

2020 NURSING ANNUAL REPORT



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Message from our Chief Nursing Officer

Dear Colleagues,

Welcome to the 2020 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.

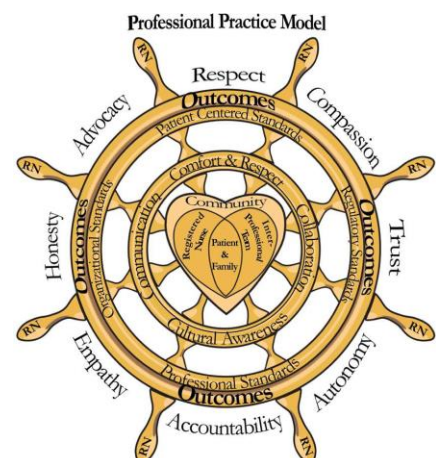
I value the ongoing and open conversations I have with the nurses regarding their practice environment, which includes opportunities to make innovative improvements. As we dialogue and engage in shared decision making, we continue to reinforce our culture of nursing excellence and professionalism.

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.

Sincerely,

Marie Mulligan RN

Marie Mulligan, PhD, RN, CNOR,
NEA-BC CNO Vice President for
Nursing



Facts and Figures

83% of clinical nurses hold a BSN degree

41% of clinical nurses are certified

80% of nurse leaders are certified



3-star patient survey rating
Care Compare October 2020 update

87th percentile Nationally for Nursing
Communication
92nd percentile among New York Peer group

82nd percentile nationally for Response of
hospital staff
89th percentile among NY Peer Group

26 percentile point increase in quietness of the
hospital environment
87th percentile for courtesy of nursing
assistants among NY Peer Group

2 East Bariatrics/Telemetry received second
straight North Star 90 Award.

2020 Gold plus Target
stroke elite and a target
type 2 diabetes Honor roll



American Heart Association®

Target: Type 2 DiabetesSM



Mather Hospital is a twice-designated
Magnet® Organization and we are on the
journey to our third designation. Magnet
recognition is a performance driven
credential and an organizing framework for
nursing and patient care
excellence.

Approximately 9% of all
registered hospitals in
the United States have
achieved ANCC Magnet
Recognition status.



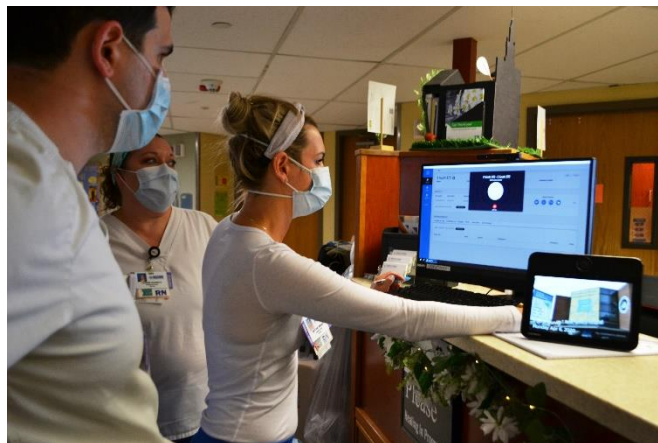
Transformational Leadership



NucleusCare Devices

On March 11, 2019 the World Health Organization (WHO) declared COVID-19 a pandemic and the world as we knew it was irrevocably changed. The entire Mather Hospital family was called to action to do what we do best; provide exemplary safe, quality care. There were rapidly changing guidelines and recommendations for hospital visitation from New York State, the World Health Organization (WHO), Centers for Disease Control and Prevention (CDC), and other healthcare organizations. Marie Mulligan, PhD, RN, NEA-BC, CNOR, CNO/VP for Nursing recognized that patients would be combatting not only COVID-19, but the psychological and emotional impact of isolation that would accompany it. With visitation suspended, Mather Hospital needed to find solutions that could readily connect patients to their loved ones, as well as facilitate visual communication between hospital employees and patients. Finding methods in these unprecedented times to connect people, enhance communication, and ease their concerns, was paramount.

Marc Rosenboom, Information Systems Manager recommended the NucleusCare remote monitoring technology as a solution. NucleusCare is an audio-visual communication device initially developed for use in skilled nursing facilities and assisted living communities. It is a dedicated tablet which facilitates communication between a patient, their healthcare providers, and their family members/significant others. Since early April 2020, Mather Hospital's Nursing, Information Services, and Patient Experience Departments have worked in tandem with NucleusCare's Development team to modify these devices for inpatient hospital functionality. Currently, there are over 200 devices deployed throughout Mather Hospital's inpatient units. Using video-call technology, rather than the traditional Responder 5 call bell system, permits team members to assess and address patient needs virtually leading to decreased PPE use and exposure. Built-in night vision also allows providers to virtually visit with patients overnight. Paired with the silent auto answer feature, this is currently being used to conduct overnight hourly rounding. Most importantly, patients and their families can connect openly through a user friendly, app-based platform to visualize and speak with each other, invite other family members to join, and also serves as a digital picture frame.





DAISY Award

The DAISY Award is a partnership with healthcare organizations to provide ongoing recognition of the clinical skill and the compassion nurses provide to patients and families all year long. Mary Ellen Glennon, RN, MSN, CCRN, WCC, Wound Care Coordinator was the DAISY Award winner by demonstrating exemplary care and compassion.



What a wonderful, caring, thoughtful, soothing Wound Care Nurse. My mom had an extremely negative reaction to being physically examined as she just fractured her hip and in extreme pain. I, (her daughter) had an even harder time listening to my mother's screaming expressions of pain. Mary Ellen saw how I was tortured by my mother's pain. She joined my husband and me to help us understand the situation and tried to calm me down thoughtfully and caringly, speaking to us for a half hour. What a special person. She is the ideal definition of a nurse and you are lucky enough to employ her.



Nassau-Suffolk Hospital Council Nurse of Excellence Award

Jeanne Brennan, MSN, RN-BC, CNL was our nominee for the Nassau-Suffolk Hospital Council Nurse of Excellence

Jeanne demonstrates extraordinary enthusiasm, flexibility and a willingness to serve. As a role model and leader, she takes accountability for patient outcomes through integration and application of evidence-based information. She collaborates with her staff and colleagues from other departments to implement wide-ranging evidence-based initiatives that significantly improve the quality of patient care. These include decreasing pressure injuries, decreasing length of stay, and improving glycemic control.

Zuckerberg Family Award for Nursing Service Excellence

Lorretta Hill-Civil, BSN, RN, PCCN was our nominee for the Zuckerberg Family Award for Nursing Service Excellence.



Lorretta is a patient advocate and change agent. Her positive attitude, dedication and professionalism inspires others to provide high quality patient care with competency and compassion. Lorretta's clinical expertise allows her to foster a healthy work environment by teaching and mentoring staff through all phases of their professional development. She has worked in collaboration with her colleagues to implement innovative strategies to advance quality outcomes such as improving patient throughput, decreasing length of stay, and increasing both patient and staff satisfaction.

