



ENGLEWOOD
HOSPITAL AND MEDICAL CENTER

EXCELLENCE

reimagined



NURSING HIGHLIGHTS 2015-2017

“WE ARE WHAT WE REPEATEDLY DO.
EXCELLENCE, THEREFORE,
IS NOT AN ACT, BUT A HABIT.”

— *Aristotle*



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With the Same Devotion, Excellence Reimagined

Dear Colleagues and Friends,

Evidence-based practice, nursing excellence, quality care and improved patient outcomes form the underpinnings of Magnet®-recognized nursing, which by definition encompasses superior results. Englewood Hospital and Medical Center is among the elite seven percent of healthcare organizations in the United States to earn this prestigious recognition. We celebrated our fourth consecutive designation in May 2016.



Inspired by the exceptional nurses and other healthcare professionals who came before me, I joined the medical center team in January 2016, eager to partner with my new colleagues in a robust pursuit of a new excellence. It is *my great honor* to be a leader in an organization that has been recognized repeatedly for excellence. Standing on the shoulders of giants, the Department of Nursing is well poised for the future.

Nursing was in a period of transition by the conclusion of 2016, as the demands of an uncertain and rapidly evolving healthcare environment framed much of our activity and many of our decisions. This crucial and growing concern underscores the need for what matters most—quality care delivered in a model that includes the best value for the healthcare dollar, delivered by the most educationally prepared and nationally board certified workforce.

As the year ended, we were fully engaged in reenergizing and redrawing our efforts in the provision of the exceptional level of care our patients have come to expect. Without question, exceeding expectations is a hallmark of nursing at our medical center. The development of a new strategic plan for the department, a forward-looking approach to professional development and a heightened emphasis on leading and advancing our profession emerged as top activities by early 2017. The seeds of organization-wide engagement were sown.

It is with pleasure that I present to you *Excellence Reimagined*, a proud account of the Department of Nursing of Englewood Hospital and Medical Center.

With my very best regards,

A handwritten signature in black ink that reads "Mary Ann Donohue-Ryan".

Mary Ann Donohue-Ryan, PhD, RN, APN, NEA-BC
Vice President, Patient Care Services
Chief Nursing Officer



Accolades, Applause & the Apex of Achievement in Nursing

Cheers, applause and confetti filled the Chiang Auditorium during a jubilant celebration of our fourth consecutive Magnet designation, the highest tribute and gold standard for nursing excellence in the United States. This prestigious recognition was announced via speakerphone on May 18, 2016, with Magnet champions, nurse leaders, staff nurses and many medical center leaders in attendance.

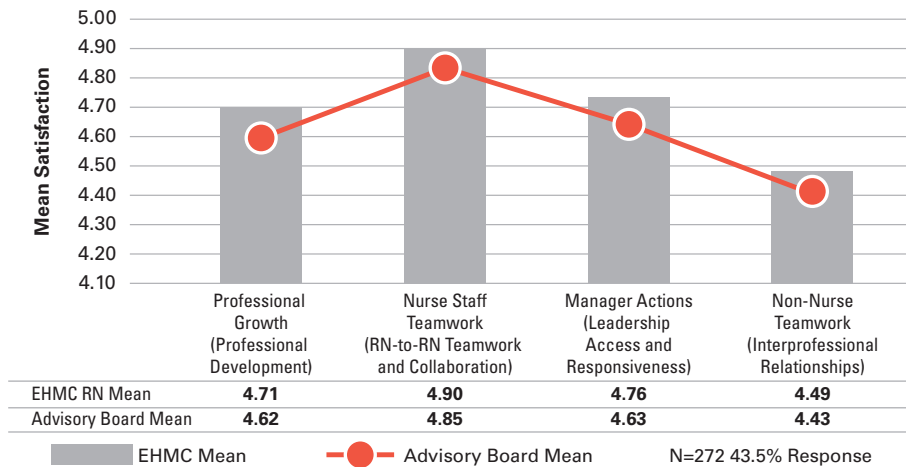
The [American Nurses Credentialing Center \(ANCC\)](#), an organization that has led the way in nursing excellence and quality care for decades, sponsors the [Magnet Recognition Program](#). The ANCC is an international, innovative force that is shaping the future of nursing and healthcare.

Pages and pages of document review and an extensive onsite review by three Magnet surveyors produced numerous accolades. Of special importance were three exemplars, areas of accomplishment that are deemed worthy of being models for other organizations. Exemplars demonstrate the requirement that Magnet hospitals be beacons of inspiration and learning to other healthcare providers.

Back Row: Valerie French, MBA, BSN, RNC; Christine Massey, MSN, RN-BC; Barbara L. Grygotis, MBA, BSN, RN, CNML, FABC; Rosemarie Hill, RN, MSN, CEN; **Front Row:** Alma Baird, BS, RN; Terry Bertolotti, MSN, RN, CEN; Mary Ann Donohue-Ryan, PhD, RN, APN, NEA-BC; Celeste Ann Bethon, MS, RN, NEA-BC

2016 Magnet Exemplars

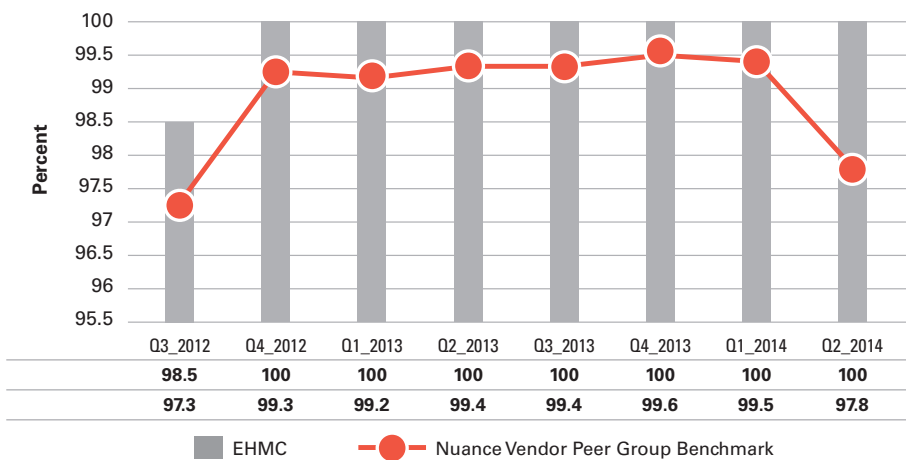
EHMC RN Satisfaction Organizational Results, December 2013



Nurse Satisfaction and Engagement

Nursing outperformed the national mean for all nurse subscales, as measured by the Advisory Board, a highly regarded research firm and consultancy.

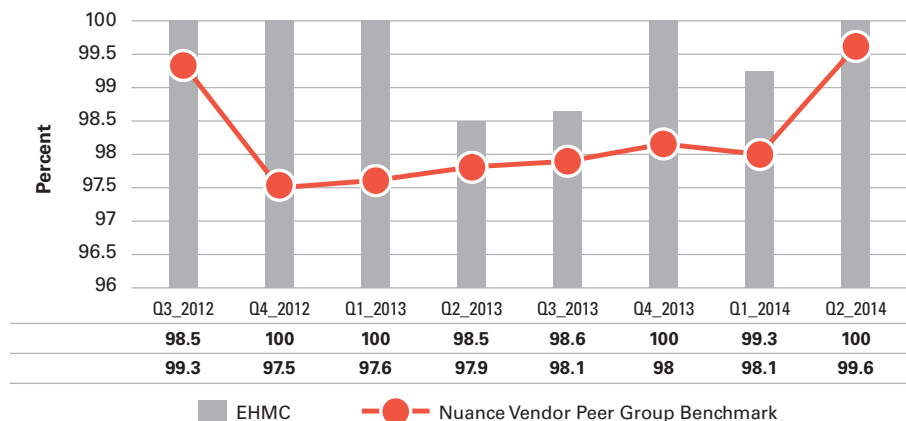
AMI-Aspirin At Arrival



Aspirin Use Upon Arrival in Acute Myocardial Infarction

The hospital outperformed the Nuance Vendor's national median benchmark statistic for all eight quarters measured.

Specialty Outpatient Surgery (Berrie)
Outpatient Antibiotic Timing-Prophyl. Antibiotic rec'd within 1 hour prior to surgical incision (overall rate)



Outpatient Antibiotic Timing and Prophylactic Antibiotics Used Prior to One Hour before Surgery

Our clinical indicator for specialty surgery also outperformed the median benchmark statistic for the same timeframe.

