



2019 NURSING ANNUAL REPORT



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Message from our Chief Nursing Officer



Dear Colleagues,

Welcome to the 2019 Nursing Annual Report for Mather Hospital. Once again, we are very proud to share this report as we reflect upon the exceptional care that is delivered by the nurses here at Mather to our patients and the community.

In looking back on our journey since our last annual report, I am proud of our accomplishments. We continue to hire clinical nurses and transition to practice nurses at Mather to join our collaborative team.

The role of the professional nurse is the hallmark of Mather. The foundations of nursing at Mather are reflected and demonstrated in our professional practice model. In this report we share examples how our nurses participated with evidence-based practice and research and processes which implemented changes in practice. Mather nurses partner with other healthcare professionals in the community to advance our vision to be a leader in transforming health care for our patients. As a Magnet® designated organization, our nurses are the "gold standard" in leading health care.

I value the ongoing and open conversations I have with the nurses regarding their practice environment, which includes opportunities to make innovative improvements. As we dialogue and engage in shared decision making, we continue to reinforce our culture of nursing excellence and professionalism.

On behalf of the nursing team here at Mather, we hope you enjoy learning about the important contributions of our nurses and our vision to be a leader in the region and nationally recognized in transforming health care.

Professional Practice Model

Sincerely,

Marie Mulligan, PhD, RN, CNOR,

mare muligan to

NEA-BC CNO Vice President for

Nursing

Facts and figures

80% of clinical nurses hold a BSN degree

46% of clinical nurses are certified

74% of nurse leaders are certified

HCAHPS top box scores 2019

87th percentile for all nursing indicators in New York peer group

HCAHPS top box scores 2019

86th percentile for responsiveness of hospital staff in New York peer group

Achieved 92nd percentile for courtesy of nursing assistants within New York peer group

Mather Hospital is a twice-designated Magnet® organization. Magnet recognition is a performance driven credential and an organizing framework for nursing and patient care excellence. Approximately 8% of all registered hospitals in the United States have achieved ANCC Magnet Recognition status.



Medicare/Medicaid Service awarded Mather Hospital a Four-Star Rating for Patient experience.

2 East Bariatrics/Telemetry received the North Star 90 Award from Northwell Heath for achieving the 90th percentile nationally for patient experience.







Transformational Leadership



ANCC National Magnet Conference®



Each year, the American Nurses Credentialing Center (ANCC) sponsors the National Magnet Conference®. The conference embodies the theme "Educate. Innovate. Celebrate." The conference was held October 10-12, 2019 in Orlando, Florida. There were more than 2200 abstracts submitted with topics including: igniting innovation, improving the work environment by prioritizing wellness, and mindfulness workshop effects on nurses' burnout and stress. There were over 10,000 attendees from around the globe with more than 150 poster sessions and 70 educational and innovative concurrent sessions.

In addition, Marie O'Brien, MSN, ANP-C, RN-BC, CCRN and Patricia Dodd, AGNP-C had the prestigious distinction of presenting their work; "Improving the Image of Pain Care Through Advanced Nursing Practice." Their presentation was very well received.



Nassau-Suffolk Hospital Council 2019 Nurse of Excellence Award

Marie O'Brien RN, MSN, ANP-C, CCRN was our nominee for the Nurse of Excellence Award. Marie is the Coordinator of the Integrative Pain Management Service and is certified in Pain Management from ASPMN, and Critical Care Nursing (CCRN) from the American Association of Critical Care Nurses (AACN). She is also a Certified Clinical Hypnotist from the National Guild of Hypnotists. She has received advanced training in Pain Coping Skills (PCST), which are holistic interventions aimed at improving quality of life for patients with chronic pain. In addition, Marie volunteers as a healthcare consultant and program



development specialist for a not-for-profit organization producing live theater, film and creative arts therapy programming. Her role includes providing expertise in the field of integrative pain management; as well as planning educational programs/workshops in drama therapy and cognitive behavioral therapies for pain management. In addition, Marie is recognized as an accomplished nurse researcher in the areas of Pain Management and Holistic Nursing. She has been Principal Investigator of three IRB-Approved Nursing Research Studies.

Zuckerberg Family Award for Nursing Service Excellence

Joan Godbold, BSN, RN-BC was Mather Hospital's nominee for the 2019 Zuckerberg Family Award for Nursing Service Excellence. She has been a clinical nurse in the Adult Psychiatry Unit (2 West) at Mather for 42 years. From the start of her career, Joan has been an advocate for patients and family members suffering from mental illness. Joan is actively involved in quality improvement activities that improve patient outcomes such as an Advisory Board frontline project which helped psychiatric patients overcome self-care deficits related



to personal hygiene and grooming. She was also the co-investigator of a quasi-experimental, IRB approved research study; "Improved Mood States and Feelings Associated with Animal Assisted Activity on an Inpatient Psychiatric Unit". Study findings expanded scientific knowledge related to benefits experienced when patients and staff on inpatient Psychiatric Units interact with specially trained therapy dogs. This study has been accepted for publication by the Journal of the American Psychiatric Nurses Association.

Brookhaven Women's Services Honorees

In celebration of National Women's history month, Brookhaven Town recognizes women for excellence in their endeavors. Mather Hospital's AVP for Behavioral Health, Denise Driscoll, RN-BC, CARN, PMHCNS-BC, NPP was the recipient of the Woman of the Year in Healthcare at the Town of Brookhaven's 33rd Annual Women's Recognition Awards for her work *To Boldly Go: Operation Mental Health in the Public Library*. Her mission included building



partnerships between the public library and local mental health and substance abuse organizations.

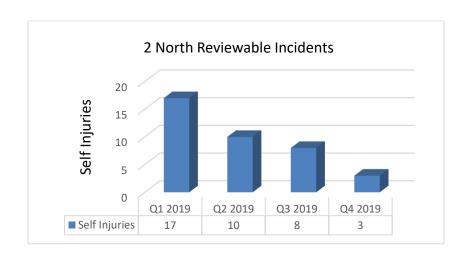
Mather Hospital's Voyage with Northwell

In February 2019, Justin Stroker, BSN, RN, PCCN was appointed as Mather Hospital's first Director of Patient and Customer Experience. As part of the integration between Mather Hospital and the Northwell Healthy system, the Voyage with Northwell was developed by the Human Resources and Patient Experience Departments from Mather Hospital and Northwell Health. Leaders from Northwell Health and Mather Hospital provided Mather employees with education that emphasized the cultural similarities of both organizations. Attendees learned of the history and vision of Northwell Health as well as their promise to employees, team members, patients and families. The Culture of C.A.R.E. is also included which is an acronym for Connectedness, Awareness, Respect and Empathy. Each component demonstrates our commitment to providing patient and family-centered care.

Improving Quality Outcomes in the Behavioral Health Population

The ability of nurses to identify early stages of patient aggression, and successfully intervene, has been shown to improve quality outcomes. These outcomes include safeguarding patients and staff from injury, improving patient satisfaction, decreased length of stay and hospital costs. The 2 North and 2 West unit-based councils discussed the use of the Broset Violence Checklist (BVC) vs. the Dynamic Appraisal of Situational Aggression (DASA) scale. The BVC is a short-term violence prediction instrument assessing confusion, irritability, boisterousness, verbal threats, physical threats and attacks on objects as either present or absent. The higher the BVC score, the higher the risk of violence indication that preventive measures should be taken. The purpose of the DASA tool is to assist in short-term assessment (next 24 hours) for risk of imminent violence in mental health units. It is regarded as simple and quick to use (1-5 minutes per assessment) in day-to-day clinical practice. The DASA scale includes seven items which measure behaviors that have repeatedly exhibited good to excellent predictive accuracy for aggression with good internal consistency and interrater reliability.

Based on the scientific evidence and ease of use, the Behavioral Health staff voted to change current practice from using the BVC to using the DASA scale. Once implemented there was an 82% decrease in self injuries from 17 in 1Q 2019 to 3 in Q4 2019.