Lived experience with Covid-19

In March of this past year, after weeks of prepping for the COVID-19 surge, I contracted the Coronavirus. I was fearful as this was a novel virus and little was known regarding the etiology. I have been a Registered Nurse at Mather Hospital for 33 years. I have always cared for patients and their families as if they were my own. I have worked in various positions throughout my career. My current role is the Director of Nursing for the Transitional Care Unit. I oversee the nursing care of this 16-bed inpatient rehabilitation unit. The first six days I was febrile and profoundly achy and tired and by the eighth day I was admitted to 3 North. I had never been an inpatient except for the births of my two children. I found it difficult to be on the other side of the siderail. The five days I was hospitalized were a blur. When the nurses came in, they were professional, compassionate and kind. I didn't want them to come in any more than they absolutely had to because I did not want to expose them. The Coronavirus has caused people to feel isolated. Mather found ways to improve this through use of the NucleusCare device. Patients can have audio-visual contact with their loved ones. I was also able to FaceTime my husband and daughter. I was fortunate to be able to leave the hospital after five days and return home on oxygen where I continued to heal from my illness. Many were denied this same privilege. There were also some high points during my illness. The staff of Mather called me, stopped by and dropped packages at my door. I received cards, emails and texts. I felt loved and supported at a time when I needed it the most. I have always felt that I could never work anywhere else. After this past year, I know I am right.



Carolyn Germaine, MSN, RN, CNL

Stress First Aid

Covid-19 has not only challenged the physical health of Mather Hospital's staff but also their emotional resilience and wellbeing. It creates an ongoing vigilance and persistent sense of life threat in our staff. It was vital for the organization to understand the acute and chronic stressors that nursing staff on the front line were facing and create an infrastructure to provide support and referrals.

There were many barriers to engage staff into a wellness program. Those included difficulties of staff acknowledging or recognizing their own needs, the stigma of needing psychological support, and guilt of leaving patients or team members for self-care.

The Behavioral Health Service Line's response to employee wellness in respect to the COVID pandemic was to train identified individuals from each Northwell site to be trained in Stress First Aide.

Stress First Aid (SFA) is a framework for helping people confronting ongoing, persistent stress in an environment with a continued high operational tempo and exposure to risk. SFA is undergirded by 5 principles: ensuring safety, calming emotional reactions, promoting connectedness, promoting self-efficacy and mastery, and inspiring hope. It teaches one to identify levels of stress on a continuum and what interventions are necessary at each level. It is a strategy that is used by the military for veterans

Denise Driscoll, RN-BC, CARN, PMHCNS-BC, NPP, AVP Behavioral Health and Danielle Allgier, LCSW, Assistant Director Behavioral Health attended ongoing educational sessions via the Center for Traumatic Stress, Resiliency and Recovery led by the Director Mayer Belleson, PhD. They learned the components of Stress First Aide and how to address trauma related symptoms and methods to achieve resiliency.

Denise and Danielle decided to take a proactive approach; engaging staff into supportive care that included education regarding the Stress First Aide process. In addition, they shared ways to achieve resilience, or the ability to "bounce back", to their psychological state prior to the pandemic. The education also included normalizing their reactions to the pandemic. Whatever they were experiencing was normal. It was the intensity of their experience that would drive specific interventions to achieve wellness.

SFA is a peer run model, and the staff was encouraged to support one another in identifying stress levels. Additionally, they were expected to actively institute mechanisms for cooperation and collaboration and support those on the team who were more stressed than others. Denise and Danielle collaborated with the Health Work Environment group to meet the needs by providing a variety of days and times for the program. They taught the staff that self-care is not selfish. That we need to be prepared physically and mentally for the future. Denise and Danielle encouraged participation in Mather Hospital's support programs, provided referrals when needed, and ultimately created a safe space for those to speak without prejudice or judgement.

Structural Empowerment

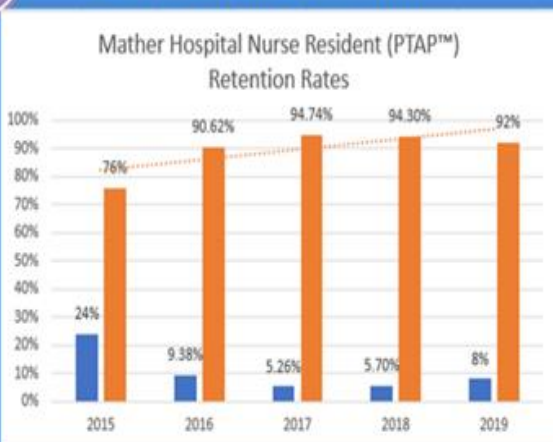


Mather Hospital Northwell Health Professional Development Department

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.



1st NY Hospital to become ANCC PTAP Accredited



American Heart Association
Community Training Center
1385 Staff Attended CTC Activities
600 Mather Employees
785 Non-Mather Staff

58 BLS
CLASSES –
400 Staff

16 ACLS
CLASSES
148 Staff

5 PALS
CLASSES
39 Staff

4 PEARS
CLASSES
13 Staff

A FEW MEMBERS OF THE NURSING PROFESSIONAL DEVELOPMENT TEAM!



Nurse Leadership & Clinical Nurse Certification



Baccalaureate Prepared Clinical Nurses

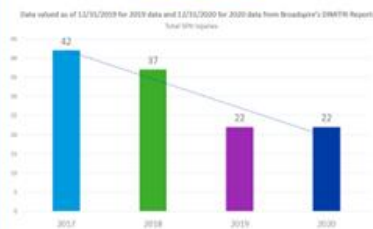


86%
Nurses with
Baccalaureate
Degree or
Higher

~4500
Contact
Hours
Awarded

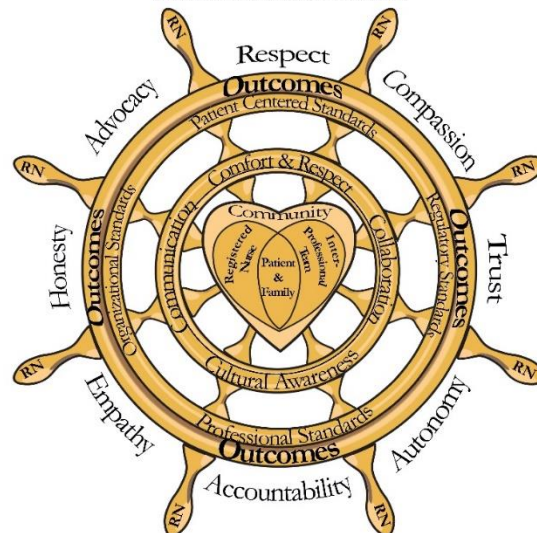
RN Mandatories
Basic Arrhythmia Course
Critical Care Course
Certification Review

Mather Hospital SPHM Total Incidents



Cost incurred 2019 to 2020
decreased by \$32,085

Professional Practice Model



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.

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, and other information regarding the featured career.

In February 2020 Joe Aliano, BS, DTR, Director Food and Nutritional Services and Joe Meyer, Assistant Director Food and Nutritional Services spoke to the Explorers about opportunities in the nutrition profession and food services. They described educational requirements and the various job functions and followed with a question and answer session. In addition, they spoke to the process for providing meals for patients and staff.

In March 2020 Amanda Vesey-Askey from the Eye-Bank for Site Restoration spoke to the Explorers about scholarship opportunities through the Eye Bank of New York. Michael Burghardt, FACHE, MBA, R.T. (R)(MR), VP Administration discussed his career as well as his tenure at Mather Hospital.

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!

Affiliations with Schools of Nursing

In 2020 Mather Hospital collaborated with seven Schools of Nursing and placed 217 students for their clinical rotations. Students completed their rotations 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.



in





In 2020 Nursing Professional Development had two new graduate programs, formally called Nurse Resident cohorts, begin the New Graduate Nurse Transition to Practice Program. This program has been accredited since 2018. Cohort 11 began at the cusp of the COVID-19 pandemic with 11 Nurse Residents. These nurses were hired to 2 West, 3 East, 2 East, 3 South, Emergency Department, and the Operating Room. In August/September cohort 12 began with 27 Nurse Residents! These nurses were hired to work in the OR, 2 East, 2 South, 2 West, 3 South, 3 East, and 3 North. Their collective experiences from nursing school during the COVID-19 pandemic added to a unique clinical orientation.

