfers and has improved the efficiency of the transfer process for the PACU and South 3 nurses. The council has developed guidelines for assigning admissions to help manage the flow of patients from the ED and PACU to South 3.
**Unit Based Council Annual Accomplishments Con’t.**

**Wyman Center:** The focus of their council has been on reducing falls and reducing restraints use through the implementation of a sensory modulation program. They have had great success with this program while eliminating the use of one to one sitters.

**Walk-In-Center:** The council members has developed a wound care reference book. The staff in the WIC performs wound care and dressing changes for private patients sent to the clinic by their pcp/surgeons. The staff that perform the wound care document the appearance of the wound and place this in the reference book. This allows the staff to reference and compare the wound’s appearance from previous visits and note any changes or improvements. The council has streamlined patient visits for infusions and transfusions by booking appointments in the computer scheduling module. This allows staff to schedule patients at specific intervals throughout the day which controls flow, decreases wait time, thus providing increased patient and staff satisfaction.

**Hematology/Oncology Clinic:** The council has readjusted the hours of treatments to accommodate lengthy multi drug treatments. By staggering treatment times, they are able to spend more time teaching, answering questions and giving patients more focused attention. A nurse is assigned to triage phone calls and unexpected visits daily. Phone calls are categorized which has minimized nurse interruptions. We are also updating and reviewing all chemotherapy patient education.

**SICU:** The council has accomplished the following: reviewed and updated current critical care policies, designed and developed SICU welcome brochures for visitors, updated SICU goal sheet for rounding, developed checklist of unit coordinator and PCA responsibilities, developed PCA rounding pocket cards, developed unit resource books, started journal club, and designed a “meet the staff” board. Currently the council is working on: bedside nurse to nurse reporting, a poster board for patient rooms for the families to complete called the “get to know me poster” and improving teamwork-team rounds.

**Needham 7:** The council is focused on enhancing communication and increasing satisfaction with our discharged patients through follow-up phone calls. Needham 7 is the pilot floor for eMAR; an efficient process that ensures safe medication administration to all our patients, as well as enables our nursing staff to spend more quality time with our patients. Additionally, we continue to improve our methods of patient rounding, our use of written communication via patient white boards. And we are beginning to trial new practices geared specifically to the geriatric population with the goal of reducing patient falls and resulting injury.

**Maternal Child Health:** This year the unit based council on the MCH units have worked on improved communication with the following projects: A unit to unit for transfer and report, unit to housekeeping for timely bed turnover in high census times, unit to blood bank for crisis intervention when blood product is needed stat establishing new steps allowing all to work together for patient safety, patient rounding, use of white boards with healthcare team member names and goals for the day.

**Needham 3:** The council’s main project has been patient rounding. We have reviewed and revised our process and now have a method that works well and has helped us minimize the number of patient falls. The other main project that we have started is a Needham 3 Newsletter. We developed this to make staff aware of what is going on in the hospital wide councils, changes in practice, also birthdays and other events that are occurring on our floor.

**SDU:** The Step Down Unit has been working on the following projects: Amiodarone IV Pilot, which resulted in a revision of the protocol, development of the Multidisciplinary Goal Sheet, implementation of daily Multidisciplinary Rounding on the medical patients, development and implementation of Step Down On-line flow sheet, revision of the Daily tracking report sheets, monthly fall data review, implementation of Rounding on patients, change of shift rounding with on-going and on-coming nurse with patient.

**Needham 8:** N8 has been working on the following projects; fall reduction, mentoring of chemotherapy for newer staff, development of a bereavement group, improvement of present PCA worksheets, review of press ganey results, and using white boards with names and patient goals.

**GI:** Our primary focus has been a revision of the moderate conscious sedation monitoring record. Our goal is to improve patient flow through the procedure process. Trials will begin soon. Our next project will be to streamline the paperwork involved in emergent on call cases.

**IV team:** Currently working on efficacy of using ultrasound for difficult peripheral IV starts, especially in the absence of IR (evenings and weekends) when a PICC cannot be placed. Collaborated with IR and CT/MRI to develop a competency to flush new Power PICCS. Collaborated with IT and pharmacy to move forward with IV nurses using EMAR.