TeamSTEPPS®

TeamSTEPPS is an evidence-based framework designed to optimize team performance across the health care delivery system. A large group of Mather Hospital leaders became Master trainers in order to provide educational offerings to the Mather Hospital staff. The key principles include team structure, communication, leadership, situation monitoring, and mutual support. In June 2019 TeamSTEPPS was officially launched and has provided Mather Hospital with a set of teamwork tools aimed at optimizing patient outcomes by improving communication and teamwork skills among health care employees.

Mentoring Program

In 2019, Mather Hospital's Nursing Department launched a new formal Mentoring Program. The program consists of two tracks; one is for entry to practice graduate nurses and the other for new nursing leaders. The goal of the program is to promote professional development and to continue the retention of nursing staff. The core components for new graduates includes socialization into practice, professional growth, career progression, support for EBP, and modeling a "Just Culture". The leadership track includes core components such as leadership role assimilation, succession planning, professional growth, career progression, and promotion of professional involvement.

Marsha Deckman, MSN, RN, NE-BC, ONC is the Clinical Instructor who has been designated as the Site Coordinator. Currently, there are a total of 64 employees participating in the program.







Expressions in Humanism

Mather Hospital's Nursing Department participated in a Northwell Health System initiative on Expressions in Humanism. The Nursing Professional Development Department provided education for registered nurses on Humanism which can be defined as reaching beyond the patient to connect with the person. Humanism incorporates Jean Watson's Theory of Human Caring which is the practice of loving kindness and calmness. It also incorporates authentic presence, cultivating one's own spiritual practices, "being" the caring/healing environment, and being open to unexpected and curious life events.

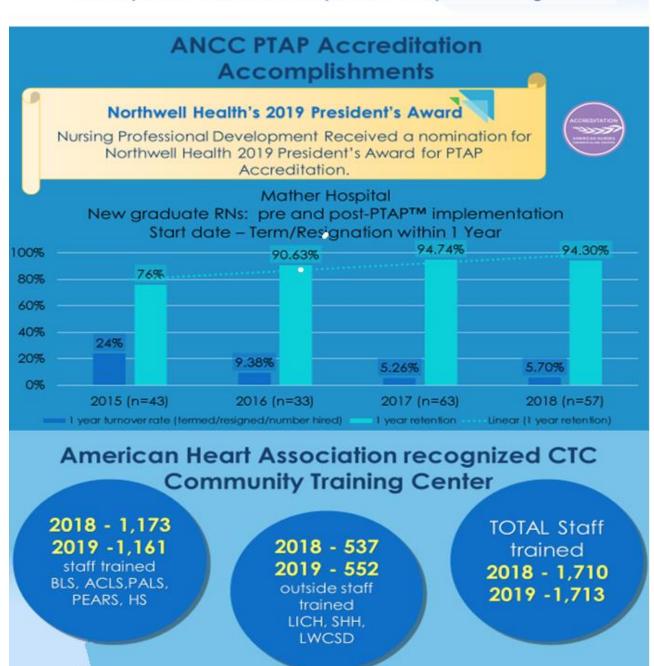
Structural Empowerment

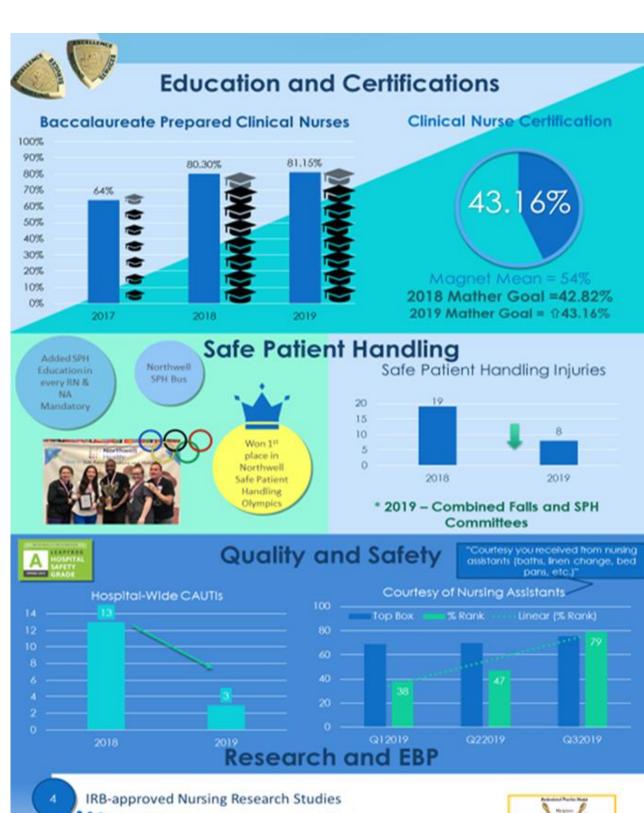


2019 - Mather Hospital **Professional Development Department**



Our team of educators support the changing landscape in healthcare. We are committed and strive to focus on the developmental and educational processes linking NPD standards to the practice of our Magnet® nurses. We demonstrate expertise in promoting competency development, evidence-based practice, and professional growth.







Mather Hospital's Explorer Program







Exploring is a Learning for Life education program for young men and women focused on career education. The Explorers Program at Mather Hospital is focused on introducing health careers to young men and women in grades nine through twelve. Explorers Post 1929 meets on the first Tuesday evening of the month in the Nursing classroom.

Each month a different health career within the hospital is showcased for the young men and women based on their requests. The objective of this program is for the Explorers to hear the speaker's passion about their profession and offer guidance in future classes, pre-requisites, internship opportunities, salary ranges, and other information regarding the featured career. Marie O'Brien, MSN, ANP-C, RN-BC, CCRN; Integrative Pain Management Coordinator/Nurse Practitioner spoke about the different types of pain management modalities offered at the hospital. Animal Assisted Therapy was the topic for March 2019 and Jimmy Crawford from Recreational Therapy discussed how animal assisted therapy is used in the Behavioral Health setting. In April 2019 the explorers assisted Public Affairs by promoting the annual Walk for Life campaign and learned about the use of social media in this department. Explorers also had the opportunity to become CPR certified in May 2019.

Explorer leaders Beth Giordano, CCRN-K, CDE, Katherine Lewin, MS, RN-BC, CCRN, Patricia Alban, MSN, RN, CEN, PCCN, and Director of Volunteer Services Keri Dunne are very proud to provide the community with this educational experience. Mather Hospital is the only hospital Explorer program in Suffolk County!

Geriatric Emergency Department Accreditation

In partnership with Northwell Emergency Medicine Service Line (EMSL), Mather Hospital's Emergency Department (ED) became part of the system-wide initiative to obtain the American College of Emergency Physicians (ACEP) Geriatric Emergency Department Accreditation (GEDA). This first level accreditation was obtained in the summer of 2019 and is the first of three in the driving efforts to provide specialized care for the geriatric population. 33.3% of Mather Hospital's ED patients are 65 years old or older and present with chronic conditions and atypical presentations of diseases. Geriatric Emergency Departments aim to reduce ED and hospital readmission rates, reduce hospital acquired infections, reduce adverse events and improve the standard of care for our patients.



Safe Patient Handling

Safe Patient Handling (SPH) at Mather Hospital is a robust program with involvement of leadership and frontline staff from multiple disciplines and departments. The SPH program includes a "code fall" which is paged overhead to alert a team response when a fall has occurred. In addition, a response cart and algorithm to guide decision making was developed for equipment selection and to have equipment readily available at the time of a fall. Since 2017 there has been a reduction in employee patient handling injuries related to falls as well as a reduction in costs associated with those injuries.

In September 2019 the Code Fall response team presented Mather's SPH program at the Northwell Health SPH and Mobility Conference: A Passport to Workplace Safety. Along with a podium presentation the team lead a variety of fall case scenarios.

In December 2019 the team participated in Northwell Health's third annual SPH Olympics which is a competition to determine the team's ability to move and lift patients properly and safely. Mather Hospital's team earned first place with a near perfect score!