Magnet Champions

Lindie Abdon, RN
Mother/Baby

Nelio Abdon, RN
8 Dean

Lisa Barrale, RN
CVICU

Elizabeth Beddoe, RN
Endoscopy

Trisha Boylan, RN
MSICU

Michele Mourao, RN 8
Dean

Elizabeth Casagrande, RN
Labor & Delivery

Brianne Deptuch, RN
2 Kaplen

Roseangela DiTaranto, RN
Mother/Baby

Diane Gawlik, RN
Berrie Pre-Post

Joan Giampavolo, RN
Cardiac Rehab

Sharyn Grant, RN
Berrie OR

Nancy Harper, RN
Pediatrics

Anna Hatzikyriakou, RN
4 Dean

Donna Hennessy, RN
Radiation Oncology

Precious Inay, RN
Emergency Department

Sue Jackson, RN
CVICU

Thea Le Grande, RN
Wound Center

Michelle Lindsay, RN
Infusion

Denine Long, RN
2 West

Hyun-ah (Melanie) Kim, RN
2 Kaplen

Susan Maher-Dzieman, RN
NICU

Kim Mangano, RN
Main OR

Joanne Moldt, RN
CVICU

Mary Mozia, RN
6 Dean

Nancy Muldowny, RN
NICU

Virginia Murphy, RN
CVICU

Geraldine Neiderhofer, RN
Pediatrics

Margaret Nolan, RN
Pre-Admission Testing

Heidee Remo, RN
Hemodialysis

Evangeline Reyes, RN
Cardiac Cath

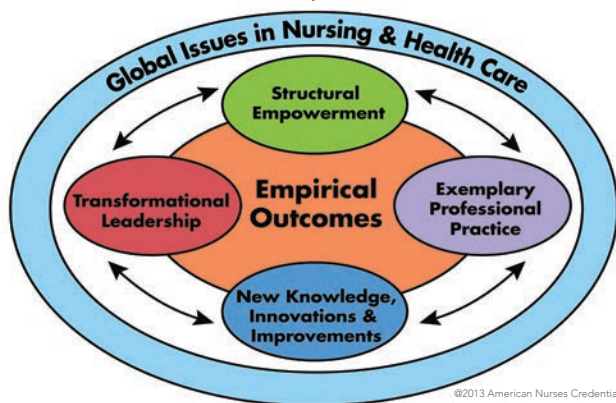
Susan Riordan, RN
Interventional Radiology

Suzanne Scheidegger, RN
MSICU

Ena Scrivani, RN
4 East

Debbie Tamburro, RN
Cardiac Rehab

Jamie Valdez, RN
7 Dean



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Hospital-Wide Awards & Recognitions 2015-2017



Magnet Recognition
American Nurses
Credentialing Center
Four Consecutive
Terms Since 2002



Best Regional Hospitals
U.S. News &
World Report
2016-17 & 2017-18
Includes New Jersey
and New York City



CareChex
Medical Excellence and
Patient Safety Awards for
Multiple Specialties and
Overall Surgical, Medical
and Hospital Care



Healthgrades
Excellence Awards and
5 Stars in Multiple
Services



**Leapfrog Hospital
Safety Grade**
Straight A's 2012-17
12 Consecutive
Recognitions



**HealthCare's
Most Wired**
4-Time Winner
2014, 2015, 2016, 2017



Pearl Pacursa, BSN, RN; Arlene Keys, BSN, RN, CEN; Mary Mcguire, RN

Transformational Leadership

Transformational leaders are redesigning their organization's values, beliefs and behaviors to meet the demands of the future at a time when healthcare is undergoing unprecedented change. Vision, influence, clinical knowledge and expertise in professional nursing practice are required. These leaders guide others through turbulent times and the creation of atypical solutions. They must be able to listen, challenge, influence and affirm as change occurs.

Project: Split Flow

Goal: Increase patient satisfaction for treat-and-release patients in the Emergency Department (ED) while maintaining the highest standards for quality and patient safety.

Action: Develop a more efficient process with a defined and streamlined focus to decrease throughput time.

The Emergency Department Council was established to better serve the needs of ED patients and their families. This nurse-led council, which consists of nurses, techs, volunteers, greeters, physicians and physician assistants, provides a unique collective perspective.

The need to separate treat-and-release patients from those to be hospitalized was identified as key to improving the patient experience for individuals who were not admitted. Any improvement would be initiated within the context of an ED that admits a high percentage of its patients, 24.8 percent in 2016. Based on past experience and projections, Englewood Hospital and Medical Center will continue to deliver care at a level more often found at larger hospitals, including trauma centers.

A new ED tracking board was created with staff input. A split screen now provides fast track nurses with a view of the waiting area and treatment rooms, allowing for an improved response to the needs of patients and colleagues. Nurses transitioned to a new way of thinking about their role in patient flow.

Results:

- Decreased throughput time.
- Fewer patients leaving without care.
- Increased percentage of patients being treated in fast track.
- Greater job satisfaction for ED nurses.
- Better planning for the future as the hospital's acuity level continues to rise.

Patient Care Executive Committee

Mary Ann Donohue-Ryan,
PhD, RN, APN, NEA-BC

Celeste Ann Bethon,
MSN, RN, NEA-BC

Theresa Bertolotti,
MSN, RN, CEN

Barbara Crowley,
DNP, RN, APN

Valerie French,
BSN, MBA, RNC-LRN

Rosemary Hill,
MSN, RN, CEN

Christine Massey,
MSN, RN-BC

Advanced Practice Nurses

Freida Arias-Topalian,
MSN, RN, APN

Pamela Cordero,
MSN, RN, APN

Jill Cox,
PhD, RN, APN-C, CWOCN

Allison Coyle,
BSN, MS, RN, APN

Susan DeGennaro,
MS, RN, APN, OCN

Josemy Ebreo-Ferrer,
BSN, RN, MARTS, APN

Leilani Feliciano, MSN, MA,
RNC-OB, APN-C, WHNP-BC

Eileen Harvey, MS, RN, APN

Anna Lang, MSN, RN, APN

Patricia LoPinto, MSN, RN

Diane Lubinski, MSN, RN, APN-C

Janet Mantel,
MSN, RN, APN, CWOCN

Patricia Mazzola, MSN, RN,
FNP-BC, CNM, APNG-C

Kellie McGuire O'Shea,
BSN, MS, RN, APN

Julie Melia,
BSN, MA, MS, RN, APN

Bridgette Mitchell, MSN, RN

Cynthia Mulder, MSN, RN, APN

Jennifer Murphy, MSN, RN, APN

Deborah Neufville,
BSN, MSO, RN, APN

Wen-Chiao Peng, MSN, RN, APN

Robyn Preziosi, MSN, RN, APN

Sharon Roche, PhD, RN,
APN-C, CCRN

Lisa Salandra-Birnbaum,
MSN, RN, APN

Leah Sandhaus, MSN, RN,
WHNP, APN-C, APNG

Marie Sarubbi,
BSN, MA, ANP-BC, ONP-C

Lisa Sonzogni,
MSN, RN, APN-C, APNG

Sharyn Tondel,
DNP, RN, ANP-C, ONC, AHNC

Frances Vela-Cantos,
BSN, RN, MARTS, APN

Christine Weiselberg,
DNP, RN, FNP-BC

Nurse Managers & Assistant Nurse Managers

Rose Alvarado, BSN, RN

Denise Arzoomanian,
MSN, RN, CEN, MICN

Reynaldo Azores, MSN, RN

Alyssa Beadle, BSN, RN

Elizabeth Cattani, MSN, RN-BC

Christina DeMarco,
MSN, APN, AOGNP

Roseangela DiTaranto,
MSN, RNC-MNN

Amy Evans, MSN, RN

Filmore Flores, BSN, RN

Jordia Foster, MSN-Ed, RN

Jackienette Gonzalez,
MSN, RNC-OB

Nicole Johnston, BSN, RN

Alice Joseph, MSN, RN, APN

Christine Kata,
MSN, PCCN, CNML

Linda Leighton,
MSN, RN, APN

Michele Mourao, MSN, RN-BC

Andreá Smith, MSN, RN

Rocelyn Solatorio,
BSN, MS, RNC-OB, C-EFM

Jodie Steuth,
BSN, RN, ONC

Nursing Administrative Supervisors

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BSN, RNC

Zahava Cohen, MSN, RNC

Prince Dankwah, MSN, RN

Abigail Ferrer,
BSN, MAN, RN, CCRN

Mercedittas Mallari,
MSN, RN

Cassandra Martin-Walters,
MSN, RN

Betsy Pietropaoli, BA, RN

Anne Rutkowski, MSN, RN
Marites Villondo, MSN, RN
Rose Welyczko, BSN, MA, RN

Nurse Educators

Teresa Sharlene Bangwa,
MSN, RN

Erline Everett,
MSN, ANP, RN-BC

Debra Golaszewski,
MSN, RN, CCRN

Alicia B. Jablonsky,
BA, BSN, RN, CNOR, LNC

Mary Lloyd, MSN, RN, CNE

Dorothy Meehan,
MSN, APN, CCRN

Karen Rafti, MSN, RN-BC

Ebony Samuel,
MSN-Ed, RN-BC

Rose Trojkovich,
BSN, RN, CNOR

Barbara Wiklinski,
EdD, RN, CNE

Nursing Leaders Throughout the Organization

Constance Abate, BSN, RN

Shulika Alonzo, BSN, RN

Debbie Carberry, BSN, RN

Eula Demetra Bergado,
BSN, RN, MM, CCRN

Jacqueline Blauvelt,
MSN, RN

Patricia Brigley,
BSN, RN, COHN-S

Jenifer Browne BSN, RN

Theresa Chun, BSN, RN

Cio Dela Riva,
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Linda Finocchiaro,
BSN, RN, CIC