The year ended with the program consistently meeting its goals of Nurse Residents attendance at 90% of monthly classes; Nurse Residents feeling better prepared to complete his/her job responsibility; Nurse Residents self-reporting an increase in the mean scores of feeling confident in communicating with physicians; and, a 90% employment retention rate of Nurse Residents at the end of the Program.

Each cohort is actively working on completing their evidence-based project which will be presented to Nursing Leadership on their graduation in 2021. After the New Graduate Nurse Transition to Practice Program graduation, the Nurse Residents then begin the mentorship program.

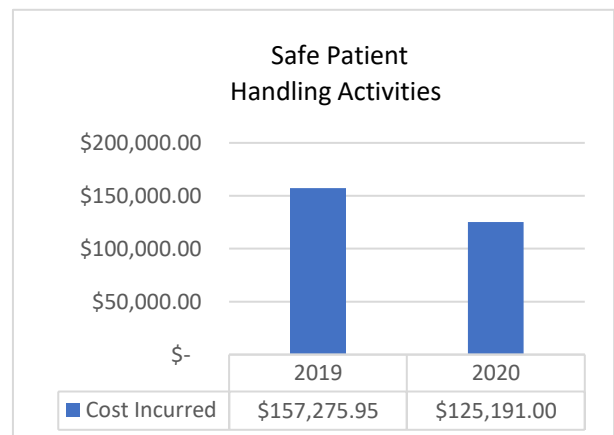
Safe Patient Handling



Mather Hospital's administration and leadership continues to contract Northwell Health Workforce Safety to implement and oversee an internal Safe Patient Handling (SPH) Program. This program includes workforce safety educators who provide education and act as a resource to all staff for patient handling activities.

In 2020, new co-chairs for the interprofessional SPH and Falls Committee were selected; Meghan Strebel, BSN, RN, PCCN, Assistant Nurse Manager and Kaylyn Finnerty, BSN, RN, Clinical Instructor from the Nursing Department, and from Rehabilitation Services, Kerri Hamilton, PT, Assistant Director and Megan Croniser, PT. Meghan and Kaylyn completed the Northwell SPH Champion training course at the Center for Learning and Innovation. This enabled them to assist with program implementation at Mather Hospital.

Despite healthcare challenges in 2020, and an increased acuity and complexity of patients, Mather Hospital saw a 20.4% reduction in cost from patient handling activities from \$157,275.95 in 2019 to \$125,191.00 in 2020. Code Fall response continues to be a success resulting in a 48% reduction in manual lifting of a person from the ground after a fall incident. The SPH and Falls committee also implemented proactive toileting and mobility programs to decrease patient falls and increase safe mobilization practices.



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 2020.

Michael Aboagye ANP-C	Jennifer Ann Colucci PMH-BC	Kaitlin Graeb MEDSURG-BC
Lori Accetta CCRN	Jennifer Condlin FNP-BC	Carrie Grattan OCN
Kathleen Adams CDN	Patricia Cordle PMH-BC	Marina Grennen CEN
Brenda Lei Agaton MEDSURG-BC	Domenica Corrado CNOR, FNP-BC	Theresa Grimes PGMT-BC, FNP-BC, CCRN
Patricia Alban CEN, PCCN	LoriAnn Crispino CEN	Michelle Gustaferri CEN
Maureen Altieri NEA-BC	Stephanie Crispino CBCN	Gina Hannon PCCN
Lisa Ambrose NP-C, CCRN	Cassandra Cucuzzo MEDSURG-BC	Donna Hardwicke MEDSURG-BC
Nicole Amendola PCCN-K	Maria Antonia Cuisson WCC	Lauren Ann Harris MEDSURG-BC
Marret Ida Anderson NP-C	Rose Cummings CPAN	Stacey Hartcorn CEN
Sherry Anderson COCN, CWCN, GERO-BC, MEDSURG-BC	Richard Daly NP-C	Margaret Hassett CAPA
Catherine Andolena ONC	Nicole D'Amore PCCN	Elise Haussel CNOR
Christine Arkali ANP-BC	Dalma Daniel WCC	Patricia Hebron FNP-BC
Catherine Audus AGPCNP-BC	Marianna David MEDSURG-BC, CCDS, GERO-BC, ONC	Kathleen Herrera MEDSURG-BC
Deborah Aureliano WCC	Christine DeBernardo MEDSURG-BC	Stacy Heuschneider NP-C
Sigal Ayalon ONC	Marsha Deckman NE-BC, ONC	Lorretta Hill-Civil PCCN
Franco Baingan ONC	Nicole Delvecchio AGPCNP-BC	Nicole Hoefler CV-BC
Melissa Baranowski CGRN	Kristina Demarco ANP-BC	Maria Rosaria Hofbauer MEDSURG-BC
Michael Anthony Barletta PMH-BC	Joyce DeMoore RN-BC	Joshua Hombrebueno CCRN
Tara Bauer CEN	Susan DeTurris CAPA	Lyla Hongthong MEDSURG-BC
Kim Bauman PCCN-K	Kristin Dillon CCRN	Tracy Hopkins CBN
Laura Jeanne Bell NP-C	Amy Christine Dittler PMHNP-BC	Donna Hughes CAPA
Deanna Marie Belte CPAN	Patricia Dodd NP-C, HWNC-BC, NCCAOM, HN-BC, PGMT-BC	Lisa Iuliucci PMH-BC
Jessica Berkman MEDSURG-BC	Annemarie Doodian NEA-BC	Barbara Jacome MEDSURG-BC
Kathleen Susan Biase MEDSURG-BC	Alyssa D'Oro CCRN	Kathleen Jochen PMH-BC
Donna Blaskopf CRN, VA-BC	Lisa Doumas PCCN, CCRN	Denise Johnson CEN
Michele Bonafede PMH-BC	Denise Driscoll RN-BC, CARN, PMHCNS-BC, NPP	Stacey Jolley OCN
Denise Bonneville MEDSURG-BC	Christina Drumm FNP-BC	Tracey Joost-Morea FNP-BC
Carole Boyd PMH-BC	Lisa Dubrow ANP-BC	Christine Juanta PCCN
Donna Bragg CRN	Christa Dwyer RAC-CT	Ellen Kasprzak CCCTM
Anna Marie Braslow CCRN	Elyse Erato CCRN	Marianne Kiernan CN-BN, CB-CN
Joann Brazil ANP-BC	Stephanie Faggione PCCN	Maria Kirchner CCRN
Jeanne Brennan MEDSURG-BC, CNL	Judee Falcone MEDSURG-BC	Eleana Kitz CCRN
Jessica Lynn Brett MEDSURG-BC	Sarah Farnworth PCCN	Danielle Knuppel NP-C
Sandra Brown MEDSURG-BC	Lorraine Farrell FNP-BC, PAC, CCCTM	Kirsten Lyn Konsevitch MEDSURG-BC
Carissa Jo Burke WCC	Candice Fella MEDSURG-BC, WCC	Jamie Lin Kotler MEDSURG-BC
Maureen Burke HN-BC	Anthony Ferrara CCRN	Austin Kraft CCRN
Alisa Maria Caliendo NP-C	Mary Ferrara OCN	Krystie Kramer NP-C
Trisha Calvarese CAPA	Divina Grace Fordham MEDSURG-BC	Tracy Kuhn PCCN
Allison Camuso MEDSURG-BC	Alanna Foerth CMSRN	Lisa Kuveikis NP-C
Dana Cardiello MEDSURG-BC	Gloria Fortune PMHNP-BC	Jessica Lagala MEDSURG-BC
Jennifer Casilla AGNP-BC	Sandra Helene Galantino PMH-BC	Vivien Langford CRN
Maria Cassara CMSRN	Nicole Helen Geiss MEDSURG-BC	Christine Lao CPAN
Irene Cassata CPAN	Carolyn Germaine CNL	Valarie LaSala ANP-BC
Renee Castelli MEDSURG-BC	Nina Gervais CCRN	Anne Lasota MEDSURG-BC, ONC
Maureen Cataldo PMHCNS-BC	Elizabeth Giordano CCRN-K, CDE	Joanne Lauten SCRNP, CPHQ
Emily Cauchi CCRN	Kimberly Giordano RAC-CT	Katherine Lewin CCRN, RN-BC
Reginald Charles PMH-BC	Cameron Gittens CEN, CRN, VA-BC	Chiu Mei Liu CFCN, CWON, NP-C
Maureen Chernosky CEN, CCRN, RN-BC	Dina Giulietti CEN, NEA-BC	Marigrace LoMonaco MEDSURG-BC
Laura Chesnowitz CEN	Mary Ellen Glennon CCRN, WCC	Michael Andrew Lospinuso MEDSURG-BC
Nancy Clavin CRNI, OCN	Michael Glinka PMH-BC, NEA-BC	Gerard Francis Lunetta ONC
Kristen Clifford CRN	Joan Godbold PMH-BC	Julia Macauley CCRN
Kelly Coleman CNOR		Christine MacEntee CIC, CNE, MEDSURG-BC
Donna Collins CRN, CPAN		Michelle Tomaszewski OCN