Affiliations with Schools of Nursing



In 2019 Mather Hospital collaborated with 12 Schools of Nursing and placed 245 students for their clinical rotations and 37 students for their capstone and clinical rotations. Students completed their rotations in various departments including Behavioral Health, Critical Care, the Emergency department, Med/Surg, Stepdown, Surgical Services, Telemetry and Ambulatory Care areas on both the day and night shift. In addition, students were placed with nurse leaders throughout the organization to fulfill their clinical time in leadership classes.

Mather Hospital's "Becoming a Nurse" Program

The "Becoming a Nurse" program is an active nursing education program. The goal is to educate community members about a nursing career and the phases involved in the process to become a registered nurse. This program is led by Dr. Judith Moran. In 2019 she worked with 12 individuals and offered multiple sessions which included the history of nursing, nursing theorists, types of nursing programs, the ANCC Magnet Recognition Program®, resume writing, and interviewing skills.

Image of Nursing Program

The Image of Nursing Program is a collaboration with Longwood Senior High School located in Middle Island, New York. In 2019 there were 17 seniors interested in a nursing career who were chosen to participate. The students were provided with an overview of nursing as a career and received education on research and evidence-based practice from Dr. Judith Moran. They also received information on vascular devices from Genine Schwinge, Vascular Access Coordinator and learned about the vein finder from Mary Ferrara, Nurse Manager. In addition, Keri Dunne,



Director of Volunteers provided education on the volunteer program and Anne Doodian, Director of Nursing Recruitment and Retention shared information on the interview process and resume preparation. Students were also provided with a hands-only CPR demonstration.

The Mather Hospital Integrative Healing Room

The Pain Management Nurse Practitioner Program embraces health and wellness across the continuum of care. As advocates for holistic self-care the Pain NPs participated in an interdisciplinary IRB approved research protocol examining the effect of Reiki on the Total Joint Replacement patient and acupuncture for patients with uncontrolled pain. These studies highlighted the positive effect holistic nursing care and integrative interventions could have on patient outcomes. Examining the recommendations identified through these endeavors, the Pain NPs collaborated with Dr. Marie Mulligan, Chief Nursing Officer to secure a central location that could serve as a permanent, tranquil location to offer integrative services such as Reiki and acupuncture for patients and staff. The Integrative Healing Room debuted Nurse's Week 2019 providing relaxation services to Mather's nurses.

The room is staffed by the Integrative Pain Program clinicians. The staff provides Reiki, aromatherapy massage, meditation, acupuncture and clinical hypnosis to promote self-care and relaxation. Dr. Mulligan has provided additional resources in the form of Integrative Care staff, supplies such as aromatherapy essential oils, a massage table, and acupuncture needles to support this program.

The vision of the Pain Program staff is promotion of health and wellness for patients and clinicians. When clinical staff participate in holistic care activities for themselves, they are better able to promote holistic care to their patients. Experiencing these activities first-hand can help staff dialogue with their patients and community members in ways that textbook learning could not achieve.

"Employee Wellness at Northwell is about simplifying the health and wellness journey of every team member through enhanced self-care opportunities, improved health programming and a safe work environment." The Integrative Pain Service has embraced their role in this shared responsibility as a means to educate and promote wellness for staff with the goal of enhancing care at the bedside. Partnering with Nursing Administration through the Integrative Healing Room is the first step in creating a robust employee and community health and wellness program.





Professional certification

The following registered nurses and advanced practice registered nurses are recognized for achieving or maintaining national Board Certification in their specialty area for 2019.

Lori Accetta CCRN	Jessica Lynn Brett RN-BC	Christine DeBernardo RN-BC
Kathleen Adams CDN	Sandra Brown RN-BC	Marsha Deckman NE-BC, ONC
Brenda Lei Agaton RN-BC	Filomena Buncke PMHCNS-BC	Nicole Delvecchio AGPCNP-BC
Patricia Alban CEN, PCCN	Kimberly Buncke PMHNP-BC	Joyce DeMoore RN-BC
Denise Altamore PCCN	Carissa Jo Burke WCC	Susan DeTurris CAPA
Maureen Altieri NEA-BC	Alisa Maria Caliendo NP-C	Kristin Dillon CCRN
Lisa Ambrose NP-C, CCRN	Trisha Calvarese CAPA	Amy Christine Dittler PMHNP-BC
Nicole Amendola PCCN	Dana Cardiello RN-BC	Patricia Dodd NP-C, HWNC-BC,
Marret Ida Anderson, NP-C	Maria Cassara CMSRN	NCCAOM, HN-BC, RN-BC
Sherry Anderson COCN, CWCN, RN-BC*	Irene Cassata CPAN	Annemarie Doodian NEA-BC
Catherine Andolena ONC	Renee Castelli RN-BC	Alyssa D'Oro CCRN
Catherine Audus AGPCNP-BC	Maureen Cataldo PMHCNS-BC	Lisa Doumas PCCN, CCRN
Deborah Aureliano WCC	Emily Cauchi CCRN	Denise Driscoll PMHCNS-BC, CARN, RN-BC
Sigal Ayalon ONC	Maureen Chernosky CEN, CCRN, RN-BC	Lisa Dubrow ANP-BC
Franco Baingan ONC	Laura Chesnowitz CEN	Maria Dutra OCN
Melissa Baranowski CGRN	Nancy Clavin CRNI	Christa Dwyer RAC-CT
Michael Barletta RN-BC	Kristen Clifford CRN	Elyse Erato CCRN
Virginia Barrington WCC	Margaret Coffey FNP-BC	Judee Falcone RN-BC
Tara Bauer CEN	Kelly Coleman CNOR	Sarah Farnworth PCCN
Kim Bauman PCCN-K	Donna Collins CRN	Lorraine Farrell FNP-BC, CCCTM
Laura Jeanne Bell NP-C	Jennifer Ann Colucci RN-BC	Christina Felix CNOR
Deanna Belte CPAN	Patricia Karlya Cordle RN-BC	
Jessica Berkman RN-BC	Domenica Corrado CNOR, FNP-BC	Candice Fella RN-BC, WCC Anthony Ferrara CCRN
Kathleen Biase RN-BC	LoriAnn Crispino CEN	•
Donna Blaskopf CRN, VA-BC	Stephanie Crispino CBCN	Mary Figher CDHO
Michele Bonafede RN-BC	Cassandra Cucuzzo RN-BC	Mary Fisher CPHQ Divina Grace Fordham RN-BC
Denise Bonneville RN-BC	Maria Antonia Cuison WCC	Gloria Fortune PMHNP-BC
LeeAnne Botti PCCN	Rose Cummings CPAN	Sandra Helene Galantino RN-BC
Carole Boyd RN-BC	Richard Daly NP-C	
Donna Bragg CRN	Dalma Daniel WCC	Nicole Helen Geiss RN-BC
Anna Marie Braslow CCRN	Mary Daulton WCC	Nina Gervais CCRN
Jeanne Brennan RN-BC, CNL	Marianna David RN-BC*, ONC	Elizabeth Giordano CCRN-K, CDE
		Kimberly Giordano RAC-CT