Kathy Garcia, MSN, RN

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Alice Gonzalez, RN

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BSN, MBA, RN, CNML

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MSN, RN

Maryellen Jahnke, RN

Maureen Jaworski,
BSN, RN

Lorraine Johnson,
BSN, RN-BC

Kathy Kaminsky,
MS, RN, NEA-BC

Cindy Louis-Jean,
BSN, RN

Gail Lundy, BSN, RN

Cristina Lutas, MSN, RN

Maria Magallanes, BSN, RN

Jennifer Morgan,
BSN, RN

Denise Morris,
BSN, MS, RNC-NI

Cathy Muir-Quinn,
BSN, RN

Mary O'Connor,
BSN, RN, CDE

Sherri Ozawa, RN

Mary Peterkin, BSN, RN

Lisa Rios, LPN

Claire Rizzo, JD, RN

Jean Santostefano,
BSN, RN

Diana Seymour,
BSN, RN

Marylou Soriano,
BSN, RN

Marietta Suganob,
BSN, RN

Leah Thomas, BSN, RN

Diana Torres,
BSN, ONC, RN

Felicia Villari, BSN, RN

Sara Wagner,
BSN, RNC-OB

Mary Ellen Walter,
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Colleen Wojna, BSN, RN

Michelle Wu, BSN, RN

Lactation Consultants

Rosabel Aldana,
MSN, RN, IBCLC

Betty Dicker,
MSN, MA, RN, IBCLC

Teresa Mancuso,
BSN, MA, RN, IBCLC

Safiyah McCain,
BSN, MA, RN, IBCLC

Pat Sterner,
MSN, RN, IBCLC



Jenifer M. Browne, BSN, RN; Claire Rizzo, JD, RN; Jacqueline Blauvelt, MSN, RN; Kathy Garcia, MSN, RN

Structural Empowerment

Solid structures and processes developed by influential leadership provide an innovative environment where strong professional practice flourishes. Mission, vision and values are actualized to achieve the outcomes valued as important for the organization. Nursing practice is strengthened further through strong relationships and partnerships with all types of community organizations that improve patient outcomes and the health of the communities served. The organization's strategic plan, structure, systems, policies and programs provide the infrastructure for success. Staff members need to be developed, directed and empowered to achieve desired outcomes. Challenges and solutions are diverse; one size does not fit all.

Project: Code Sepsis

Goal: Identify and implement best practices in the treatment of sepsis.

Action: Initiate in-house improvement and host educational conference attended by Englewood Hospital and Medical Center staff and healthcare professionals from the metropolitan area.

The medical center joined the New Jersey Institute for Quality and Patient Safety Sepsis Learning Action Collaborative in March 2015. Participation afforded rich opportunities for information sharing and discussion with 73 healthcare organizations. Concurrently, the medical center established a multi-disciplinary team, which included nurses, attending

physicians, managers, advanced practice nurses, resident physicians, patient care assistants, educators, pharmacists and emergency medical technicians.

Nurses, who are key to the identification of sepsis, mobilization of the medical team and implementation of interventions, were at the forefront of several improvements.

Results:

- A house-wide sepsis protocol.
- Adoption of the BEST algorithm.
- Improved nursing worksheet.
- Better workflow for all disciplines.
- Sepsis education.
- Sepsis pocket card for physicians.

A Larger Commitment

Englewood Hospital and Medical Center expanded its commitment to advancing sepsis care in October 2016 with *Code Sepsis: Early Detection and Treatment is Key*. The program offered CME credit and nursing contact hours. The eager audience included more than 100 acute, post-acute and community physicians, nurses, EMS professionals and other healthcare providers.

Speakers included representation from the medical center and keynote speaker Clifford S. Deutschman, MS, MD, FCCM, an internationally recognized sepsis expert, who provided valuable and new insights into lifesaving care for sepsis patients.



Nelio B. Abdon, BSN, RN; Michele Mourao, MSN, RN-BC

Protégés

Marilyn Carino-Fosque, BSN, RN
Sarah Corby, BSN, RN
Brienne Deptuch, BSN, RN
Anoush Kalachian, BSN, RN
Anali King, BSN, RN
Danielle Leahy, BSN, RN
Lucille Marcelo, BSN, RN
Heather Martin, BSN, RN
Meghan McDermott, BSN, RN
Miracheal Nazar, BSN, RN
Alyna Pineda, BSN, RN
Ivy Punla, BSN, RN
Sheranina Reyes, BSN, RN
Sevara Ruzehaji, BSN, RN
Adrian Tiongson, BSN, RN
Halley Tower, BSN, RN
Jessa Zgonbick, RN

Mentors

Noemi Balancio, BSN, RN
Trisha Boland, BSN, RN
Carol Boutillier, BSN, RN
Laura Duffy, BSN, RN
Marianne Espejo, BSN, RN
Amy Evans, MSN, RN
Erline Everett, MSN, RN, BC, ANP
Patricia Gatto, BSN, RN, CCRN
Suzanne Jackson, MSN, RN, CCRN
Sue Maher-Dzieman, BSN, RN
Ruth Marcello, BSN, RN
Michele McLaughlin,
MSN, RN, CPAN
Nancy Muldowney, BSN, RNC
Lolita Munez-Caladio, RN
Ann Nestman, RNC
Christopher Ortiz, BSN, RN
Joan Pan, BSN, RN
Patty Patti, BSN, RN
Sara Palamatton, BSN, RN
Marta Poznanska, MSN, RN
Mary Tandler, BSN, RN
Adele Thomas, BSN, RN, BC

Certified Nurses

Mary Ann Donohue-Ryan, RN

Lindie-May F. Abdon, RN
Carol A. Afford, RN
Michelle L. Agustin, RN
Becky S. Ahn, RN
Alexis G. Alcober, RN
Caridad Alvarez-Figueroa, RN
Rose Maria Alvarado, RN
Maria Gina Ambulo, RN
Ernestina M. Amoah, RN
Eneida Andujar, RN
Karen L. Antequera, RN
Anne Marie Ayala, RN
Reynaldo Azores, RN
Mylene A. Baello, RN
Alma Baird, RN
Ma Virginia Baliguat, RN
Alice L. Barden, RN
Karen M. Barkley, RN
Sacha R. Barraca, RN
Lisa A. Barrale, RN
Joyceline E. Batay, RN
Rowena C. Bautista, RN
Elizabeth C. Beddoe, RN
Eula Demetra M. Bergado, RN
Theresa A. Bertolotti, RN
Celeste Ann Bethon, RN
Barbara A. Birkevaag, RN
Elizabeth O. Boateng, RN

Karen G. Boutillier, RN
Patricia A. Boylan, RN
Kenneth H. Brereton, RN
Patricia A. Brigley, RN
Kathleen N. Cahill, RN
Joan G. Calantone, RN
Beth G. Caligdong, RN
Margaret Calzaretta, RN
Mae A. Carlson, RN
Michelle C. Caropolo, RN
Iris Carros, RN
Elizabeth A. Casagrande, RN
Elizabeth Cattani, RN
Eun Choon Chang, RN
Mihyang Cho, RN
Bonnie Chung, RN
Kate H. Chung, RN
Zahava Cohen, RN
Barbara A. Comito, RN
Lauren C. Daddetto, RN
Josephine M. Damalerio, RN
Prince Dankwah, RN
Pamela K. DelColle, RN
Christina DeMarco, RN
Mary L. DeRitter, RN
Rosemarie S. Diaz, RN
Roseangela DiTaranto, RN
Maureen A. Dombkowski, RN
Lauren H. Dotson, RN
Susan M. Doyle, RN

Eleanor A. Dunn, RN
Jean M. Engelmann, RN
Jessica M. Epifano, RN
Florian F. Estive, RN
Evelyn R. Evangelista, RN
Katarina M. Feeley, RN
Leilani E. Feliciano, RN
Edmee C. Feril, RN
Abigail Q. Ferrer, RN
Luz Fiel, RN
Filmore Flores, RN
Evelyn M. Forbes, RN
Valerie French, RN
Linda A. Fritz, RN
Lucy D. Galland, RN
Caryn-Lynn Gallione, RN
Adriana Gambino, RN
Ton A. Garcia, RN
Patricia A. Gatto, RN
Elena Geltzer, RN
Susan P. George, RN
Megan L. Gerin, RN
Rosita Germoso, RN
Sheila T. Ginley, RN
Judith E. Gioia, RN
Cathi S. Goldfischer, RN
Denise Goldstein, RN
Jackienette Gonzalez, RN
Chevon L. Gray, RN
Donna M. Grotheer, RN

Certified Nurses *Continued*

Barbara Grygotis, RN
Renante G. Gumabon, RN
Regina M. Gynegrowski, RN
Clara M. Ha, RN
Leigh A. Hartung, RN
Anna Hatzikyriakou, RN
Katherine L. Hauptman, RN
Cheryl M. Hernandez, RN
Rosemarie Hill, RN
Shalva Hirsch, RN
Laura M. Hogan, RN
Precious G. Inay, RN
Suzanne Jackson, RN
Stephanie A. Jansen, RN
Ellen M. Johnston, RN
Latoya R. Johnson, RN

Nicole Johnston, RN
Alice Joseph, RN
Christine A. Kata, RN
Katherine Katz, RN
Laura E. Kelly, RN
Lisa K. Kenny, RN
Arlene Keys, RN
Kyungsook Kim, RN
Dina M. Kitun-Parry, RN
Barbara J. Kontos, RN
Irina V. Kravetskaya, RN
Victoria J. Krizek, RN
Birgit Sofia Landers, RN
Rosemary A. Latawiec, RN
Kyounghee Lee, RN
Thea T. LeGrande, RN
Linda Leighton, RN
Catrin M. Leins, RN
Iris S. Lin, RN
Ermelinda F. Llantada, RN
Mary T. Lloyd, RN
Denine M. Long, RN
Sylvia I. Lopez, RN
Rona E. Lowy, RN
Veronique M. Lynch, RN
Norberta E. Maine, RN
Monica A. Mallen, RN
Evelyn Manalili, RN
MaryAnn Maricic, RN
Annmarie Martin, RN