Phyllis Macchio ANP-BC
 Andrew Thomas Magnano MEDSURG-BC
 Nita Malik NP-C
 Margaret Maltz CAPA Lora Mamuyac ANP-BC
 Dianne Maniaci PCCN
 Taylor Massaro MEDSURG-BC
 Cynthia Mattson CWOEN
 Jennifer McCormac NP-C, CFCN, CWCN
 Darlene McDay NP-C
 Colleen McDermott CEN
 Kelsey McDonough CCRN
 Shirlee McKenna CAPA
 Christine McKeon CEN
 Phillip Messina NE-BC
 Kelly Miller CCRN
 Ken Mills PCCN
 Komal Mistry CCRN
 Melissa Monaghan CCRN
 Bonnie Moore MEDSURG-BC
 Judith A. Moran NE-BC, GERO-BC
 Susan Morin PMHCNS-BC
 Marie Mulligan CNOR, NEA-BC
 Christine Mulvey CNOR
 Rosa Nania WCC
 Aleksandra Nappo CNOR
 Alain Montesa Neri ANP-BC
 Laura O'Brien CRN
 Marie O'Brien NP-C, PGMT-BC, CCRN
 Janice O'Connor WCC
 Jamie O'Hara CAPA
 Anthonia Onyemem PCCN
 Margie Orale CEN
 Nicole Paccione PCCN
 Brianna Passaretti CCRN, CSC
 Melissa Pearson CEN, FNP-BC, PCCN
 Karen Petrosino WCC
 Karen Picasso CEN
 Elizabeth D. Picozzi MEDSURG-BC
 Miguelina Platt CRN
 Ginger Marie Postiglione MEDSURG-BC
 Samantha Poveda PCCN
 Toni Ann Prost CNOR
 Katherine Quezada MEDSURG-BC, NP-C

Donna Randone WCC
 Christina Razack CGRN
 Colleen Reale CEN
 Ronnie Reid CPTC
 Nicole Rice MEDSURG-BC
 Tina Riggs NP-C, NP-DW
 Nancy Robb MEDSURG-BC, OCN
 Anne Roberts CCM
 Sharyn Rodillado CEN
 Vilma Rosario WCC
 Andrew Rotjan NP-C
 Maria Rubino NP-C, CHPN, PGMT-BC
 Kathryn Rush CCRN, CRN
 Frank Russ PMH-BC
 Lisa Sammarco NE-BC, AMB-BC, FNP-BC
 Jessica Santamaria ONC
 Deirdre Sargent FNP-BC
 Mary Scannell CGRN
 Justine Schleiffelder FNP-BC
 Heidi Schrader NP-C
 Steven Schwab CCRN
 Suzanne Schwamb CMSRN, CNN
 Genine Schwinge ANP-BC, VA-BC
 Michele Nicole Scomello NP-C
 Angela Shapiro CNOR
 Alicia Sheron ONC
 Deborah Shull CPAN
 Marielle Singson CCRN
 Patricia Slokovitz NP-C
 Agnieszka Sobolewska MEDSURG-BC
 Dana Lee Soler NP-C
 Pasqua Spinelli PMHNP-BC
 Tabitha Spinelli WCC
 Karen Sproul NP-C
 Renata Sterne FNP-BC
 Faustina Stoebe CPAN, RN-BC
 Brittany Lauren Stokes GERO-BC, OCN
 Meghan Strebel PCCN
 Justin Stroker PCCN
 Mary Sundquist ACHRN
 Jennifer Susskraut CEN
 Michelle Swensen CPAN
 Julie Tegay CEN

Amanda Trypaluk MEDSURG-BC
 Debra Ann Tuttle MEDSURG-BC
 Erin Vaccariello MEDSURG-BC
 Krista Vanhove PMH-BC
 Thresiamma Puthuvayalil Varughese NP-C
 Christine Viterella PMH-BC
 Samantha Villella PCCN
 Kristy Lynne Vutrano PMH-BC
 Geraldine Walter MEDSURG-BC
 Trudy-Ann Weekes-Roach CNOR
 Steven Weiss NP-C
 Maryanne Wisniewski MEDSURG-BC, ONC
 Andrea Wohlenberg COCN, CWCN, CCCN
 Kaitlyn Wong PCCN
 Sylvia Kathryn Wood ANP-BC
 Michele Wyllie CWS
 Cecil Yoo CDN
 Debra Youngs ONC



Exemplary Professional Practice



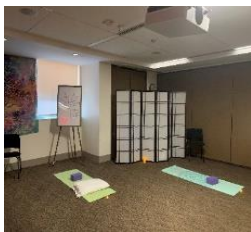
Integrative Pain Management Program

The Integrative Pain Management Program has continued to grow throughout 2020 despite the impact of the pandemic. The program's Nurse Practitioners and Holistic Nurses have evolved from a pain service that uses holistic and integrative care to an Integrative Program that also manages pain.

The program staff have a passion for research and evidence-based practice that drives the care they provide to patients. A grant from the American Society for Pain Management Nurses funded an Institutional Review Board (IRB) approved research study on the feasibility of acupuncture as a non-medication intervention for the management of pain in a hospital. This study, challenged by COVID-19 restrictions, continued to recruit participants. Additionally, the team was accepted to the 2020 ANCC National Magnet Conference to present a podium presentation on The Effect of Reiki for the Total Joint Patient. This presentation will now take place in November 2021.

The Integrative Program has continued to expand the use of aromatherapy and Reiki through CNE approved educational programs offered to Mather staff and our surrounding communities.

The dedication and devotion to holistic care and concern for their Mather family, the Tranquility Center committee created a peaceful space for all staff. This space offered meditation, aromatherapy, Reiki, Yoga, acupuncture and other self-care programs. Through community donations a portable labyrinth was purchased to offer walking mindfulness meditation sessions to decrease the impact of the stressful environment.