Gittens CEN, CRN, VA-BC Eleana Kitz CCRN Darlene McDay NP-C Debra Giulietti CCRN Marianne Kiernan CN-BN, CB-CN Colleen McDermott CEN Dina Giulietti CEN, NEA-BC Maria Kirchner CCRN Kelsey McDonough CCRN Mary Ellen Glennon CCRN, WCC Kirsten Lyn Konsevitch RN-BC Shirlee McKenna CAPA Michael Glinka RN-BC, NEA-BC Christine McKeon CEN Jamie Lin Kotler RN-BC Joan Godbold RN-BC **Austin Kraft CCRN** Phillip Messina NE-BC Nancy Gorgone ONC Krystie Kramer NP-C Kelly Miller CCRN Carrie Grattan OCN Trucy Kuhn PCCN Ken Mills PCCN Marina Grennen CEN Lisa Kuveikis NP-C Komal Mistry CCRN Theresa Grimes RN-BC, FNP-BC, CCRN Jessica Lagala RN-BC Melissa Monaghan CCRN Michelle Gustaferri CEN Vivien Langford CRN Bonnie Moore RN-BC Gina Hannon PCCN Anne Lasota RN-BC, ONC Judith A. Moran NE-BC, RN-BC Donna Hardwicke RN-BC Armando Lastra WCC Susan Morin PMHCNS-BC Lauren Ann Harris RN-BC Joanne Lauten SCRN, CPHQ Marie Mulligan CNOR, NEA-BC Stacey Hartcorn CEN **Debra Ledeoux CCDS** Christine Mulvey CNOR Margaret Hassett CAPA Mary Elizabeth Lennon ABCGN Rosa Nania WCC Elise Haussel CNOR Katherine Lewin CCRN, RN-BC Aleksandra Nappo CNOR Patricia Hebron FNP-BC Chhiu Mei Liu COCN, CWON, NP-C Alain Montesa Neri ANP-BC Kathleen Herrera RN-BC Laura O'Brien CRN Marigrace LoMonaco RN-BC Stacy Heuschneider NP-C Michael Andrew Lospinuso RN-BC Marie O'Brien NP-C, RN-BC, CCRN Loretta Hill-Civil PCCN Gerard Francis Lunetta ONC Janice O'Connor WCC Jill Hindes PMHNP-BC Julia Macauley CCRN, WCC Jamie O'Hara CAPA Maria Rosaria Hofbauer RN-BC Christine Mac Entee CIC, CNE, RN-BC Anthonia Onyemem PCCN Phyllis Macchio ANP-BC Margie Orale CEN Joshua Hombrebueno CCRN Lyla Hongthong RN-BC Andrew Thomas Magnano RN-BC Brianna Passaretti CCRN, CSC Tracy Hopkins CBN Nita Malik NP-C Melissa Pearson CEN, FNP-BC, PCCN Donna Hughes CAPA Margaret Maltz CAPA Karen Petrosino WCC Lisa Iuliucci RN-BC Lydia Malvagno CWCA Karen Picasso CEN Socorro Inez WCC, DWC Dianne Maniaci PCCN Elizabeth D. Picozzi RN-BC Barbara Jacome RN-BC Katelyn Martin CEN Miguelina Platt CRN Kathleen Jochen RN-BC Cynthia Mattson CWON Colleen Reade Pohmer WCC Stacey Jolley OCN Jennifer McCormack NP-C, CFCN, CWCN Ginger Marie Postiglione RN-BC

Emily Pozgay CRN Tabitha Spinelli WCC
Toni Ann Prost CNOR Karen Sproul NP-C

Katherine Quezada RN-BC Faustina Stoebe CPAN, RN-BC

Donna Randone WCC Brittany Lauren Stokes RN-BC

Christina Razack CGRN Justin Stroker PCCN

Colleen Reale CEN Mary Sundquist ACHRN
Nicole Rice RN-BC Jennifer Susskraut CEN

Tina Riggs NP-C, NP-DW Michelle Swensen CPAN

Nancy Robb RN-BC, OCN

Anne Roberts CCM

Julie Tegay CEN

Sharyn Rodillado CEN Michelle Tomaszewski OCN

Rita Romano RN-BC Deseree Travis CCRN
Vilma Rosario WCC Daniel Triolo CNN

Maria Rubino CHPN, RN-BC

Kathryn Rush CCRN, CRN

Debra Ann Tuttle RN-BC

Frank Russ RN-BC

Karen Tuzzolo CNOR, NE-BC

Jessica Santamaria ONC Erin Vaccariello RN-BC

Mary Scannell CGRN Krista Vanhove RN-BC

Heidi Schrader NP-C Christine Viterella RN-BC

Steven Schwab CCRN Kristy Lynne Vutrano RN-BC

Suzanne Schwamb CMSRN, CNN Geraldine Walter RN-BC

Genine Schwinge ANP-BC, VA-BC Trudy-Ann Weekes-Roach CNOR

Michele Nicole Scomello NP-C Steven Weiss NP-C

Christine Seery RAC-CT, RN-BC Maryanne Wisniewski RN-BC

Angela Shapiro CNOR Andrea Wohlenberg COCN, CWCN,

Alicia Sheron ONC CCCN

Grace Shin RN-BC Kaitlyn Wong PCCN

Deborah Shull CPAN Sylvia Kathryn Wood ANP-BC

Patricia Slokovitz NP-C Michele Wyllie CWS

Agnieszka Sobolewska RN-BC Cecil Yoo CDN

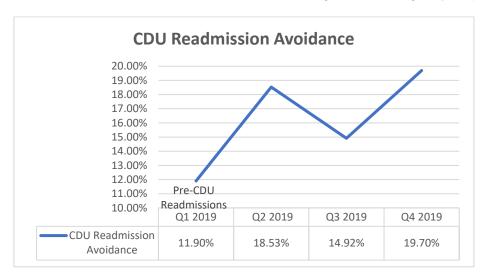
Dana Lee Soler NP-C Debra Youngs ONC

Pasqua Spinelli PMHNP-BC

The Clinical Decision Unit (CDU)

On April 1, 2019 Mather Hospital opened a Clinical Decision Unit which has six beds located on 3 East. An interdisciplinary team collaborated on this medical observation program with the aim to place patients in a more comfortable environment until the decision to admit or discharge is completed. The unit is designed for visits up to 48 hours and patients located here are not admitted for in-patient services.

Appropriate utilization of a CDU can result in readmission avoidance, decreased length of stay, enhanced patient satisfaction scores, and decreased crowding in the Emergency Department.



Decreasing the Incidence of Clostridioides difficile (C. diff)

Hospital-acquired C. difficile is a dangerous gastrointestinal infectious disease. Modifiable risk factors associated with this infection include overuse of antibiotics, poor hand hygiene compliance and improper environmental disinfection. Reducing incidence was a strategic priority as this infection is associated with increased risk of mortality and can often be prevented. The C. diff Task Force collaborated with hospital teams to identify new opportunities for improvement. Action plans included:

- ❖ Daily rounding to monitor hand hygiene and personal protective equipment (PPE) compliance
- Working collaboratively with the Antibiotic Stewardship program
- Collaborating with Nursing to identify patients with potential community-onset C. diff to prevent designation of hospital-acquired infection
- Developing an education program for medical students to include transmission-based precautions, hand hygiene, use of PPE, appropriate specimen collection for C. diff testing, and disinfection of shared devices
- Starting a pilot program on 3 East for linen hampers in individual patient rooms

Through the implementation of these interventions, there was a demonstrated improvement in 2019 year to date C. diff rates.

Exemplary Professional Practice



Nurses week celebration

National Nurses Week begins each year on May 6th and continues through May 12th, the birthday of Florence Nightingale, a British nurse, statistician and social reformer who was the foundational philosopher of modern nursing.

Awards presented at Mather Hospital's Nurses Week celebration included:

- ❖ Advanced Practice Nurse Alain Jay Neri, MSN, ANP-BC
- ❖ Nurse Leader Nicole Amendola, BSN, RN, PCCN
- ❖ Nurse Leader Kathleen Long, BSN, RN
- ❖ Clinical Instructor Marsha Deckman, MSN, RN, NE-BC, ONC
- ❖ Clinical Nurse Anne Lasota, BSN, RN, ONC, RN-BC
- RN "Rookie" Nicole Ellis, BSN, RN
- ❖ Nursing Assistant Madeline Cabrera-Numa, CNA
- Unit Secretary Patricia O'Brien

This year's celebration concluded with a Blessing of the Hands Ceremony performed by Joan Sweeney, MBA, MA, BCC as recognition of nurses' healing touch and the importance of their hands in bringing comfort and hope to patients.