Linda R. Maslanka Duffy, RN
Cassandra Martin-Walters, RN
Christine M. Massey, RN
William Matos, RN
Marguerite A. Mattessich, RN
Patricia L. Maurer, RN
Michele A. McLaughlin, RN
Nadege Mednard, RN
Daphne R. Meikle, RN
Seda Melikyan, RN
Ethel Wolda T. Mendoza, RN
Mercedittas Mallari, RN
Joanne M. Moldt, RN
Raul A. Montes de Oca, RN
Michele S. Mourao, RN
Nancy E. Muldowney, RN
Margaret Murphy, RN
Mary Frances Murphy, RN
Geraldine A. Neiderhofer, RN
Ann M. Nestman, RN
Amma Nkrumah, RN
Daryl B. Oclaret, RN
Sherri Ozawa, RN
Sandra S. Palin, RN
Yoonhee L. Park, RN
Elizabeth A. Pietropaoli, RN
Michael F. Piser, RN
Rose S. Pizzi, RN
Claudia A. Portnoy, RN
Joanne Preiss, RN



Jeanne M. Price, RN
 Helen T. Puno, RN
 Karen R. Rafti, RN
 Annunziata Ragusa, RN
 Jeanna N. Ramilo, RN
 Caren L. Remsa, RN
 Aurea S. Reyes, RN
 Laurencita P. Reyes, RN
 Sharon J. Roche, RN
 Alessandra I. Rodriguez, RN
 Nancy Rossi, RN
 Erlinda P. Rubio, RN
 Mary E. Rufo, RN
 Anne Rutkowski, RN
 Terttu L. Sahadi, RN
 Yvette S. Samba, RN
 Denise M. Scaglione, RN
 Suzanne C. Scheidegger, RN
 Judith L. Schuster, RN
 Ena T. Scrivani, RN
 Peter J. Sebastian, RN
 Tanya R. Servidio, RN
 Marina Shabashkevich, RN
 Maryjo K. Sharples, RN
 Maryanne Shea, RN
 Soonho K. Shin-Kwak, RN
 Abeer H. Shin, RN
 Alice Shu, RN
 Jekyeong Sim, RN
 Annmarie E. Simon, RN
 Erwina S. Sinag, RN



*Left: Elizabeth Matthews, RN; Daisy Macadaeg, BSN, RN
 Above: Mariola Castillo, BSN, RN; Filmore Flores, BSN, RN; Laura Duffy, BSN, RN*

Jodie Steuth, RN
 Ample D. Smith, RN
 Margaret A. Smith, RN
 Rocelyn D. Solatorio, RN
 Elaine M. Sonzogni, RN
 Linda P. Sta. Maria, RN
 Dianne N. Steele, RN
 Leslie E. Stewart, RN
 Maria I. Stratigis, RN
 Laura A. Symons, RN
 Heather A. Tamburro, RN
 Irminda D. Tanion, RN
 Adele L. Thomas, RN
 Marissa G. Tomboc, RN
 Brenda M. Torres, RN
 Diana Torres, RN
 Sandra L. Trainor, RN

Elaine L. Van Buren-Rizzo, RN
 Leena R. Varghese, RN
 Harrietta T. Venegas, RN
 Lynda M. Venetos, RN
 Hilda Verano, RN
 Catherine L. Verhulst, RN
 Marites Villondo, RN
 Mary Ellen K. Walter, RN
 Rose Welyczko, RN
 Yu Wen, RN
 Barbara J. Wiezik, RN
 Thomas J. Wilkos, RN
 Janet O. Wright, RN
 Michelle F. Wu, RN
 Maria Sandra Yglesias, RN
 Wan Hyuck Youh, RN

Scholarships

AILEEN S. WILSON NURSING SCHOLARSHIP

2015, 2016

Jennifer Guzman, RN
Nancy Wienberg, BSN, RN

2017

Blessy Pathrose, BSN, RN
Brianna Deputch, BSN, RN

CADMUS-VREELAND NURSING SCHOLARSHIP/ GEORGE ELLIOT TRUST FUND

2015, 2016

Paula Vargas, RN

2017

Theresa Lee, BSN, RN

CLARA LEE OLSEN NURSING SCHOLARSHIP

2015, 2016

Generosa Hurtarte, RN

2017

Ena Scrivani, BSN, RN

FRIENDS OF DR. WILLOUGHBY

2015, 2016

Virginia Ingram, BSN, RN
Chikara Iwuagwu, RN

GEORGE ELLIOT TRUST FUND

2015

Thomas Helm, RN
Vivi Nguyen, BSN, RN
Paula Vargas, RN



Above: Nancy Harper, BSN, RN; Geraldine Neiderhofer, RN, CPN

Right: Wan Wouh BSN, OCN; Barbara Cruz, BSN

GEORGE ELLIOT TRUST FUND

2017

Melanie Kim Hyun-ah,
BSN, RN

LAURA PHIPPS STUDENT NURSE SCHOLARSHIP

2015

Vivi Nguyen, BSN, RN
Mary Ellen Wymer, RN

2016

Vivi Nguyen, BSN, RN

2017

Michele Mourao, MSN, RN

WOMAN'S CLUB OF ENGLEWOOD

2015

Lauren Dotson, BSN, RN, BC

WOMAN'S CLUB OF ENGLEWOOD/GEORGE ELLIOT TRUST FUND

Mary Ellen Wymer, RN

WOMAN'S CLUB OF ENGLEWOOD/ LAURA PHIPPS STUDENT NURSE SCHOLARSHIP

2016

Lauren Dotson, BSN, RN, BC

WOMAN'S CLUB OF ENGLEWOOD/SANDRA & DAVID BISHOP NURSING AWARD

2015

Mary Mozia, MSN, RN
Veronica Pomasin, BSN, RN

2016

Mary Mozia, MSN, RN

2017

Alysia Heller, BSN, RN
Virginia Ingram, BSN, RN

Nursing Services Awards

2015

Rising Star

Vanessa Lee, RN
MSICU

Nursing Team
CVICU & Infusion

Leadership
Cynthia Mulder, MSN, RN, APN
Pain Management

Excellence in Nursing Research
Mary DeRitter, MSN, RN, CNL
NICU

Collaborative Practice
Linda Leighton, MSN, RN, APN
Patient Care Director
4 East

Community Outreach
Wan Hyuck Youh, RN
4 Dean

Leadership
7 Dean Care Managers

Nursing Practice
Teresa Mancuso, BSN, MA, RN,
IBCLC, Lactation Consultant
Mother-Baby

Patient Care Management
Vivi Nguyen, BSN, RN
7 Dean

2016

Rising Star
Tanya Fernandez, RN
7 Dean

Leadership
Norberta Maine, RN
4 East

Rocelyn Solatorio, BSN, MS,
RNC-OB, C-EFM
Assistant Patient Care Director
Maternal-Child Health

Excellence in Nursing Research
Jill Cox, PhD, RN, APN-C,
CWOCN
Sharon Roche, PhD, RN, APN-C,
CCRN

Collaborative Practice
Yu Wen, RN
2 Kaplen

Community Outreach
Ena Scrivani, RN
4 East

Nursing Practice
Julie Mathew, RN
7 Dean
Elaine Van Buren-Rizzo, RN
MSICU

Patient Care Management
Michelle Caropolo, RN
Mother-Baby
Frances Vela-Cantos, RN,
MARTS, APN

Nursing Services Team
2 Kaplen & 7 Dean Care
Coordination Team

2017

Rising Star
Macarena Gonzalez, BSN, RN
Mother-Baby

Hope Jansson, BSN, RN
MSICU

Adrianna Harulaj, BSN, RN
Cardiac Cath Lab

Anoush Kalachian, BSN, RN
2 Kaplen

Leadership
Mylene Baello, MS, BSN, RN
Emergency Department

Linda Leighton, MSN, RN, APN
4 East

Collaborative Practice
Femi Francis, BSN, RN
4 East

Community Outreach
Ruth Marcelo, BSN, RN
4 East

Nursing Practice
Lisa Donne, MSN, RN
PACU

Patient Care Management
Lilane Bergstein, BSN, RN
Mother-Baby

Hilda Verano, BSN, RN
Critical Care Float



Awards & Honors ***2015***

ICU Care Managers
Tribute to Nurses
Caring and Compassion Team
Inaugural Event/The Record

Hospital-Wide
Gold Award
Sharing Network

Vivi Nguyen, RN
Daisy Award

2016

Sigma Theta Tau

Alice Joseph, RN
Mary Fran Murphy, RN
Linda Sta. Maria, RN

You Make the Difference

2015

Jackienette M. Gonzalez,
MSN, RNC-OB
Labor & Delivery

Arlene Keys,
BSN, CEN
Emergency Department

Veronique Nixon-Lynch,
BSN, CCRN
Emergency Department

2016

Barbara Cruz, BSN, RN
4 Dean

Brendt De St. Paer,
BSN, RN
6 Dean

Anna Hatzikyriakou,
BSN, RN-C
4 Dean

Patricia Kutner Fiume,
BSN, RN
Cardiac Cath

Jon-Kerwin Lagasca,
BSN, RN
8 Dean

Julie Mathew, BSN, RN
7 Dean

Jessica Ortiz,
MSN, RN
6 Dean

Christine A. Weiselberg,
DNP, RN, FNP-BC
Breast Center

Jeff Yalun, BSN, RN
8 Dean

Sandra Yglesias, BSN, RN
Labor & Delivery

2017

Anoush Kalachian,
BSN, RN
2 Kaplen

Jamie Lee, BSN, RN
8 Dean

Elaine Van Buren-Rizzo,
MSN, RN, CCRN
MSICU

New Degrees 2016

Mila Frejoles, MSN, RN
Family Nurse Practitioner
Fairleigh Dickinson University

Linda Geraghty, MSN, RN
Family Nurse Practitioner
William Paterson University

Alice Joseph, MSN, RN
Adult Geriatric Nurse Practitioner
William Paterson University