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. 2020

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

- ❖ Advanced Practice Nurse – Richard Daly, DNP®, AGACNP, FNP-C
- ❖ Nurse Leader – Annamaria Buzzetta, BSN, RN
- ❖ Clinical Instructor – Maureen Chernosky, MSN, RN, ACNS-BC, CEN, CCRN, NPD-BC
- ❖ Clinical Nurse – Melanie Burns, BSN, RN
- ❖ RN “Rookie” – Camila Martinez, BSN, RN
- ❖ Nursing Assistant – Kristina Oliver, CNA
- ❖ Unit Secretary – Meghan Krulder



Schwartz Center Rounds

The Schwartz Center for Compassionate Care celebrates the compassion, kindness and caring inherent to the healthcare field. In 2020, validating the emotions, actions, and thoughts of healthcare workers as they navigated the COVID-19 pandemic was more important than ever. With direct executive support from Dr. Marie Mulligan and Dr. Joan Faro, a small team of Mather Hospital leaders formed the Schwartz Rounds Planning Committee. Together, Justin Stroker, Lorraine Farrell, Jaclyn Reinoso, Dr. Marie O'Brien, and Dr. Harish Rengarajan, later joined by Emily Jehle, planned and implemented Mather Hospital's inaugural Schwartz Center Rounds on Monday, December 7, 2020. During this one-hour, interprofessional discussion, 43 members of the Mather Hospital family joined via a Zoom webinar to hear the unique stories of three brave team members' experiences during COVID-19 and their strategies for resilience. The planning committee intends to host Schwartz Rounds quarterly, addressing topics that are relevant and meaningful for Mather Hospital's diverse workforce.

TELEHEALTH

The pandemic presented health care with definite urgent threats to human wellbeing. This was especially true for vulnerable populations such as those living with mental illness and substance abuse. Mather Hospital provides a wide spectrum of mental health and substance abuse outpatient treatment, providing thousands of visits each year to those living in our community. In February 2020 the CDC issued guidance to decrease the spread of the COVID-19 pandemic. This included the adoption of social distancing policies that would have otherwise limited the access to Behavioral Health Care.

Through the innovation and multiple efforts of the Behavioral Health Staff, Legal Department, Revenue Cycle, Information Services and Patient Access, the Behavioral Health outpatient programs quickly developed a way to provide these much-needed services through Telehealth. Telehealth is the use of two-way telecommunications to provide health care remotely. This care delivery model rapidly expanded access to care, while significantly reducing disease spread. With little to no interruption to our services, or patient volume, the Mather Hospital Behavioral Health programs maintained or surpassed the number of visits for Behavioral Health Care over the previous year. Not only has our access to care expanded, but our engagement with clients is at an all-time high. With the success of Telehealth Services, Mather Hospital applied for and was granted permanent regulatory permission to continue Telehealth services for our community beyond the pandemic.

2020 Professional Organizations

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	Clinical Instructor	Vice President of Graduate Nursing Student Organization at St. Joseph's College
Maureen M, Chernosky, MSN, RN, ACNS-BC, CCRN, CEN, NPD-BC	Clinical Instructor	New York State Emergency Nurses Association (NYSENA) delegate to the 2020 ENA General Assembly Suffolk County Region ENA Education Chair New York State Delegate to the National ENA General Assembly
Rose Cummings, BSN, RN, CPAN	Clinical Nurse	Local District Board Secretary New York State PeriAnesthesia Nurses Association (NYSPANNA)
Marsha Deckman, MSN, RN, NE-BC, ONC	Director Nursing Professional Development	Ambassador with the Orthopaedic Nurses Certification Board (ONCB) Member of the Orthopaedic Exam Preparation Committee
Marina Grennen	Clinical Instructor	Emergency Nurses Association (ENA) Treasurer Injury Prevention Chairperson for Suffolk County ENA
Theresa Grimes, PhDc, FNP- BC, RN-BC, CCRN	Integrative Pain Service Nurse Practitioner	ASPMN Long Island Chapter Secretary and Chair of the Research Committee Past Presidents' Scholarship Task Force and Distinguished Service Award Selection Task Force
Mary Ellen Lasala, PhD, RN	Clinical Instructor	Co-President Nomination Committee for the Association of Community Health Nurse Educators (ACHNE) Member and Counselor for Sigma Theta Tau International, Kappa Gamma Chapter
Lilly Mathew, PhD, RN	Nurse Researcher/Statistician	Board Member for the Transcultural Nursing Society (TCNS) Northeast Chapter
Marie Mulligan, PhD, RN, CNOR, NEA-BC	CNO / Vice President for Nursing	Nassau-Suffolk Hospital Council Nurse Executives Committee Chairperson
Marie O'Brien, DNP, ANP-C, PMGT-BC, CCRN	Pain Management Coordinator	President of the American Society of Pain Management Nursing (ASPMN) Member of the Steering Committee for the National, Nurse-led Care Consortium PCORI (Patient- Centered Outcomes Research Institute)
Maria Rubino, MSN, ANP-C, AGACNP, PMGT-BC, CHPN	Integrative Pain Management Nurse Practitioner	Recording/Corresponding secretary for the American Society of Pain Management Nursing (ASPMN) – Long Island Chapter
Genine Schwinge, RN, ANP- BC, PNP, VA-BC	Nursing Vascular Access Coordinator	Journal Reviewer for The Journal of the Association for Vascular Access and The Journal of Infusion Nursing
Faustina (Tina) Stoebe, MS, RN, NPD-BC, CPAN	Clinical Instructor	President for NYSPANNA District One (Nassau/Suffolk) Board Member NYSPANNA
Michelle Swensen, BSN, RN, CPAN	Clinical Nurse	Local District Board Treasurer New York State PeriAnesthesia Nurses Association (NYSPANNA)

New Knowledge, Innovations, and Improvements



The Proning Team

As the number of patients diagnosed with COVID-19 began to rise in March 2020, all elective procedures were cancelled. A literature search revealed there is evidence to demonstrate that placing patients with COVID-19 in the prone position helps to expand their lungs and improves their oxygenation. While other units in the hospital were busy caring for these critically ill patients, the decision was made to use the knowledge and expertise of the Operating Room (OR) staff to assist in the care of these patients. The OR staff collaborated with the Safe Patient Handling team to create an action plan to keep both patients and staff safe and enhance outcomes. The proning team consisted of six staff members which included Registered Nurses (RN), Surgical Technologists, Surgical Service Aides, as well as Physical Therapists, Occupational Therapists, and Respiratory Therapists. The proning team leader was always an RN from the OR. Proning carts were created with the necessary supplies to enable proper positioning of the patients. Four different carts were created to mitigate response time. These carts were continually updated as new supplies were being identified each time they were used. These carts included items such as pillows, eggcrate foam, pressure prevention dressings, EKG pads and eye lubricant. The leader confirmed everyone knew their role during the actual patient positioning. The respiratory therapist was responsible for maintaining and protecting the airway, so they were always positioned at the head of the patient. The patient's nurse was responsible for securing any lines, drains, catheters, and IVs. Prior to moving the patient, communication between the team, and direction from the team leader, was crucial. The positioning was a methodical process. It was deliberate, controlled, and perfectly executed to ensure safety. The staff were happy and grateful for the assistance in proning these patients, that many times the proning team was greeted with tears, cheers, and hugs. True collaboration was demonstrated within and among disciplines to assure safe, high quality care to those we are privileged to serve.