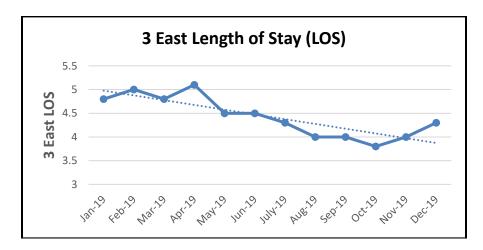






Structured Interdisciplinary Bedside Rounds (SIBR)

The staff on 3 East observed the opportunity to enhance communication between team members regarding the care plan for patients. In addition, there was an increased length of stay, increased readmission rates and low patient satisfaction as demonstrated by Press Ganey/HCAHPS scores below benchmark. An interdisciplinary team was created and included nurses, attending physicians, residents, social workers and pharmacists. A process was created by the team to ensure patient-centered care. This includes daily rounding which is performed at the patient's beside and includes the patient and their family using terminology that is easily understood. The registered nurse provides a thorough report using the SIBR communication tool which was created by the team. This communication tool includes information such as vital signs, diet, intake and output, the status of the patient's mobility, and safety. The attending will end rounds asking the question "Do you have anything you would like to add or is there something more we need to know to manage your care?" The nurse manager and charge nurse attend SIBR rounds daily to assess areas that require change or improvement. The implementation of SIBR rounds resulted in a decreased length of stay on 3 East.



Transitional Care Unit (TCU)

Mather Hospital's Transitional Care Unit (TCU) provides focused care to patients who are not ready to be discharged home or to another facility. It is a 16-bed, short-term, subacute rehabilitation unit. The patient population includes those who have recently suffered a stroke, post-surgical patients, those receiving therapy for systemic infections, and those needing physical rehabilitation. The TCU fosters independence among patients and was one of the first such units in New York and is currently one of eleven TCUs in New York State. TCU patients have access to all the medical staff specialties, as well as the pharmacy, clinical nutritional services, respiratory therapy, diagnostic imaging and the diagnostic laboratory.

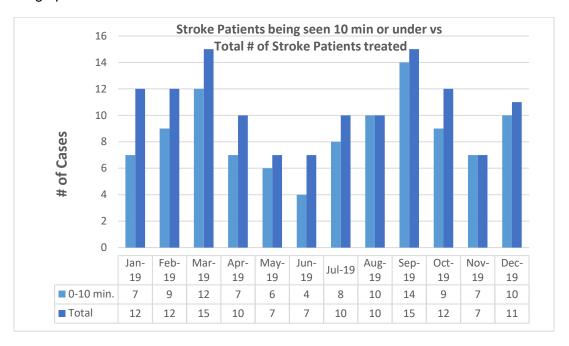
Through staff accountability, personal protective equipment (PPE) compliance, education, and daily assessment of the necessity of catheters, the TCU achieved a remarkable rate of zero for hospital acquired infections in 2019. These include: Methicillin-resistant Staphylococcus aureus (MRSA), Vancomycin-resistant enterococci (VRE), Clostridium difficile (C. diff), Carbapenem-resistant Enterobacteriaceae (CRE), catheter-associated urinary tract infections (CAUTI), and Central Line-associated Blood Stream Infections (CLABSI).

Professional Organizations 2019

EMPLOYEE	TITLE	OFFICES HELD
Maureen Altieri, MSN, RN, NEA-BC	Director of Service Excellence and Magnet	New York State/Vermont Magnet Hospital Consortium Chairperson 2016 – present
Irene Cassata, BSN, RN	Imaging Services Clinical Nurse	Vice President of Graduate Nursing Student Organization at St. Joseph's College
Maureen M, Chernosky, RN-BC, MSN, CEN, CCRN, ACNS-BC	Clinical Instructor	New York State Delegate to the National ENA General Assembly Suffolk County Chapter Emergency Nurses Association- Education Chair 2019
Marina Grennen	Clinical Instructor	ENA Treasurer 2019 Injury Prevention Chairperson for Suffolk ENA 2019
Theresa Grimes, PhDc, FNP-BC, RN-BC, CCRN	Integrative Pain Service Nurse Practitioner	ASPMN Long Island Chapter Secretary Research Committee Chair 2019
MaryEllen Lasala, PhD, RN	Clinical Instructor	Member and Counselor for Sigma Theta Tau International, Kappa Gamma Chapter
Joanne Lauten, MSN, RN, CPHQ, SCRN	Director of Quality Management	Greater NY Stroke Coordinators Consortium (GNYCCC) Past President 2019
Lilly Mathew, PhD, RN	Nurse Statistician/ Nurse Researcher	Board Member for the Transcultural Nursing Society (TCNS) Northeast Chapter
Christine McKeon, MSN, RN, CEN	Assistant Nurse Manager	Suffolk County Chapter of the Emergency Nurses Association Immediate Past President 2019
Marie Mulligan, PhD, RN, CNOR, NEA-BC	CNO / Vice President for Nursing	? Nassau-Suffolk Hospital Council Nurse Executives Committee Chairperson
Marie O'Brien, MSN, RN-BC, ANP-C, CCRN	Pain Management Coordinator	American Society for Pain Management Nursing (ASPMN) Master Faculty Advanced Pharmacology ASPMN Long Island – President Elect 2019
Genine Schwinge, RN, ANP-BC, PNP, VA-BC	Nursing Vascular Access Coordinator	Member of the Editorial Review Board for The Journal of the Association for Vascular Access and The Journal of Infusion Nursing
Faustina (Tina) Stoebe, MS, RN-BC, RN, CPAN	Clinical Instructor	President for NYSPANA District One (Nassau/Suffolk) Board Member NYSPANA

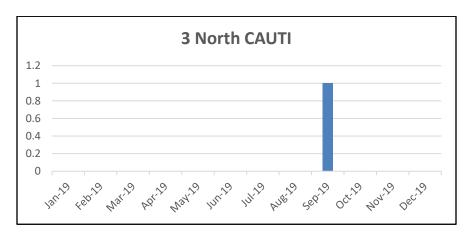
Interprofessional Approach to Improving Door to Doc Stroke Outcomes

Effective stroke treatment is built on the principle of "time equals brain". Successful triage must include a dependable method of recognition of stroke symptoms, especially in non-emergency medical service (EMS) patients. The goal for the acute management of patients with stroke is to stabilize the patient and to complete an initial physician evaluation and assessment within 10 minutes of arrival. An interprofessional Code Orange Team collaborated to improve door to doc time. Interventions included education to ED providers to have a lower threshold to call Code Orange, including all patients with dizziness. Patients with a last known well time up to 24 hours should also be included. Triage RNs and ACPs were instructed to immediately contact the ED physician when a Code Orange patient is identified. In addition, a consistent process for managing Code Orange patients was established.



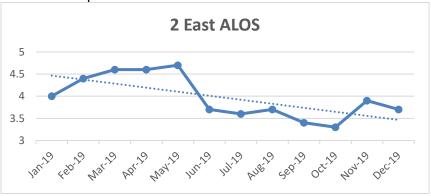
Preventing Catheter Associated Urinary Tract Infections (CAUTIS)

According to the Center for Disease Control and Prevention (CDC) approximately 75% of hospital-acquired urinary tract infections (UTIs) are associated with a urinary catheter. CAUTI complications can include increased mortality, morbidity, hospital cost, and length of stay. In January 2019 the clinical nurses on 3 North (a 35-bed Telemetry/Stepdown unit) developed an evidence-based practice project to assess necessity and indication of each indwelling urinary catheter ordered. A literature search was conducted and indicated that in addition to nursing care of the catheter, an interprofessional approach to review the necessity of any indwelling catheter was also vital in decreasing catheter utilization and CAUTIs. The registered nurses advocated for avoidance and/or early removal of indwelling urinary catheters during interprofessional communication with physicians, physician assistant and advanced practice registered nurses (APRNs). Their advocacy resulted in an 80% decrease in CAUTIs from 2018 to 2019.



Decreasing Length of Stay (LOS) on 2 East

Jeanne Brennan, MSN, RN-BC, CNL, nurse manager of 2 East is a member of the LOS committee. She collaborated with assistant nurse managers, clinical nurses, hospitalists, residents, physical therapists, and social workers to create a structure for interprofessional rounds on 2 East. A large white board is placed in the nurse's station with a list of discharges and potential discharges and what is needed to expedite a patient's discharge. At 9:00 a.m. the issues are reviewed and discussed in a systematic manner. Nurses continually follow up on any issues and social workers and physical therapists refer to the white board for reminders throughout the day. In addition, an interprofessional huddle focused on discharge was implemented in June 2019. The team meets every afternoon to review and complete outstanding patient needs prior to discharge. An intent to discharge order is written by the physician for appropriate patients. This is an indicator for the team to prioritize interventions which will prepare the patient for discharge the following day. These interventions resulted in a demonstrated improvement in LOS on 2 East.