Mary Fran Murphy, MSN, RN
Adult Geriatric Nurse Practitioner
William Paterson University

Linda Sta. Maria, MSN, RN
Adult Geriatric Nurse Practitioner
William Paterson University

Nancy Wienberg, BSN, RN
Bachelor of Science in Nursing
Fairleigh Dickinson University

New Degrees 2017

**Adult Nurse Practitioner
William Paterson University**

Sung Yeon Choi, MSN, RN

Linda P. Fajardo, MSN, RN

Michelyne Gavin, MSN, RN

Linda J. Geraghty, MSN, RN

Jennifer Guzman, MSN, RN

Rachele P. Isip, MSN, RN

Alice Joseph, MSN, RN

Helen M. Meehan, MSN, RN

Barbara R. Millo, MSN, RN

Mary Magdalene
N. Mozia, MSN, RN

Mary Frances Murphy, MSN, RN

Jessica Ortiz, MSN, RN

Diana V. Palacio, MSN, RN

Lorna B. Pazziuagan, MSN, RN

Veronica F. Pomasin, MSN, RN

Jung-Hee Sang, MSN, RN



Top Row:

Shakila Lewis, BSN, RN;
Ann Nestman, BSN, RN;
Jane Dimasso, RN

Second Row:

Laurencita Reyes, MSN, RN;
Ruth Marcelo, BSN, RN;
Anna Hatzikyriakou, BSN, RN;
Lauren Dotson, BSN, RN;
Wemimo Akingbade, MSN, RN;
Macarena Gonzalez, BSN, RN

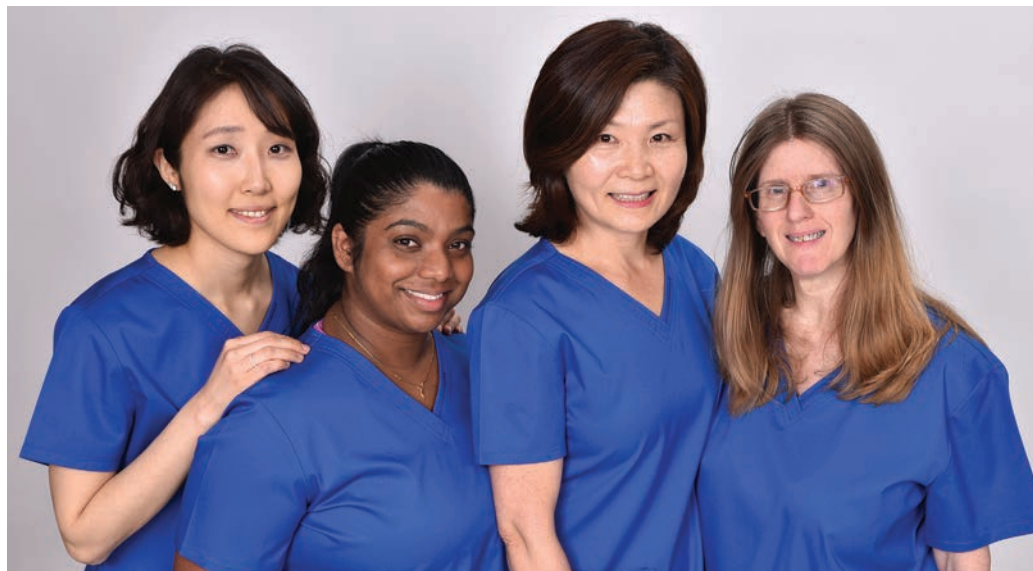


Third Row:

Jayne Spurdis, RN;
Rona Lowy, RN;
Elizabeth Rodriguez, BSN, RN;
Theresa LaSpina, BSN, RN;
Brianne Deptuch, BSN, RN;
Sheena Reyes, BSN, RN

Bottom Row:

Yoomi Kwon, MSN, RN;
Julie Mathew, BSN, RN;
Yuna Kim, BSN, RN;
Diane Liccardo, BSN, RN





Back Row: Valerie French, MBA, BSN, RNC; Jackie Gonzalez, MSN, RNC-MNN;
Leilani Feliciano, MSN, MA, RNC-OB, APN-C, WHNP-BC
Front Row: Maria Sandra Yglesias, BSN, RNC-OB; Maria Gina Ambulo, RNC-OB

Exemplary Professional Practice

Exemplary professional practice is the true essence of a Magnet organization. The goal of this component is not just the establishment of strong professional practice, but what that professional practice can achieve. The attainment of exemplary professional practice requires a comprehensive understanding of the role of nursing; the application of that role for patients, families, communities and the interdisciplinary team; and the application of new knowledge and evidence.

Project: AWHONN Postpartum Hemorrhage Collaborative Project

Goal: Improve recognition, readiness and response times for postpartum hemorrhage.

Action: Using an evidence-based approach, adopt and implement recommended practice standards and modify management of all obstetrical patients to improve outcomes and increase patient safety.

Englewood Hospital was one of 31 hospitals in New Jersey to participate in the 18-month-long project. The multidisciplinary effort, which was led by a maternal-child health advanced practice nurse and the director of clinical research and IRB, included

representation from numerous departments in addition to all nursing postpartum staff members.

Results:

- Completion of required postpartum hemorrhage online education by every member of the nursing and ancillary staff in Labor & Delivery, Mother-Baby and MCH Floats.
- Development of a strategically located hemorrhage cart, which contains the necessary supplies and equipment should an obstetric hemorrhage occur.
- Development and implementation of the Obstetric Hemorrhage Protocol and Multidisciplinary Massive Hemorrhage Protocol for Obstetric Patients.
- Implementation of the 3-Step Postpartum Hemorrhage Risk Assessment Checklist for all patients admitted to Labor & Delivery.
- Quantification of maternal blood loss for high-risk patients in Labor & Delivery.
- Completion of five multidisciplinary postpartum hemorrhage/massive hemorrhage practice drills in Labor & Delivery and Mother-Baby during 2015 and 2016, for a total of ten.



*Joanne Moldt, BSN, RN-BC; Virginia Murphy, BSN, RN, CCRN;
Dorothy Meehan, MSN, RN, APN-CCRN*

New Knowledge, Innovation & Improvements

Strong leadership, empowered professionals and exemplary professional practice are required for Magnet designation. Magnet organizations have an ethical and professional responsibility to contribute to patient care, the organization and the profession through new knowledge, innovation and improvement. Existing systems and practices need to be redesigned and redefined to foster future success. New models of care, the application of existing evidence, new evidence and visible contributions to the science of nursing are fundamental to Magnet nursing. Quality improvement is the overarching goal for this component.

Project: NxStage Transition for CRRT in ICUs

Goal: Replace the unsatisfactory continuous renal replacement therapy system (CRRT) used for the critically ill.

Action: Select and implement a new system.

Collaboration among nurses and physicians in 2015 included the formal identification of significant shortcomings for the existing CRRT for the critically ill and the formation of a multidisciplinary team to study challenges and initiate change.

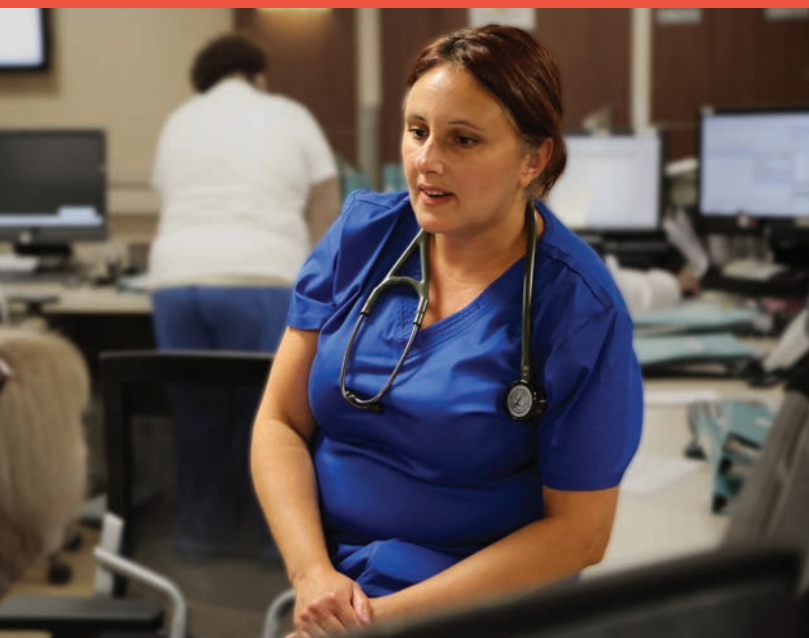
The team included intensivists, nephrologists and staff nurses, in addition to the critical care patient

care director, advanced practice nurse and nurse educator. Several nurses attended the American Association of Critical-Care Nurses National Teaching Institute to evaluate the NxStage System One dialysis machine. Advantages were determined to be ease of use and ongoing competency, fewer education hours and a lowered cost for disposables.