**MICU:** The council has been working on the following projects: accidental line and tube removal due to delirium, a “Get to know me” board for the patient's and families, resources development for staff on medications and low volume therapies, the candle care program for the bereavement of patient's families, monitoring practice changes with the endotracheal tube holder project, and the implementation of central line cart use.
2010 Annual Nursing Award Nominees

Bernays Award Nominees:
Becky Anthony .......... Walk-In/Diabetic Education
Karen Began ............. Cath Lab
Mary Belliveau .......... Emergency Dept
Wendy Cayton .......... IV Team
Rene Cetrone ......... Wyman 2
Laura Clubb .......... South 3
Kayleen Devine .......... Needham 3
Edie Duffy ............... PACU
Kathleen Fitzgerald ...... S4/Stanton 3

Tiffany Fitzgerald, S4/Stanton 3 (Recipient)
Kerry Fleming .......... MICU
Stephanie James .......... OR
Susan Lazzari .......... Emergency Dept
Mary Leveseque .......... S4/Stanton 3
Mary Beth McCarthy .... Needham 8
Lisa Magane ............... Needham 7
Barbara Maxwell .......... SICU
Christine Moore .......... OR
Nancy O’Brien .......... Needham 8
Heather Slieff .......... MICU
Jennifer Taddeo .......... Needham 8
Ethna Walsh .......... Wyman 2
Nicole Walsh .......... South 3
Laura Willis .......... Needham 7
Lillian Young .......... Wyman 2

Preceptor Award Nominees:
Myrtha Derissant .......... Needham 7
Diane Feeley .......... SICU
Kathleen Fitzgerald .......... S4/Stanton 3
Tiffany Fitzgerald .......... S4/Stanton 3
Teri Hediger .......... SDU

Sue Hoban, Skin Care Nurse Specialist (Recipient)
Patty Lane-Hogan .......... Day Surgery
Grace Li ................. Needham 7
Shelícia McGibbon .......... Needham 3
Maureen McGurty-Rakiey .. Quality & Safety
Rose McGonigle .......... Needham 8
Christine Moore .......... OR

Julie O’Donnell, South 3 (Recipient)
Elizabeth Ramirez .......... Emergency Dept
Joellyn Sullivan .......... Needham 3

Medical Staff Award Nominees:
Mikell Ales .......... Emergency Dept
Karen Avery .......... Travel Medicine Center
Carolyn Campbell .......... GI Unit
Rhonda Falcone .......... MICU
Sue Hoban .......... Skin Care Nurse Specialist
Margaret Martello .......... Quality & Safety
Christine Moore .......... OR
Gail Poirier .......... Quality & Safety
Colette Taylor .......... Needham 8
Nicole Walsh .......... South 3
Chris Zarkadas .......... Nursing Supervisor

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Myrtha Derissant .......... Needham 7
Diane Feeley .......... SICU
Kathleen Fitzgerald .......... S4/Stanton 3
Tiffany Fitzgerald .......... S4/Stanton 3
Teri Hediger .......... SDU

Sue Hoban, Skin Care Nurse Specialist (Recipient)
Patty Lane-Hogan .......... Day Surgery
Grace Li ................. Needham 7
Shelícia McGibbon .......... Needham 3
Maureen McGurty-Rakiey .. Quality & Safety
Rose McGonigle .......... Needham 8
Christine Moore .......... OR

Julie O’Donnell, South 3 (Recipient)
Elizabeth Ramirez .......... Emergency Dept
Joellyn Sullivan .......... Needham 3

Medical Staff Award Nominees:
Mikell Ales .......... Emergency Dept
Karen Avery .......... Travel Medicine Center
Carolyn Campbell .......... GI Unit
Rhonda Falcone .......... MICU
Sue Hoban .......... Skin Care Nurse Specialist
Margaret Martello .......... Quality & Safety
Christine Moore .......... OR
Gail Poirier .......... Quality & Safety
Colette Taylor .......... Needham 8
Nicole Walsh .......... South 3
Chris Zarkadas .......... Nursing Supervisor

Professional Excellence Awardees: April 2009 – April 2010
Anthony Ayag .......... Needham 8
Susan Gregory .......... South 3
Maria Gerth .......... Needham 3
David Kilmain .......... Emergency Department
Teri Hediger .......... Step Down Unit
Ethna Walsh .......... Wyman 2
Karolyn Leblanc .......... South 3
Joyce McGuirk .......... Cardiology
Theresa Benham .......... Emergency Department
Ginny Davis .......... Radiation Oncology
Carly McFee .......... SICU
Lorraine Driver .......... Wyman 2

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