New Knowledge, Innovations, and Improvements

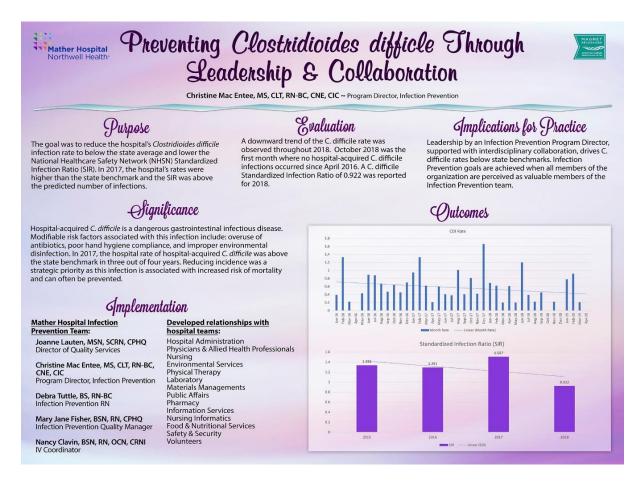


Annual Nursing Research and Evidence-based Practice Conference

On June 7, 2019 Mather Hospital's Nursing Research and Professional Development Council hosted the ninth annual nursing research and evidence-based practice (EBP) conference. Objectives for the day included discussing the current status of quality and caring in professional nursing, presenting an overview of existing challenges facing professional nurses working in a variety of health care settings, and showcasing clinical research, EBP, and quality improvement projects investigating phenomenon impacting nursing science.

The keynote speaker was Joanne R. Duffy, PhD, RN, FAAN a nurse theorist who was the first to link nurse caring to patient outcomes. She developed the Quality-Caring Model© which places relationships at the center of the therapeutic process. She is also the author of "The Quality-Caring Model© and the Caring Assessment Tool".

There were 70 attendees from academia and acute care hospital settings. There were two panel sessions with ten speakers who presented such topics as " *Health-related Majors vs. Other Majors: Do Those Who Learn Patient-centered Care Engage in Better Self-Care?*", "Score Card: Improving ED Nurse Performance", and "A Team STEPPS-Guided Rapid Response System for Reducing Door-to-Needle Time."



Mather Hospital

Magnetizers: A Peer-to-Peer Approach to Magnet® Site Visit Preparation





Problem

Preparing for the Magnet* site visit is a great challenge.
 Little research has been conducted related to Magnet* site visit preparation. Therefore, there is a lack of scientific knowledge describing evidence-based "best practices" to serve as a guide for successful site visit preparation.

Purpose

Strategy & Implementation

- The key to success was adopting a peer-to-peer approach

Magnetizers

tes were interviewed by the CNO, Magnet Program Director, V.P. for No nal Development and the Director of Nurse Recruitment/Retention.

sional attributes included the following

Scheduling

Developing a Curriculum

- Final weeks of education focused on the Hospital's Professional Practice Model, and "the Big Three": RN Satisfaction, Quality Outcomes, and Patient Satisfaction scores, included a list of possible site visit questions.

Disseminating Knowledge

- wided individual and group education to reinforce education [2 weeks before site visit).

 A "cheat sheet" key ring was adapted and revised from the previous designation material and distributed to all staff selected to attend a meeting.

 Lists of possible questions were developed and reviewed with unit staff in the final weeks of preparation.

Incenticizing Engagement

 Educational cart...was focal point of the Magnetizers' educati (Well received and appreciated by entire hospital staff.)
 Engagement materials included custom-built crosswords, wo Engagement materials inc the end of presentations.

izers rounded on evenings and overnight shifts with a hot chocolate cart equiriety of toppings on colder winter pights.

Site Visit Preperation

neeting schedule and rooms secured; floor plan for the site visit developed.

The route of the floor plan highlighted attractive aspects of the hospital's e.

The route was rehearsed by the Magnetizers in the weeks prior to the visit.

reated a "group chat" with members of nursing management and administra

litate communication during the site visit.

Evaluation/Outcomes







Considerations for Future Magnet Designations

Implications for Practice

A peer-to-peer approach, using clinical nurses as Magnet[®] Magneti chieving a highly successful site visit in January 2018.

Safe Medication Practice by New Graduate Nurses Easy as 1, 2, 3

HIBERTERIE mugge

DECEMBER 1

HOUSE THE REAL PROPERTY.



Team Members: Tina Stoebe MS, RN-BC, CPAN; Patty Alban MSN, RN, CEN; Marsha Deckman MSN, RN, NE-BE, ONC

Background & Significance Student nurses receive little hands-on experience administering

- Student nurses receive little hands-on experience aunimizemel medications.
 Lack of experience places new graduate nurses "at risk" to make medication errors (Evans, 2018).
 Educational programs aimed at preventing medication errors by new graduate nurses must include interactive, technology-based learning methods. (Battle & Tyson, 2018)
 Common types of medication errors may include:
 incorrect dispensing
 Overriding aletts (during provider order, pharmacy filling, nurse barcoding)
 Incorrect syringes for administration

PICO(T) Question

- New graduate nurses working in acute care are "at risk" to make medication errors
- Does an interactive, technology based Medication Administration Education during orientation
- Compared to a traditional medication education Decrease the number of medication errors
- In first year of practice

Evidence Synthesis

- Research identifies a positive correlation between use of technology and improved student learning outcomes (Damewood, 2016).

- This is particularly true for the Millennial Generation, who prefer technology-based, interactive learning activities (Shatto & Erwin, 2017) and expect educators to use creative teaching methods (Herman, 2016)

Recommendations for Practice Change Creating an understanding environment with attention to the inadequacy of preparation at the academic level was key to the success of the program.

- preparation as use deduction: tever was eye to the success of the program.

 Among the hospitals strategies is a "JUST CULTINE" which contributes to a healthy work environment improving patient care at all levels.

 Safe Medication administration is among the highest priorities.

 Research indicates that achieving high quality learning outcomes with Millennials requires use of interactive, technology-based teaching methods, such as: the use of simulation.

Case Study

- 61 year old male with a history of ETOH abuse, hemophilia, black stools, underlying COPD, GI Bleed
- Allergy: Warfarin
 Diet: Regular with green leafy vegetables
- abs: K 4.0 PT 11.0 INR 2.5
- Vital Signs: HR 56 RR 16 Temp 99
- Medications Ordered: Flovent, Coumadin 10mg daily, KCL 40 meq IVPB, Lopressor 25mg BID (hold for HR<60, SBP <90), Prevaced 15mg tablet.

Implementation Process

- In 2017, an increase in medication errors among new graduate nurses alarmed
- equications.

 Based on findings, an innovative "Safe Medication Administration" Educational Program was developed.

 The goal was to prevent medication errors among new graduate nurses.
- · Key components: Medication test that includes a visual syringe selection component
 - Insulin syringe bar-coding to ensure use of correct size syringe during insulin administration insulin administration
 3) Experiential learning using hands-on medication simulation modules
 4) Reflection and Reasoning
 5) Actual medication administration under direct supervision

Outcome & Evaluation - Among 57 new graduate nurses hired in 2017, ten medication occurred (medication error rate of 18%).



After the new "Safe Medication Administration" Educational Program was initiated, zero medication errors occurred among 52 new graduate nurses hired in 2018.

Implications for Practice New graduates are "at risk" to make medication errors.

- The majority of new graduates are Millennials with technology-focused learning needs.
- Use of non-traditional, interactive, technology-based "Safe Medication Administration" Educational Program prevented medication errors among new graduate nurses.