The team leads traveled to Massachusetts to become NxStage-certified educators. User education was the next step. The nurses conducted eight hours of the NxStage Trainer Workshop onsite, resulting in six super users, who provided coverage on all shifts during implementation. Staff capability was enhanced further by a four-hour training course for nurses experienced with the older system.

Results:

- Revised nursing protocol, flow sheet and order set.
- Twice-yearly return demonstration and troubleshooting as part of ongoing competency validation.
- An eight-hour course for new users.
- Completion of transition to NxStage by July 2016.
- Exceptional job satisfaction for nurses regarding their contributions and the results.



Annunziata Ragusa, BSN, RN-CHPN

A Resounding Success of Epic Proportions

In 2017, Englewood Hospital embarked upon an *Epic* journey – the implementation of one of the nation’s leading electronic medical record (EMR) platforms across our hospital and physician practices. More than 190 million patients nationally have a current electronic record in the *Epic* system, and our Englewood Hospital patients and the staff who care for them truly deserve—and now have—the very best EMR technology available.

Nursing, central to the project’s success from the start, continues to be deeply involved at the forefront of our *Epic* initiative. Leadership created and set the agenda for more than 40 clinical workflow discussion groups, which involved frontline staff nurses at the unit level, including Med/Surg (ClinDoc), Emergency Department (ASAP), Labor & Delivery (Stork), Mother-Baby and NICU (Stork and ClinDoc), and Perioperative Services (OpTime).

Several nursing leaders were identified to serve as credentialed trainers, teaching 12 weeks of intensive classes available around the clock. Well over 1,000 nurses, patient care assistants and patient care secretarial assistants began training in their respective specialty’s *Epic* applications, with more than 120 super users training twice with additional classroom facilitation.

To support the *Epic* go-live on the weekend of March 3, 2018, leaders and one hundred-plus super users, care managers, staff nurses and other clinical volunteers assisted with a variety of cutover activities. The super users support their peers with a 24/7 schedule for a full two-week period after go-live, smoothing out any rough spots and greatly enhancing the resounding success of the *Epic* implementation.

An Artful Approach to Preventing Falls

Nurses and other members of the patient care team are integral to the reduction of patient falls. Despite best efforts and evidence-based strategies, sustained improvements in inpatient fall reduction have been elusive. To assist staff with their dedication toward falls reduction, a pilot using video monitoring was initiated on 4 Dean in December 2017. Video monitoring has emerged as a viable patient safety intervention for reducing the number of falls and the use of sitters. Eight cameras were installed in select patient rooms, and nursing staff and patient care assistants received education on the benefit of video monitoring.

21st Annual Nursing Research Evidence-Based Practice Conference

November 20, 2015

Finding the Evidence to Promote Patient
Focus and Quality Outcomes

Co-Chairpersons

Susan DeGennaro, MS, RN, APN, OCN
Barbara Wiklinski, EdD, RN, CNE

Conference Committee Members

Carol Boutillier, RN
Carol Eastman, RN
Erline Everett, MSN, RN, BC, ANP
Suzanne Jackson, RN
Karen Rafti, MSN, RN, BC
Christine Massey MSN, RN-BC
Lia Sabbagh, MLS
Michelle Wu, BSN, RN, ONC
Kathleen Vollman, MSN, RN, CCSN,
FCCM, FAAN

KEYNOTE SPEAKER

*The Future is Now: Designing your Practice
to Maximize Impact on Patient Outcomes*

Kathleen Vollman, MSN, RN, CCSN,
FCCM, FAAN

*Exploring the Relationship between
Vasopressor Administration and Pressure Ulcer
Development in Adult Critical Care Patients*

Jill Cox, PhD, RN, APN-C, CWOCN
Sharon Roche, PhD, RN, APN-C, CCRN

Back to the Basics: Getting There with Science

Kathleen Vollman, MSN, RN, CCSN,
FCCM, FAAN

*A Formula for Frontline Quality:
Patients + Nurses + Evidence*

Kathleen Stevens, EdD, RN, ANEF, FAAN

*What is the Evidence? Best Practices
to Support Patient Centered Care*

Susan Salmond, EdD, RN, ANEF, FAAN

22nd Annual Nursing Research Evidence-Based Practice Conference

November 4, 2016

Evidence to Practice to Outcomes:
Connecting the Dots

Co-Chairpersons

Susan DeGennaro, MS, RN, APN, OCN
Barbara Wiklinski, EdD, RN, CNE

Conference Committee Members

Carol Boutillier, RN
Thanie Callas, Administrative Assistant
Carol Eastman, RN
Erline Everett, MSN, RN-BC, ANP
Suzanne Jackson, RN
Christine Massey, MSN, RN-BC
Lia Sabbagh, MLS
Michelle Wu, BSN, RN, ONC

KEYNOTE SPEAKER

*Implementation of Evidence-Based Practices:
Myths and Realities*

Marita Titler, PhD, RN, FAAN

The High-Reliability Clinical Enterprise

Katherine Virkstis, ND

Evidence-Based Practice: Stories from the Field

Kathleen Vollman, MSN, RN, CCSN, FCCM, FAAN



Emilie Tobias, RN



Cynthia Cazeau, BSN, RN

Poster Presentations

Utilizing the Iowa Model of Evidence-Based Practice to Promote Quality Care: The Effects of Holistic Modalities for Post-Op Pain Management in Patients Undergoing Elective Surgical Procedures

Kathy Faber, MSN, RN, CNL,
Clinical Nurse Leader, PICU

Lora A. Lee-Baker, RN, Resource Nurse,
Ambulatory Surgery Center, St. Joseph's
Healthcare System

Advancing Research and Evidence Based Practice through a Ten-Year Collaborative Journey of Magnet-Designated Hospitals

Christine Massey, MSN, RN-BC, Interim
Director, Center for Nursing Practice
Barbara Wiklinski, EdD, RN, CNE, Joint
Practice Clinician, Englewood Hospital and
Medical Center

The Impact of a Patient's ICU Admission on the Caregiver's Wellbeing: A Literature Review

Saternik Kaprelian, Nursing Student,
Bloomfield College

23rd Annual Nursing Research Evidence-Based Practice Conference

November 17, 2017

Jointly provided with the **Northern New Jersey Nursing Evidence-Based Research Consortium, for the 9th Annual Nursing Evidence-Based Research Consortium Conference**

Integration of Research for Safety of Patients and Nurses

Co-Chairpersons

Susan DeGennaro, MS, RN, APN, OCN
Barbara Wiklinski, EdD, RN, CNE

Conference Committee Members

Carol Boutillier, RN
Carol Eastman, RN
Erline Everett, MSN, RN, BC, ANP
Suzanne Jackson, RN
Christine Massey, MSN, RN-BC
Lia Sabbagh, MLS

KEYNOTE ADDRESS

Evidence-Based Fall Prevention
Patricia Dykes, PhD, MA, RN

Walking the Patient into the Operating Room and the Relationship to Anxiety, Self-Efficacy and Patient Satisfaction

Bonnie Weinberg, MSN, RN, CNOR

Enhancing Patient Safety through Accurate Electronic Weight

Janet Pagulayan, MSN, RN

Utilizing Best Practices to Increase the Percentage of Total Joint Replacement Patients Discharged To Home

Nicole Reyes, BSN, RN
Bernadette Johnson, BSN, RN
Mabel Laforgia, DNP, RN

Patient Positioning in Bed: Ergonomic Implications for Patient and Caregiver Safety
Neal Wiggerman, PhD

Self-Reported Competence of Entry Level Registered Nurses

Pam Pascarelli, DNP, RN-BC, APN, CCRN

Pressure Injuries in the Critically-Ill Population: Exploring the Gaps Between Research and Practice
Jill Cox, PhD, RN, APN-C, CWOCN

ENDNOTE ADDRESS

The Lewis Blackman Story: A Mother's Journey in Patient Safety
Helen Haskell, MA

Research Projects

Amiodarone Induced Phlebitis in Cardiac Surgery Patients

Principal Investigator:
Jung-Hee Sang, MSN, RN

Bedside Shift Report and Rates of Patient Falls on Medical Surgical Units at a Community Medical Center: A Correlational Study

Principal Investigator:
Erline Everett, MSN, RN, BC, ANP

Charting Compliance and Fidelity on Intentional Rounding of Nursing Staff in a Medical-Surgical Unit

Principal Investigator:
Veronica Pomasin, MSN, RN

Comprehensive Care for Joint Replacement (CJR) - Patient Reported Outcomes Surveys

Principal Investigator:
Kathleen Kaminsky, MS, RN, NEA-BC

Patients' Perceptions of Feeling Safe and Length of Stay in the Cardiothoracic Intensive Care Unit (CTICU) after Coronary Artery Bypass Graft Surgery (CABG)

Principal Investigator:
Linda Sta. Maria, MSN, RN, APN, CPAN

Postoperative Delirium in Elderly Patients Following Orthopedic Surgery and its Effect on Length of Hospitalization