ANCC Practice Transition Accreditation Program (PTAP)

2020 Evidence-Based Practice Projects

March/April/May 2020 Cohort

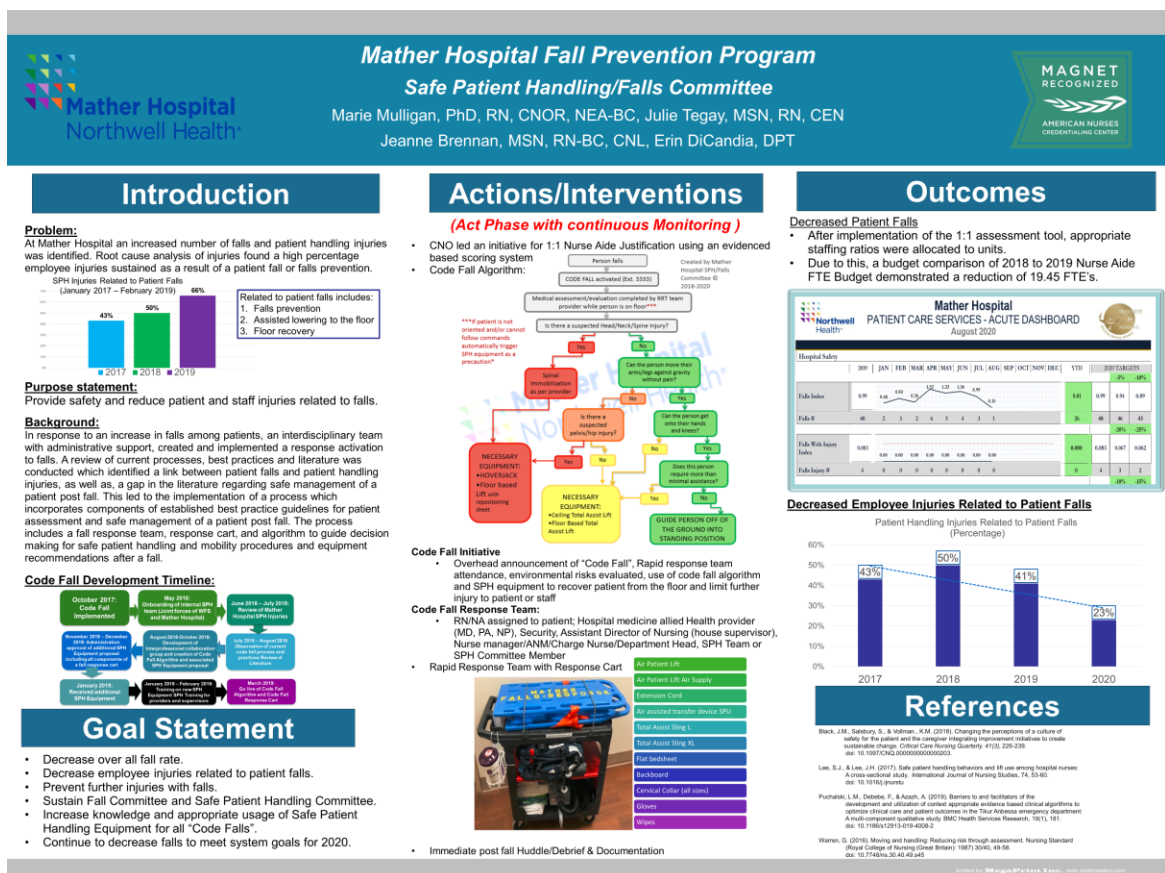
Names	Unit	Project Title
Chelsea Hawks, BSN, RN Anoop Singh, BSN, RN Sarah Schmitt, BSN, RN	2 East (medical/surgical)	<i>Will Effective Hand Hygiene Decrease Infection Rates?</i>
Bria Coleman, BSN, RN Michael Mayer, BSN, RN Waler Heitz, BSN, RN Jillian Krause, BSN, RN	3 East (Telemetry) 3 South (Orthopedic/Spine Surgery) Emergency Department	<i>Will Implementation of a "Break Buddy" Initiative Increase RN Job Satisfaction?</i>
Adina Santana, BSN, RN Ty Vallinoto, BSN, RN	2 West (Adult Psychiatry)	<i>Will Implementation of a Pre-Discharge Educational Intervention Decrease 30-Day Readmission Rates Among Adult Psychiatric Patients?</i>

August/September/October 2020 Cohort

Names	Unit	Project Title
Claudia Bizzaro, BSN, RN Shaun Coon, BSN, RN Nicole D'Amore, BSN, RN Barbara Ferentinos, BSN, RN Samantha Villella, BSN, RN	3 East (Telemetry)	<i>Will the Implementation of the Hester Davis Fall Scale Decrease Patient Falls?</i>
Erin Dawson, BSN, RN Nicole Flatley, BSN, RN Emily Wolff, BSN, RN	3 South (Orthopedics/Spine Surgery) Transitional Care Unit (TCU)	<i>Will Nurse Scripting Increase Patient Satisfaction?</i>
Deanna Lupo, BSN, RN Jesse Vardaro, BSN, RN	2 East (Medical/Surgical) 2 South (Oncology & Medical/Surgical)	<i>Will Implementation of a Post-Code Huddle Decrease Anxiety Among RNs?</i>
Monica Grismer, BSN, RN Danielle Monteverde, BSN, RN Jamie Peterson, BSN, RN	3 North (Medical/Surgical, Surgical Stepdown)	<i>Will More Efficient Discontinuation of Telemetry Monitoring Improve the Patient Transfer Process and Patient Satisfaction and Decrease Length of Stay?</i>
Nina Marie Mazzone, BSN, RN Lisa Whalen, BSN, RN	Emergency Department	<i>Will Improving Efficiency of IV Access in Patients with Abdominal Pain Improve Pain Management and Patient Satisfaction?</i>
Jordan Ahmed, BSN, RN Aneesa Kahn, BSN, RN Camila Martinez, BSN, RN Jessica Pisano, BSN, RN	Critical Care	<i>Will Updating Practice Standards Related to Therapeutic Hypothermia in Post-Cardiac Arrest Patients Improve Outcomes?</i>
Natalya Famighetti, BSN, RN Caroline Gorski, BSN, RN Julianne Martin, BSN, RN	Operating Room	<i>Will Educating RNs on the Clinical Units About Proper Implementation of "Surgical Bundles" Decrease Postoperative Surgical Site Infections?</i>

2020 Virtual Quality Showcase

Hospital Quality week was celebrated on October 29, 2020 with the tenth annual Nursing Quality Showcase sponsored by the Nursing Quality Council and the Hospital Quality Management Department. For the first time, the event was held virtually enabling participation remotely. The virtual posters displayed organization-wide quality improvement projects and outcomes. There were 26 poster presentations demonstrating frontline leadership projects, evidence-based nursing practice projects, interprofessional problem-solving initiatives and departmental Performance Improvement Coordinating Group (PICG) Projects.



Project Lead: Colleen McDermott, RN, ANM
Executive Sponsor: Marie Mulligan, RN, PhD, CNO
Process Owner: Stacey Hartcorn, RN, Interim Nurse Manager
Additional members: Olga Larios, Pharmacy Director; Carla Berger, ED Pharmacist; Tyler Yarema, ED Pharmacist; Sharyn Rodillado, Jeanette Gibbs, Gina Currei, ED Unit Council

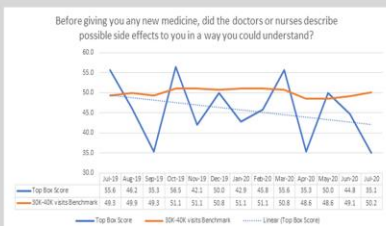
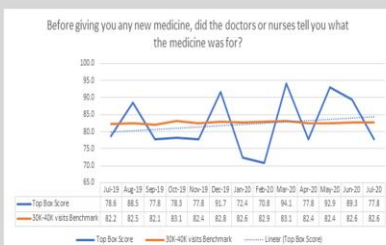
Background

- Press Ganey reports from patients who are discharged from the Emergency Department have indicated low satisfaction scores (10th percentile in May 2020) for the topics of "Before giving you any medicine, did the doctors or nurses tell you what the medicine was for?"
- The Emergency Department also scored in the 2nd percentile in May 2020 for the question "Before giving you any new medicine, did the doctors or nurses describe possible side effects to you in a way you could understand?"