Contributions to Program Success

Marie Mulligan (NO, PHD,RN,NEA,CNOR Brandy Feliu AVP of Nursing Professional Development Nursing Professional Development Educators Sarah Eckardt MS, GA, Statistician Brenda Howard, Information Services

Mather Hospital

A PSYCHIATRIC NURSE PRACTITIONER LED URGENT CARE OFFICE: DECREASING EMERGENCY ROOM VISITS FOR THE PSYCHIATRIC POPULATION



PURPOSE

- Lack of access to psychiatric services has resulted in significant delays to treatment (National Council for Behavioral Health, 2017).
- The average emergency room visit stay for psychiatric patients ranges from 7-34 hours in the U.S. (Weiss, Chang, & Rauch, 2012).
- Research strongly suggests that if appropriate treatment is started promptly, the majority of psychiatric emergencies can be resolved without inpatient hospitalizations (Zeller, 2010).
- The Psychiatric Nurse Practitioner in an urgent care setting is educationally prepared to provide comprehensive psychiatric management to patients and most importantly effective in decreasing ER visits.

BACKGROUND & SIGNIFICANCE

- · Our emergency department has seen an increase of psychiatric patients in the last couple of years.

 - A 2017 Government report {https://hcup-us.ahrq.gov} found that the o
- number of emergency department visits increased nearly 15% from 2006 to 2014, yet ER visits by psychiatric patients increased about 44% the same
- Emergency room psychiatric patients are admitted and transferred more frequently compared to medical patients and experience significant disparities in LOS (Lippert, Jain, Fahimi, Pirrotta & Wang, 2016).
- This trend is related to lack of access to mental health providers and a growing crisis of unmet psychiatric needs.
- According to a March 2017 report from the National Council of Behavioral Health (NCBH). The Psychiatric Shortage, indicates a national shortage of psychiatrists about to spiral out of control, with 77% of U.S. countries reporting a severe psychiatrist shortage.

PICOT QUESTION

- P PSYCHIATRIC PATIENTS IN CRISIS
- I PSYCHIATRIC NURSE PRACTITIONER/URGENT CARE
- C EMERGENCY ROOM
- O DECREASING EMERGENCY ROOM VISITS
- T DURING A 1 YEAR PERIOD (2017-2018)

RECOMMENDATIONS FOR PRACTICE

- · Psychiatric Nurse Practitioners are license, certified and skilled to bring a patient centered approach to mental health.

 • PMHNP are skilled to address the shortage of psychiatrists
- PMHNP's use holistic approach. The holistic approach emphasizes prevention, social well being, population health, thus filling a critical need to address the mental health needs and the underserved (Delaney, 2017).
- Studies have stated PMHNP's increase access to care and quality (Reiss-Brennan, Brunisholz, Dredge, et. Al, 2016).

IMPLEMENTATION PROCESS RESEARCH DESIGN - Retrospective Chart Reviews 2017 - December 2018.

- Advantages: Low cost, access to rich data and the ability to evaluate hypothesis pertaining to research questions. (Gregory & Radovinsky, 2012).
- Disadvantages: Incomplete data, illegible information, lacking specific patient information. (Gearing et al., 2006).
- Nine step approach was utilized to minimize the limitations. (Conception, Literature Review, Proposal Development, Data Abstraction Instrument, Protocols/Guidelines for Abstraction, Sample, Ethics and Pilot.)

OUTCOMES

- December 2017 December 2018: 49 URGENT CARE VISITS
- 2 out of the 49 cases required inpatient hospitalization (ACTIVE SUICIDAL PLAN)
 41% Urgent care cases had a primary diagnosis of Major Depression
- 39% Nature of the Visit (INCREASE IN PANIC/DEPRESSION SYMPTOMS)
- acute psychiatric symptoms who cannot wait for outpatient routine appointments. This provides for immediate assessment and treatment for people experiencing
- Currently, there are no psychiatric Urgent care offices/centers in New York, forcing patients to go to emergency rooms which delay treatment and increase
- This one year pilot study concluded that this is an effective way of allowing patients greater access to care and decreasing emergency room visits.



IMPLICATIONS OF PRACTICE AND BENEFITS OF URGENT CARE FOR PSYCHIATRIC PATIENTS

- Access to psychiatric services.
 Solution to the wait times from outpatient and clinics.
- Solution to the wat turnes from outpatient and clinics
 Avoiding delays in care that may potentially be fatal.
 Decreased Emergency Room visits.
 Increased quality of care.
 Increased patient satisfaction.
 Improved patient outcomes.
 Decreased extensions.

Zaynah, A., Meltzer, A., Lazar, D., & Pines, D. (2014). Psychiatric Box Multidisciplinary Solutions. Policy Brief, Urgent Matters. 1 (2), 1-5.



Innovative Elements of a Successful Fall Prevention Program

Emergency Department / Falls Committee Erin DiCandia, DPT Northwell Workforce Safety - Clinical Injury S Maria Artusa, RN, MSN, CNS, ANP-BC

Background & Significance

- Hospitals are still identifying practices to reduce the number of
- Yearly, > 1 million people fall while hospitalized.
- Patient falls can also result in staff injury, known as patient-related injuries and/or clinical injuries.

Hospital Falls



Statistical Data



Interventions

- October 2017 Code Fall is rolled out to the hospital to ensure the timely arrival of a response team to a patient or visitor fall. June 19 June 2018 - Falls Committee merged with the Safe Patient Handling Committee to combine efforts to decrease patient falls, decrease injuries to patients due to a fall, and to decrease clinical injuries sustained by staff when attempting to prevent a patient fall.
- August 2018 After falls that occurred with injury, the Chief Nursing Officer (CNO) required that all requests 1:1's (one staff member to remain with one patient for a period of time) be sent to the CNO for approval.

CODE FALL

- Purpose: To establish a protocol to provide a multidisciplinary CODE FALL RESPONSE TEAM to respond and investigate all falls
- Policy: To communicate with the Rapid Response Team and implement immediate intervention of the patient who has experienced a fall.
- Responsibility: All staff members and volunteers at Mather Hospital who witness a fall or possible indication that there may be a fall are empowered to call a CODE FALL??

A CODE FALL can be called by any staff member, provider or volunteer who recognizes or witnesses a possible fall.

In-Patient Fall Protocol

- Dial 3333 on any in-house phone and state code fall, unit, location
 Operator will announce overhead "CODE FALL, UNIT, LOCATION
- 3. Stay with the patient, if no phone is available, verbally call for help 4. Do not move the patient until PA/NP has initially assessed and
- 5. Falls Response team will respond to the unit and location announced overhead

Note: As needed, call a RAPID RESPONSE or CODE BLUE

Code Fall Response Team RN/NA assigned to the patient Assistant Director of Nursing (House Supervisor)

- Hospital Medicine Allied Healthcare Provider (Rapid Response Team)
- Nurse Manager, Assistant Nurse Manager or Charge Nurse • Security
- SPH Team/Committee member

Code Fall Response Cart

Contents:

- HoverJack
 Hovertech international
- air supply
 Extension cord
 Hovermatt SPU
 Liko Sling L
- Liko sling XL
 Flat bedsheet
- Backboard
 Cervical collar
 Gloves
 Wipes



Post Fall Assessment Falls Algorithm



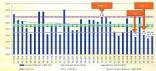


SPH Equipment Options for Fall Recovery

Document & Debrief



Post Fall Huddle Includes: RN, NA, AND, Provider Documentation Documentation
Nursing
Fall note in EMR
Falls report in Midus
24 hour post fall follow up
Security
Security occurrence report
ode Fall Response Review Form
Provider
Assessment note in EMR



Nursing Quality Showcase

Hospital Quality week was celebrated on October 29, 2019 with the ninth annual Nursing Quality Showcase sponsored by the Nursing Quality Council and the Hospital Quality Management Department. The posters displayed all of the organization-wide quality improvement projects and outcomes. There were 28 poster presentations demonstrating frontline leadership projects, evidence-based nursing practice projects, and interprofessional problem-solving initiatives.

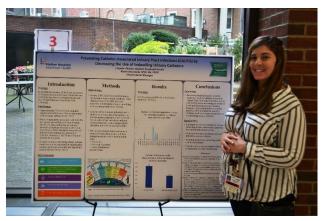
In addition, Judy Moran, DNSc, RN, NE-BC, BC and Sarah Eckardt, MS provided a Power point presentation; "*Understanding Quality Improvement*".