Principal Investigator:
Helen Meehan, MSN, RN, ANP-C, PCCN

Pressure Ulcers in the Critically Ill: A Survey of ICU Nurses

Principal Investigator:
Jill Cox, PhD, RN, APN-C, CWOCN

Promoting Assessment of Urinary Incontinence

Principal Investigator:
Rachele P. Isip, MSN, RN, ANP

Reducing Return of Patient Undergoing Stereotactic Breast Core Biopsy

Principal Investigator:
Florence Campbell, ANP, APN-C, RN, FNP

The Effectiveness of Implementing a Respiratory Support Protocol Unit Using Noninvasive Positive Pressure Ventilation

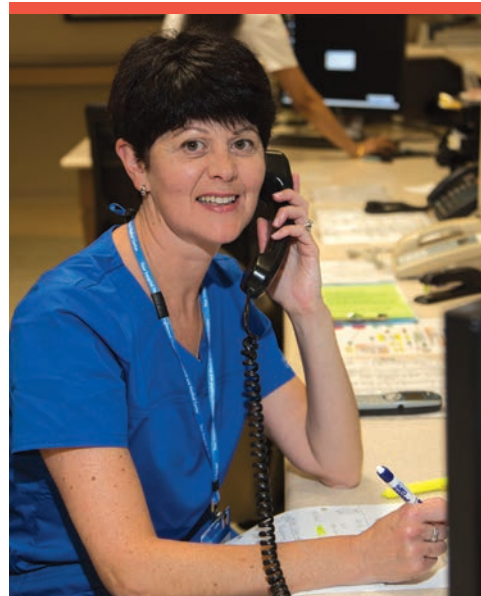
Principal Investigator:
Mary Mozia, MSN, RN, ANP

The Effectiveness of Visual Cues in Improving Hand Hygiene Compliance

Principal Investigator:
Lorna Pazziuagan, MSN, RN

Unavoidable Pressure Ulcers in ICU Patients: A Descriptive Analysis

Principal Investigator:
Jill Cox, PhD, RN, APN-C, CWOCN



Liliya Kantorovich, BSN, RN



Christian Ortiz, BSN, RN

Presentations

All In! Enhancing Nursing Professional Development Practice Through a Consortium of Magnet Hospitals in Academia

Donna Flynn, DNP, RN, ACNS-BC,
CCRN Ramapo College
Christine Massey, MSN, RN-BC
Nicole Sardinias, MSN, RN, CCRN
Jersey City Medical Center
Association of Nursing Professional
Development *Aspire to Excel*
Las Vegas, Nevada, July 2015

Implementation of a Surgical Safety Checklist

Elizabeth Cattani, MSN, RN-BC
Implementing Transitional Care
Models into Practice
Michelle Wu, BSN, RN, ONC
7th Annual Joint Northern New Jersey Nursing
Evidence-Based Research Consortium Conference
Jersey City Medical Center,
Jersey City, New Jersey, September 2015

Leadership Rounds: A Process for Sustaining Professional Practice

Erlene Everett, MSN, ANP, RN-BC
Christine Massey, MSN, RN-BC
New Jersey Council of Magnet Organizations
Organizations Conference on Exemplary
Professional Practice – Conference Toolkit for
Advancing Your Professional Practice
St. Joseph's Regional Medical Center,
Paterson, New Jersey, April 2015

The Relationship between Vasopressor Administration and Pressure Ulcer Development in Adult Critical Care Patients

Jill Cox, PhD, RN, APN-C, CWOCN
National Teaching Institute and Critical Care
Exposition: American Association of
Critical Care Nurses
San Diego, California, May 2015



Top Left:
Patricia Zisa, BSN, RN;
Lindie-May Abdon, BSN, RN-MNN;
RoseAngela DiTaranto, MSN, RN,
RN-MNN; Theresa Carullo, BSN, RN
Top Right:
Johannah O'Connell, BSN, RN



Middle Left: *Bohyun Woo, RN; Sylvia Lopez, MSN, RN, CEN*
Middle Right: *Wendy Osur, BSN, RN; Nancy Rossi, RN, CGRN;*
Linda Dilucci, RN, CGRN
Bottom Left: *Michelle Edades, BSN, RN; Heidee Remo, BEN, RN*
Bottom Right: *Mary Petrelli, RNC-OB; Judy Schuster, RNC-OB*



Above: *Laura Kelly, BSN, RN-BC, CCRN; Erline Everett, MSN, RN-BC, APN; Jessica Ortiz, BSN, RN*
Right: *Michelle A. Lindsay, BSN, RN; Rulijo Legaspi, RN*

Empirical Quality Outcomes

A strong structure and processes are foundational in the Magnet model. The focus is now on the outcomes of these structures and processes, including how these results compare to benchmarks. Simply put, the question for the future is “what difference have you made?” Magnet-recognized organizations are in a unique position to become pioneers of the future and to demonstrate solutions to numerous problems inherent in our healthcare systems today. They do this through innovative structure and various processes and should be recognized for their inventiveness. Outcomes need to be categorized in terms of clinical outcomes related to nursing, as well as workforce, organizational, patient and consumer outcomes. When possible, data already collected by the organization should be utilized. Quantitative benchmarks should be established.

Project: Medical-Surgical Council Fall Prevention Task Force

Goal: Reduce falls on Medical-Surgical units.

Action: Conduct multidisciplinary in-depth data analyses related to

falls, identify potential initiatives to enhance a culture of safety within the organization and provide feedback to council members and unit staff.

In 2015, the fall rate for the Medical-Surgical units (8D, 7D, 6D, 4D, 2K) was 3.5 per 1,000 patient days, with a fall with injury rate of 0.49 per 1,000 patient days. The Behavioral Health Unit fall rate was 7.06 per 1,000 patient days, with a fall with injury rate of 0.42 per 1,000 patient days.

The evidence-based Fall/Injury Prevention Nursing Protocol was reviewed and approved in 2015. The council decided to create a multidisciplinary Falls Task Force that would include representation from nursing staff, advanced practice nurses, rehabilitation medicine, pharmacy, quality management and the Medical-Surgical Nursing Council. Patient care directors chair the group.

The task force held its first meeting in April 2016. All members reviewed and agreed to its purpose and goals. Monthly meetings included webinars presented by the Partnership for Patients-NJ 2.0, Fall Preven-





Above: Arlene Fragante, BSN, RN; Hee Jin Kobayashi, BSN, RN
Right: Brenda Virtusio, BSN, RN

tion Learning Action Group, with faculty led by the distinguished Patricia C. Dykes, PhD, RN, FAAN, FACMI, of Brigham and Women's Hospital. Dr. Dykes presented programs on three of her proven fall prevention efforts. Follow-up coaching webinars facilitated support and best practice sharing for hospitals seeking to implement these strategies. Highlights from each of the meetings, including fall data analyses, were presented at the monthly Medical-Surgical Council meetings.

Results:

- Decreased fall rates for 2016 for both the Medical-Surgical (3.28 per 1,000 patient days) and Behavioral Health (5.39 per 1,000 patient days) units.
- The redesign of the task force to include unit-based champions in 2017, as well as an overall review of goals and plans in light of changes in the organization.

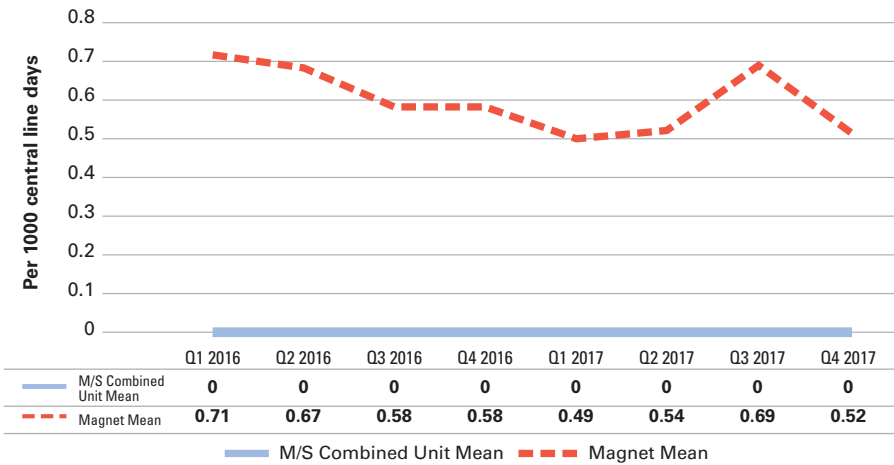
**“THE FUTURE
OF NURSING
AND THAT OF
HEALTHCARE
ARE THE SAME –
EXCITING!”**

*– Dr. Mary Ann
Donohue-Ryan*

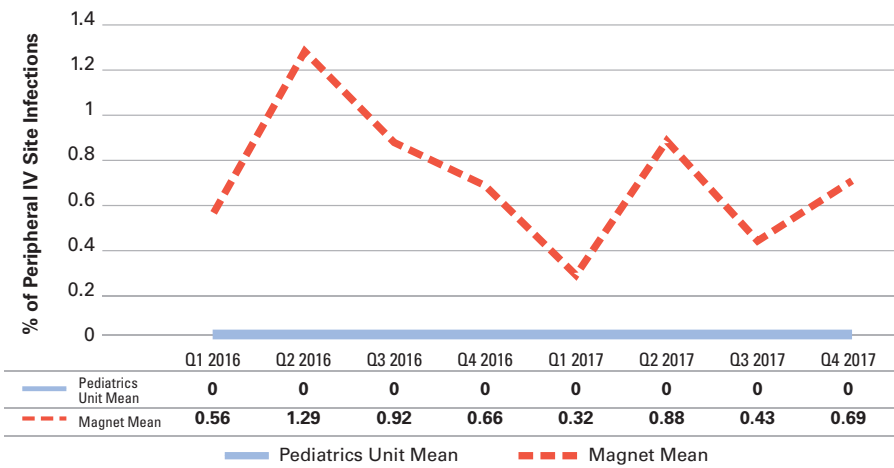
***The Steady Hand of
Evidence-Based PI***

Rates of CLABSI (central line associated bloodstream infections) remained low, due to evidenced-based process improvement initiatives such as weekly dressing changes, audits, weekly reports and focus review presentations at the divisional council meetings. Positioned at the frontline of care, nurses not only provided contact care, but patient education about infection control techniques. The health-care team also implemented proper infection control practices, including the appropriate insertion, utilization and maintenance of catheters.

