

# **Mather Hospital** Nursing Annual Report 2022



**Mather Hospital**  
Northwell Health®



# Truly *Compassionate*




**Mather Hospital**  
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# 3 East Telemetry

- ✓ New Initiative
- ✓ Inpatients with delirium/dementia, will the addition of music therapy compared to our current practice reduce the number of falls on the unit?



### Gold is Cool but Platinum Rules: Improving Therapeutic Communication Between Nursing staff and Elderly Patients

Brianna Mahon BSN, RN  
Chelsea Steigman BSN, RN  
Brianna Genova BSN, RN  
Courtney Reid BSN, RN



#### Problem

Current communication styles between staff and patients can be viewed as ineffective, hinder nurse-patient relationships, and decrease quality of care provided. Current nursing practice often employs the golden rule, which emphasizes nurse/staff preference over the patient's preferences.

#### Purpose

Improve nurse-patient communication and rapport. Improve HCAHP scores in communication categories and maximize the therapeutic relationship while emphasizing patient preference.)

#### Background

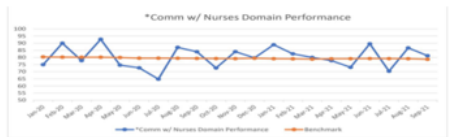
In five major HCAHP scoring categories related to patient experience, "Communication with Nurses", "Nurse Courtesy and Respect", "Nurse Listen", "Nurse Explain", and "Recommend This Hospital", scoring has been suboptimal in recent assessments. HCAHP scores reflect patient experience and satisfaction and care provided. While still above HCAHP benchmark goals, the staff aims to implement interventions that will improve the patient's perception of communication and care within the hospital as measured by HCAHP scores.

#### Challenges

Covid-19 admissions pose as a limitation to this study, as patient isolation and staff use infection prevention control hinder facilitated communication between staff and patients.


#### Methodology/Interventions

Staff members distributed pre-surveys to staff members prior to education material being distributed (video, pamphlets). Employee knowledge of the "golden rule" and "platinum rule" was gauged before the intervention was provided. Improvement benchmarks are reflected in the HCAHP scores related to patient experience.



#### Outcomes

Staff demonstrated adequate understanding of implementing the "platinum rule" in patient communication post-intervention. HCAHP scoring will be monitored for improvements in the five major categories assessed in the data collection performed before intervening.



#### Lessons Learned

Limitations to this study include increased COVID-19 admissions, which is a known inhibitor of quality improvement benchmarks.

#### Next Steps


Implement the "Platinum Rule" in patient care to improve therapeutic relationship and improve communication between staff and hospital patients.

#### References

Norby, S.M. (2019). A Vision of the Platinum Rule. Mayo Clinic Proceedings, 95(2), 210-212. <https://doi.org/10.1016/j.mayocp.2019.12.022>  
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Storms, L.L. (2008). Therapeutic Communication Training in Long-Term Care Institutions: Recommendations for Future Research. Patient Education and Counseling, 73 (1), 8-21. <https://doi.org/10.1016/j.pec.2008.05.026>  
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Williams, K., Kemper, S., & Hummert, M.L. (2004) Enhancing Communication with Older Adults: Overcoming Elderspeak. Journal of Gerontological Nursing. 30(10). 1-9 DOI: 10.3928/0098-9134-20041001-08  
Williams, K., Kemper, S., Hummert, M.L. (2003). Improving Nursing Home Communication: An Intervention to Reduce Elderspeak. The Gerontologist, 43(2), 242-247. <https://doi.org/10.1093/geront/43.2.242>

#### Contact

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Courtney Reid [creid11@northwell.edu](mailto:creid11@northwell.edu)







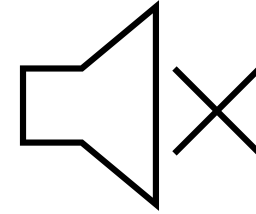
## *2 East*

- Interdisciplinary collaboration with Psychiatric Recreation Therapy to improve experience of stay for the population of patients with dementia.
- Anticipated outcomes: reduce employee injury, instance of restraint use, and activation of Code Grey.



# 3 South

- PI Project: HCAHPS Quiet at Night



Implemented in June (53.9% Top Box) with consistent improvement through September (71.4% Top Box)