2019 IRB Approved Research Studies

Title	Investigators	Research Design
Effect of Reiki Therapy on Pain Among Postoperative Total Joint Replacement Patients	Marie O'Brien, MSN, ANP-C, RN-BC, CCRN (PI) Patricia Dodd, ANP-C Margaret Scharback, RN	Non-Experimental Descriptive/Correlational Cross Sectional
Use of Acupuncture in Integrative Pain Management by Advanced Practice Nurses: A Pragmatic Study Among Acute Care Patients	Marie O'Brien, MSN, ANP-C, RN-BC, CCRN (PI) Patricia Dodd, APN-C Mehran Golpariani, MD	Non-experimental Mixed Methods
The Patient Mobility Bundle: Preventing Falls and Employee Injuries	Constance Calisi, MBA, BSN, RN (PI) Sarah Eckardt, MS Erin Dicandia, DPT Julie Tegay, MSN, RN, CEN Judith Moran-Peters, DNSc, RN, NE-BC, BC	Non-Experimental Descriptive/Correlational Retrospective Perspective
Impact of Educational Program on "Expressions of Humanism" on Caring Behaviors, Patient Experience and Quality Outcomes	Northwell Institute for Nursing System-wide Nursing Research Study Judith Moran-Peters, DNSc, RN, NE-BC, BC Site Principal Investigator at Mather Hospital	Non-experimental Descriptive/Correlational

Publications



Nursing Administration Quarterly April/June 2019

Authentic Nurse Leadership Conceptual Framework. Nurses' Perception of Authentic Nurse Leader Attributes. Marie Giordano-Mulligan, PhD, RN, NEA-BC, CNOR; Sarah Eckardt, MS



American Psychiatric Nurses Association June 2019

Effects of Animal-Assisted Activity on Mood States and Feelings in a Psychiatric Setting. Sandra Brown, BSN, RN-BC; Jill Snelders, MBA, CTRS; Joan Godbold, BSN, RN-BC; Judith Moran-Peters, DNSc, RN, NE-BC, BC; Denise Driscoll, RN-BC, CARN, PMHCNS-BC, NPP; Donna Donoghue, MD; Lilly Mathew, PhD, RN; Sarah Eckardt, MS

2019 Nursing Poster and Podium Presentations

Date(s)	Conference	Location	Presenters	Podium/Poster Title
March 21, 2019	NYU/Winthrop 6 th Annual Nursing Research and EBP Conference	North Hills Country Club Manhasset, NY	Patricia Dodd, RNP-C Margaret Scharback, RN Judith Moran-Peters, DNSc, RN, NE-BC, BC	Poster - Reiki: Decrease Opioid Usage in Elderly Joint Replacement Patients Poster – Empowering Nurse Leaders to Become EBP Experts, Lifelong Learners, and Problem Solvers
April 9, 2019	2019 Northwell Patient Experience Conference	Long Island Marriott Uniondale, NY	Denise Driscoll, RN-C, CARN, PMHCNS-BC, NPP Christine Mc Keon, BSN, RN, CEN	Poster – Joining Forces: Positive Outcomes Associated with Placing Behavioral Health Staff in the Emergency Room
May 23, 2019	Northwell Health's 25 th Annual Nursing Research/EBP Conference	Leonard's Palazzo Great Neck, NY	Tina Stoebe, MS, BC, RN, CPAN	Poster - Safe Medication Practice by New Graduate Nurses: Easy as 1, 2, 3
			Pasqua Spinelli, PhD, PMHNP-BC	Poster - A Nurse Practitioner- led Urgent Care Office: Decreasing Emergency Room Visits
June 7, 2019	Mather Hospital's 9 th Annual Nursing Research/EBP Conference	The Hilton Garden Inn Stony Brook, NY	Judith Moran-Peters, DNSc, RN, NE-BC Pasqua Spinelli, PhD, PMHNP-BC	Podium – The Patient Mobility Bundle: Preventing Patient Falls in Acute Care Podium and Poster – A Psychiatric Nurse Practitioner- led Urgent Care Office Decreasing Emergency Room Visits
			Denise Driscoll, RN-C, CARN, PMHCNS, NPP Brandy Feliu, MSN, RN	Podium and Poster – To Go Boldly: Operation Mental Health in the Public Library Podium - First in Flight:
			Marsha Deckman, MSN, RN, NE-BC, ONC Judith Moran-Peters, DNSc, RN, NE-BC	Podium and Poster – Safe Medication Practice by New Graduate Nurses: Easy as 1, 2, 3
			Loretta Hill-Civil, BSN, RN, PCCN	Podium – The Art and Science of Professional Practice Models in Nursing
			Julie Tegay, BSN, RN, CEN-BC	Poster – Expediting Emergency Department/Telemetry Turnaround Time
			Maryann Goodman, MSN, EMBA, RN, ONC	Poster – Innovative Elements of a Successful Fall Prevention Program

			Maria OID : MON D:	
			Marie O'Brien, MSN, RN, ANP-BC, CCRN Patricia Dodd, ANP-BC Margaret Scharback, RN	Poster – Reiki: Decrease Opioid Usage in Elderly Joint Replacement Patients
			Denise Driscoll, RN-C, CARN, PMHCNS, NPP	
			Joan Godbold, BSN, RN-BC Christine MacEntee, MS, CLT, RN-BC, CNE, CIC	Poster - Joining Forces: Positive Outcomes Associated with Placing Behavioral Health Staff in the Emergency Department Poster – Magnet Magnetizers: A Peer to Peer Approach to Magnet Site Visit Success
				Poster – Preventing C. Difficile Through Leadership and Collaboration
July 15-17, 2019	World Congress on Nursing and Healthcare	Rome, Italy	Pasqua Spinelli, PhD, PMHNP-BC	Podium – A Psychiatric Nurse Practitioner-led Urgent Care Office: Decreasing Emergency Room Visits
September 20, 2019	American Society for Pain Management Nursing (ASPMN)	Portland, Oregon	Marie O'Brien, MSN, RN, ANP-BC, CCRN	Podium – Improving the Image of Pain Care Through Advanced Nursing Practice
			Patricia Dodd, ANP-BC	Podium - Acupuncture for Pain: A Feasibility Study for the Integrative NP Pain Service
October 10- 12, 2019	ANCC National Magnet Conference®	Orlando, Florida	Marie O'Brien, MSN, RN, ANP-BC, CCRN Patricia Dodd, ANP-BC	Podium – Improving the Image of Pain Care Through Advanced Nursing Practice
			pted for Presentation	
October 2019	Nurse-led Care Conference: Designing the Future of Healthcare	Nashville, Tennessee	Marie O'Brien, MSN, RN, ANP-BC, CCRN	Panel – Improving the Image of Pain Care Through Advanced Nursing Practice
October 2019	American Psychiatric Nurses Association 33 rd Annual Conference	New Orleans, Louisiana	Denise Driscoll, RN-C, CARN, PMHCNS, NPP	Poster – Joining Forces: Positive Outcomes Associated with Placing Behavioral Health Staff in the ED
October 2019	16 th International Conference of the Society for Integrative Oncology	New York, NY	Marie O'Brien, MSN, RN, ANP-BC, CCRN Patricia Dodd, ANP-BC	Podium – Improving the Image of Pain Care Through Advanced Nursing Practice
November 2019	45 th Biennial Convention: Sigma Theta Tau International Honor Society of Nursing	Washington DC	Judith Moran-Peters, DNSc, RN, NE-BC	Podium – Joining Forces: Positive Outcomes Associated with Placing Behavioral Health Staff in the ED
	, , , , , , , , , , , , , , , , , , , ,		Christine MacEntee, MS, CLT, RN-BC, CNE-CIC	Podium – Preventing C. Difficile Through Leadership and Collaboration
			Julie Tegay, BSN, RN, CEN-BC	Podium – Innovative Elements of a Successful Fall Prevention Program

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