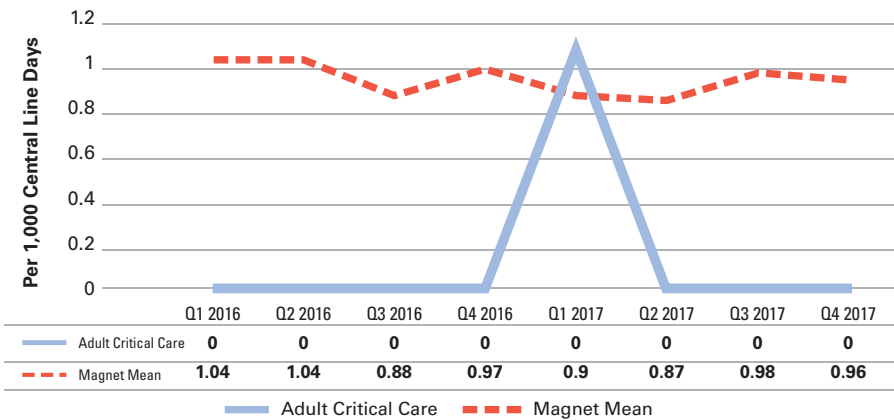
Central Line Associated Blood Stream Infections - Med/Surg Combined 2016/17



Percent of Peripheral IV Sites with Infiltrations - Pediatrics 2016/17



Central Line Associated Blood Stream Infections
Per 1,000 Central Line Days - Adult Critical Care Combined 2016/17





**“ONE CAN NEVER
CONSENT
TO CREEP
WHEN ONE
FEELS AN IMPULSE
TO SOAR.”**

– Helen Keller

Above: Rose M. Welyczko, BSN, MA, RN

Right: Katherine Rozas, RN; MaryFran Reinfried, RN

Our Nursing Councils: Leading the Way to a Dynamic New Excellence

The nursing council model at Englewood Hospital and Medical Center includes managers, staff nurses and professionals from departments other than nursing who make consequential decisions that shape patient care in far-reaching ways. Council involvement by nurses enriches their practice, and is basic to our forward-looking approach to professional development.

Nurse autonomy, an essential element of Magnet nursing, is strengthened by the council structure, which embodies our deeply held principle that every nurse is a leader. Ten councils are at the forefront of the development of a dynamic new excellence that will anticipate and meet the challenges of today and the future.

A Zero CAUTI Rate for Med/Surg

There was no simple solution at hand when the [Medical-Surgical Council](#) directed the effort that reduced the CAUTI rate in Med/Surg to zero percent in 2015. The intervention included the participation of the infection prevention nurse at all of

the council's meetings, as well as regular review of related protocols and data regarding compliance. Weekly leadership rounds were also a venue for implementation of this evidence-based approach.

The excellent results of the initiative, which were double the original goal of a 50 percent reduction, were based on a variety of factors that produced a culture change. Significant buy-in by staff nurses, a cohesive effort, education and expertise were factors in the project's success.

Empowering the New Staff Nurse Researcher

Consultative services for staff nurses performing clinical research were advanced when two students enrolled in the hospital's William Paterson University Master of Science in Nursing Program and one other staff nurse requested assistance from the [Evidence-Based Practice/Research Council](#). IRB submissions and study design and feasibility were among the topics explored in a project that incorporated opportunities





for professional development for new and experienced nurse researchers, in addition to quality improvement in patient care. Nursing leaders provided mentoring for the nascent nurse researchers through one-on-one, small group and council meetings, and ongoing support.

Clean & Concise Outpatient Orders

A heightened emphasis on improving the way in which outpatient orders are produced resulted in order templates that standardized and vastly improved non-chemo orders for infusion and interventional radiology. The [Outpatient Council](#) led the effort

to reduce treatment errors and authorization and scheduling delays due to an unsystematic, non-computerized process, which was fraught with illegibility, inconsistencies and errors.

Nurses identified types of errors, engaged and educated physicians, revised literature for standardized orders and developed numerous templates.

Nurses Conduct Primary Research

The [Evidence-Based Practice/Research Council](#) spurred the launch and completion of a retrospective, descriptive study focusing on the risk factors associated with unavoidable pressure

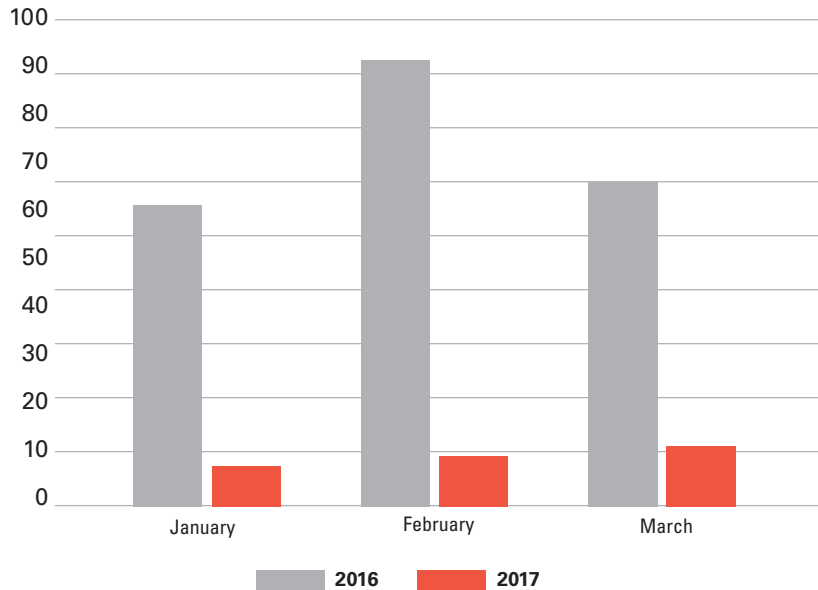
injuries in the critically ill and the subsequent submission of the study to a clinical journal. Data was abstracted from the electronic medical record and documented on a data collection tool designed for the study. The results lend support to the occurrence, or fact and frequency, of the unavoidable pressure injury, especially in the vulnerable critical care population.

Staff nurses, working alongside advanced practice nurses, contributed as specially trained data collectors and in the role of co-investigator.

Improved Care, Better Quality of Life

Improving nutrition, hydration and quality of life for patients with head and neck cancer was a goal well met by a multidisciplinary team led by the [Outpatient Council](#). Now, all such patients are routinely apprised at the beginning of treatment of the possibility and circumstances of percutaneous endoscopic gastrostomy. This education is part of a carefully drawn protocol that includes early identification of the need for a feeding tube and steps for optimal care. The

Wayfinding: Number of Lost Visitors Navigation to the Critical Care Units



project, which relieved physician offices of the responsibility of initiating the procedure, resulted in a tightly closed loop managed by hospital staff that benefits patients, the medical team and physician offices.

Wayfinding Study Benefits Patients, Families & Caregivers

The growing number of visitors who became lost navigating their way to critical care units was decreased by 88 percent, thanks to a [Critical Care Council](#) wayfinding project. The council sought to provide a less stressful experience for family members and friends, one in which they

would reach their loved one's bedside best able to provide emotional support. Also at issue were the consequences of such disturbances for nurses, who were often busy with performing important duties such as dispensing medication, charting or handoff communication.

A multidisciplinary effort led by council members implemented evidence-based solutions such as redesigned and color-coded signage and visitor passes, and volunteers specially trained to assist visitors.

For more council highlights, see Transformational Research (p. 9) and Empirical Quality Outcomes (p.33).

Left: *Jeanna Ramilo, BSN, RNC-OB; Josephine Damalerio, BSN, RNC-OB*
Below: *Jon-Kerwin Lagasca, BSN, RN*



Excellence Reimagined
is a publication of the Department of Nursing of
Englewood Hospital and Medical Center.
Many individuals from across the medical center and other
hospital friends also worked enthusiastically to make
this report possible.

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THE FUTURE OF NURSING and that of healthcare are one and the same. A high level of **energy, intelligence** and **talent** are among the top qualities nurses require to meet the challenges and seize the opportunities of today's rapidly changing healthcare environment. **Professional certification** is a primary tool in the provision of quality care. To reach their full potential, **nurses must believe** in their profession and perform at their **personal best**.

The attainment of each of these attributes is a **milestone** on the journey to a new excellence at Englewood Hospital and Medical Center.



Evangeline Reyes, BSN, RN

**“EXCELLENCE IS TO DO A COMMON THING
IN AN UNCOMMON WAY.”**

– Booker T. Washington



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