Project

- 8 pamphlets were created that captured the most commonly given medications in the ED
- These pamphlets include antibiotics, pain medications, psychotherapeutics, heart and blood pressure, stomach problems, breathing/allergy problems, and miscellaneous (wounds, supplements, and urinary problems).
- A Clear plastic rack has been placed in the middle of the ED to hold these pamphlets for ease of access of both staff and patients to grab and view

Medication Information Board



Challenges

- ED staff not handing out the pamphlets every time a new medication is administered to a patient
- Patients not receptive to receiving the pamphlets "there is too much paperwork"
- Pamphlet rack empty during high volume times

Lessons Learned

- Compliance with patient knowledge of their medication information increased
- As of August 2020 the department has reached the 99th percentile for "Before giving you any medicine, did the doctors or nurses tell you what the medicine was for?"
- As of August 2020 Press Ganey, we are in the 85th percentile for "Before giving you any new medicine, did the doctors or nurses describe possible side effects to you in a way you could understand?"
- WE are very proud of our August Data however July showed room for improvement, so our next goal is to keep a consistent increase in the percentile

Next Steps

- Medication pamphlets to expand to individual areas of the Emergency Department in addition to the main board in the hallway for easier access for staff

Reduction of Hospital Acquired Pressure Injuries

Mary Ellen Glennon
MSN, RN, CCRN, WCC

Sherry Anderson
BSN, RN-BC, COCN, CWCN

Julia Macauley
MSN, RN, WCC, CCRN

Jennifer McCormac
MSN, NP-C, CWCN, CFCN



Purpose

To reduce the rate of hospital acquired pressure injuries, improve patient outcomes and increase patient satisfaction.

Relevance

Hospital-acquired pressure injuries can have a negative affect on the patient's outcome. The CMS Hospital-Acquired Condition (HAC) program identifies HAPI's (stage 3&4), as "never events". The treatment of a HAPI is costly for an organization due to increased length of stay, impending legal action and decreased patient satisfaction. The cost of a HAPI to the patient is related to pain and suffering, disfigurement and increase risk for mortality. AHRQ(Agency for Healthcare Research and Quality) found that from 2014-2017, there was a 13% decrease in the HAC rate but, the HAPI rate increased by 6%. HAPI's cost the U.S. healthcare system an estimated \$11 billion annually.

Implementation

Members of the Pressure Injury Prevention Task Force identified weak areas and implemented new practices and processes:

- Revised pressure injury policy
- Education class to incoming new residents
- Ongoing RN mandatory classes
- New graduate RN program: "spend day with wound care". Hands on instruction for assessment, treatments and documentation. New RN accompanies wound care team on consults.
- Annual wound care fair with display of products and vendors present.
- Replacement of mattresses to provide all hospital beds with Hill Rom Versa Care pressure redistribution mattresses.
- Replaced EHO boots with CAIR Boots to be used to off load heels while in bed in alignment Northwell Health best practices.
- Revised format for assessing/documenting wounds to include direct care nurse presence during evaluation/staging and improve consistency of charting.
- Open communication with Clinical Documentation Department to correct documentation errors and improve consistency for charting of wounds.
- Development of a nursing assistant education team utilizing pressure injury prevention bundle.

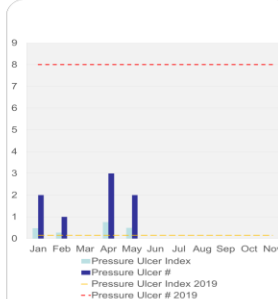
Pressure Injury Prevention Task Force

Julia Macauley	Critical Care Director
MaryEllen Glennon	IPWC
Jennifer McCormac	WC NP
Sherry Anderson	NPD WC
Nicole Amendola	NM 3N
Kim Bauman	NPD
Jeanne Brennan	MS Director
Sarah Eckardt	Statistician
Grace Ebinger	Central Distribution NM
Joseph Hein	NPD
Kathleen Long	NM 3S
Rosemary Ryan	Nutrition

Outcomes

There were **zero** incidents of HAPI in the last five months of 2019 with a decrease rate of 2 from 2018.

There have been **zero** incidents of HAPI since May 2020.



Conclusions

Early identification of patients at risk can help reduce the incidence of pressure injuries. This can be done through education and consistent use of prevention techniques. Improvement is an ongoing process which can be achieved with commitment, cooperation and communication among caregivers. We continue to strive for zero HAPI.

COMING TOGETHER IS A BEGINNING.
KEEPING TOGETHER IS PROGRESS.
WORKING TOGETHER IS SUCCESS.

References

Preventing Pressure Ulcers in Hospitals. Content last reviewed October 2014. Agency for Healthcare Research and Quality, Rockville, MD.
<https://www.ahrq.gov/patient-safety/settings/hospital/resource/pressureulcer/tool/index.html>

Fact sheet ELIMINATING SERIOUS, PREVENTABLE, AND COSTLY MEDICAL ERRORS - NEVER EVENTS. (2006, May 18). Retrieved October 21, 2020, from <https://www.cms.gov/newsroom/fact-sheets/eliminating-serious-preventable-and-costly-medical-errors-never-events>



The Effectiveness of Integrative Health Care Practices in Decreasing the patients perceived Anxiety Mather Partial Hospital Programs: Adult, Adolescent & Eating Disorder

Sue Morin, NPP, Gloria Fortune, NPP, Amy Dittler, NPP, Pasqua Spinelli, NPP, Kathy Jochen, RNC

Introduction

Problem: Unmanaged anxiety can lead to **diminished functioning** and **potential health and safety risks**. Patients attending Partial Hospital experience levels of Anxiety that range from mild to severe. Untreated Anxiety impacts safety, level of functioning and readiness to discharge to a less restrictive level of care.

Purpose: Mather Hospital Northwell Health Outpatient, Partial Hospital Psychiatric Program (Adult, Adolescent and Eating Disorder) is exploring the effectiveness of Integrative Health Care Practices on the following outcomes:
1. **Reducing Anxiety & Improving Mood among patients.**
2. **Improving knowledge and readiness for change**
3. **Improving Patient Readiness For Discharge**

Goal Statement:

•The Nurses at Partial will develop an **Integrative care bundle** delivered in weekly Integrative Health Care Groups to assist clients in developing a healing environment that may lead to **perceived reduction in anxiety, improved mood, and improved readiness for Discharge** at a goal rate of 80%.

Methods

Actions/Interventions:

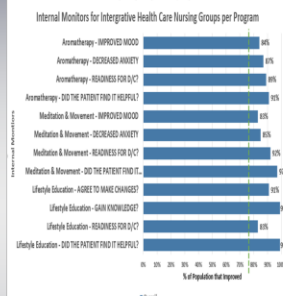
- Weekly Integrative Care Nursing Groups were initiated in January. Method of delivery was impacted by the pandemic.
- These Groups include:
 - Movement & Meditation
 - Health & Lifestyle Education
 - Aromatherapy
 - Reiki (to begin 10/2020)

- Anxiety & Mood levels & additional questions are evaluated and recorded before & after each group, via zoom chat, email, or in person.

Results are recorded in the EMR and reports are pulled from CPM

- Patients complete the **Generalized Anxiety Disorder Scale (GAD-7)** on admission and Discharge to evaluate how well these Interventions lower perceived Anxiety scores. In 2019, the average outcome score for the program decreased by 5.63 points. **The goal is to exceed this baseline.**
- The program will also look at the Impact these interventions may have on perceived **Readiness for Discharge** with a goal of meeting the **rank of 85 at a rate of 80%** on this **Press Ganey Measure**.

Results



All Goals were Reached on the Internal Monitors with >80% for each factor January through September 2020

GAD-7 Scores: Sum of GAD-7 Score difference from Admission to Discharge/Patient Encounters:
 $1828/318 = 5.75$
Average Point Decrease in Anxiety Score. This reflects an improvement in Anxiety scores at a rate of **82%**

Press Ganey Rank of 85 For Question: Extent To Which you felt Ready to be Discharged was met 7 out of 10 periods at a rate of **70%**

Conclusions

• The Introduction of these Integrative Health Care Nursing Groups has been an effective Evidence Based Approach to improve Behavioral Health Outcomes within three distinct programs at the Partial Hospital Program

• Continue to Monitor our Metrics to evaluate the response to our Treatment Modality on our targeted goals, and look for additional factors that may further achieve improved outcome measures.

• Continue to work at achieving Press Ganey Rank of 85 at a rate of 80% for question, "Felt Ready to be discharged."

• These groups will become a standard of care in all of our Partial Hospital Programs.

Bibliography

- Manicor et al. BMC, Establishing key components of yoga interventions for reducing depression and anxiety, and improving well-being Complementary and Alternative Medicine (2015) 15:85 DOI 10.1186/s12906-015-0614-7
- Bobbi Jo H. Yarborough*, Scott P. Stumbo, Julie A. Cavese, Micah T. Yarborough, Carla A. Green. Patient perspectives on how living with a mental illness affects making and maintaining healthy lifestyle changes Patient Education and Counseling 102 (2019) 346–351

Improving the Quality of Safety Planning for Suicide Prevention on an Inpatient Psychiatric Unit Joan Godbold RN-BC Shannon Kennedy RT

Introduction

BACKGROUND:

- Over 44 million Americans are living with a mental illness in the United States today.
- Suicide is the 4th leading cause of death among adults and the 3rd leading cause of death of children and adolescents.
- Safety Planning: Is the Development of an external plan to recognize suicidal thoughts and assist with managing them safely during times of crisis.
- Joint Commission National Patient Safety Goal 2020: To Reduce the risk of suicide for patients whose primary reason for care is behavioral health

Methods

Process:

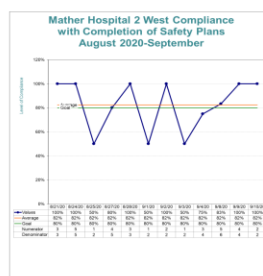
- Utilize the Stanley and Brown Safety Plan intervention method
- 6 basic elements in the patients own words
- Placed in every patient's admission packet
- Patients attended Weekly safety planning groups
- Plan reviewed prior to discharge
- Patient given a copy at discharge
- Initiate staff education and training

Goal:

The Goal of the project was to engage patients in the process of developing a comprehensive safety plan and to improve the quality of the safety plan so that it would become a useful tool for patients who are in crisis post discharge.

Results

- A scale to determine the Quality of the safety plan was developed into quantifiable scoring system.
- We determined that 76% of our safety plans met the quality standard in which the average quality score was 16.3 out of 21.
- Compliance with Completion of safety plans was determined to be 82%



Conclusions

- Goal was met in improving the quality of content within the safety plan.
- Next steps are to determine the ongoing compliance rate of the safety plan for 2021.

Bibliography

- Safety Planning intervention: a brief intervention to mitigate suicide risk, B. Stanley 2012
- Assessing Variability and implementation fidelity of suicide prevention safety planning, JM Gamarra et al 2015
- Quality improvement evaluation of the feasibility and acceptability of adding a concerned significant other to safety planning for suicide prevention BB DeBeer, 2019

IRB Approved Nursing Research Studies

Title	Investigators	Study Types
Effect of Reiki Therapy on Pain Among Postoperative Total Joint Replacement Patients	Marie O'Brien, DNP, ANP-C, PMGT-BC, CCRN	Quantitative
Acupuncture for Pain: A Pragmatic Pilot Study for the Inpatient Pain Service	Marie O'Brien, DNP, ANP-C, PMGT-BC, CCRN	Quantitative
Coping and Adaptation Among Nurses During the Coronavirus (COVID-19) Pandemic: A Mixed Methods Study	Judith Morn-Peters, DNSc, RN, NE-BC, BC	Quantitative Qualitative
Impact of Educational Program "Expressions of Humanism" on Caring Behaviors, Patient Experience and Quality Outcomes	Jane White, PhD, RN	Quantitative
US Clinician Wellbeing Study	Marie Mulligan, PhD, RN, NEA-BC, CNOR	Quantitative

2020 Publications



The American Psychiatric Nurses Association November/December 2020

Effects of Animal-Assisted Activity on Mood States and Feelings in a Psychiatric Setting

Sandra Brown, MSN, RN-BC; Jill Snelders, BS, MBA, CTRS; Joan Godbold, BSN, RN; Judith Moran-Peters, DNSc, RN, NE-BC, BC; Denise Driscoll, RN-BC, CARN, PMHCNS-BC, NPP; Donna Donoghue, MD, Lilly Mathew, PhD, RN; Sara Eckardt, MS, BS



The Journal of Psychosocial Nursing and Mental Health Services February 2020

Making Fall Risk Assessment Clinically Relevant in an Adult Psychiatric Setting

Lilly Mathew, PhD, RN; Darlene Steigman, RN-BC, PMHNP-BC; Denise Driscoll, RN-BC, CARN, PMHCNS-BC, NPP; Judith Ann Moran-Peters, DNSc, RN, NE-BC, BC; Ira M. Fischer, MBA, MA; Patricia Cordle, RN-BC, MA; Vanessa Marie Bishop Hyde, BS; Sarah Eckardt, MS, BS

Nursing Poster and Podium Presentations

Date(s)	Presenter	Podium/Poster Title	Conference	Location
February 21-23, 2020	Marie Mulligan, PhD, RN, NEA-BC, CNOR	Feasibility of RNs Using Scribes in the Acute Care Setting: Challenges to Implementation	Marcus Evans Annual Healthcare Leaders Conference	San Diego, Ca.
June 6, 2020	Denise Driscoll, RN-BC, CARN, PMHCNS-BC, NPP	Changing Stigmatic Perceptions Related to Mental Illness and Substance Abuse Among Public Library Staff: A Nursing-Library Community Initiative	Medical and Scientific Libraries Association of Long Island (MEDLI) 2020 Spring Meeting	ZOOM Video Conferencing
September 30 – October 4, 2020	Joan Godbold, BSN, RN-BC Jill Snelders, BS, MBA, CTRS	Behavioral Health Patients' Perceptions of Benefits Associated with a Peer Support Program	American Psychiatric Nurses Association (APNA) 34 th Annual Conference	ZOOM Video Conferencing
September 30 – October 4, 2020	Sandra Brown, BSN, RN Joan Godbold, BSN, RN-BC Jill Snelders, BS, MBA, CTRS Sara Eckardt, MS, BA	Effects of Animal Assisted Activity on Mood States and Feelings in a Psychiatric Setting	American Psychiatric Nurses Association (APNA) 34 th Annual Conference	ZOOM Video Conferencing
October 23-24, 2020	Denise Driscoll, RN-BC, CARN, PMHCNA-BC, NPP Lilly Mathew, PhD, RN	Changing Stigmatic Perceptions Related to Mental Illness and Substance Abuse Among Public Library Staff: A Nursing-Library Community Initiative	American Nurses Association (ANA) New York 8 th annual meeting/conference	ZOOM Video Conferencing
November 12, 2020	Judith Moran-Peters, DNSc, RN, NE-BC, BC	Coping and Adaptation Among Nurses During the Coronavirus (COVID-19) Pandemic: A Mixed-Methods Study	Northwell Health System's 26 th Annual Nursing Research Conference	ZOOM Video Conferencing

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