# Patient Experience Accomplishment & Performance

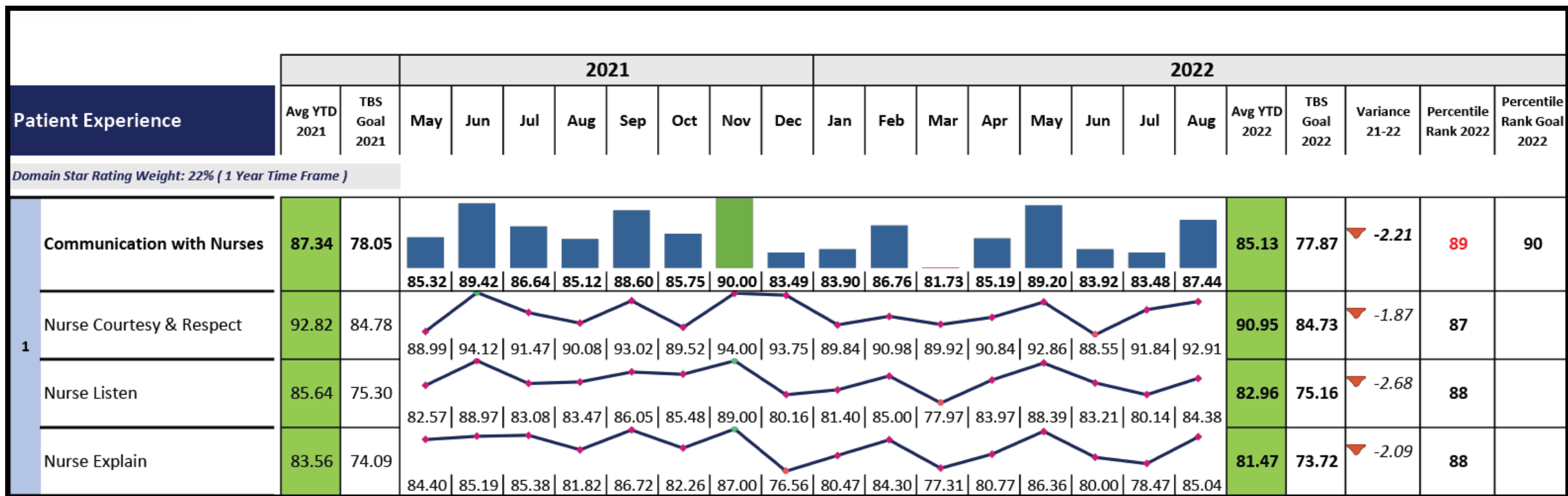


Year-to-date  
2022

- In 2022, Mather Hospital Northwell Health was one of just 399 hospitals in the US to receive the Healthgrades *Outstanding Patient Experience Award*
- HCAHPS “Communication with nurses” Domain
- HCAHPS “Likelihood to recommend”
  - Emergency Department
  - 3 North, Progressive Care
  - 2 East Bariatrics/Telemetry
- 89.2% Nurse Manager Rounding across inpatient units (91<sup>st</sup> percentile, Stretch)
- 85.2% Inpatient Communication with nurses Domain (90<sup>th</sup> percentile, Target)
- 98.4% Ambulatory Surgery “Facility/Personal Treatment” Domain (84<sup>th</sup> percentile, 24<sup>th</sup> percentile point improvement, Stretch)
- 87<sup>th</sup> percentile Recommend the Emergency Department (Threshold)
- Addition of Associate Patient & Customer Experience Liaisons



# Patient Experience – Communication with Nurses





# *Expansion of our Patient Experience Team*

With the support of Dr. Mulligan, the Office of Patient & Customer Experience welcomed two Associate Patient & Customer Experience Liaisons in July of 2022.

## Since the addition of these team members:

- **500%** increase in Nursing team member recognition across all settings monthly.
- **400%** increase in Service Facilitation documentation monthly.
- Increased recruiting efforts for Mather Hospital's Patient & Family Advisory Council.



# Truly *Innovative*



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# Tranquil Thursday Program

This program is available for staff through our Integrative Care Team and offers self-care and other mindfulness-based activities that support overall well-being. The program runs in tandem with the Integrative Oncology Clinic (ReNew Program) which is funded through a generous grant from the Katz Center for Woman's Health. Any appointment not scheduled by our ReNew participants is open to our Mather family - nurses, physicians, ACPs, residents, respiratory therapists, PT/OT, pharmacy and all support staff - everyone!



Mather Hospital Integrative Care program presents:

## **Restore, Nurture and Empower for Women (ReNew)**

A free program for women with cancer and cancer survivors that empowers women with self-management tools shown to restore and nurture a sense of well-being.

**Thursdays, 11am to 7pm, Conference Rooms 1 and 2**

ReNew programs include:

- Acupuncture
- Meditation
- Emotional freedom technique
- Guided imagery
- Journaling
- Reiki
- Yoga
- Health coaching
- Oncology massage coaching with a care partner
- Stress management

This program is funded through a generous grant from the Katz Institute for Women's Health.



# 2022 Nursing Research and Evidence-Based Practice Accomplishments

Presentation	Organization	Presenter(s)
Changing Stigmatic Perceptions Related to Mental Illness and Substance Abuse Among Public Library Staff. (Podium)	Transcultural Nursing Society (TCNS) NE Chapter	Denise Driscoll, RN-C, CARN, PHHCS-BC, NPP Lilly Mathew, PhD, RN, NPD-BC
Perceptions of Authentic Nurse Leader Attributes Among Clinical Nurses and Nurse Leaders. (Podium/Zoom)	Northwell Health Institutes for Nursing 1 <sup>st</sup> Inaugural Session Nursing Research/EBP Dissemination Series	Marie Mulligan, PhD, RN, CNOR, NEA-BC
Evidence of Changing Perceptions Related to Drug Addictions Among Interdisciplinary Healthcare Staff Post Narcan Education. (Podium)	NYU/Langone (Long Island-Winthrop) 9 <sup>th</sup> Annual Nursing Research/EBP Conference	Denise Driscoll, RN-C, CARN, PHHCS-BC, NPP Lilly Mathew, PhD, RN, NPD-BC
Improving Inpatient Medical Oncology Patients’ Experience Through “Goals of Care Conversation”. (Poster)	2022 Patient Experience (PTEXP) Northwell Health	Bryce Paganas, BSN, RN Deanna Lupo, BSN, RN
Use Your Words: The Power of pf Metaphor to Empower Patients and Enhance Comfort. (Podium)	The New York State Pain Society Annual Meeting and Scientific Sessions The Culinary Institute of America	Marie O’Brien, DNP, ANP-C, PMGT-BC, CCRN
Using the Roy Adaptation Model to Examine Nurses’ Coping and Adaptation During COVID-19. (Podium/Panel)	Catholic Health System Annual Nursing Research and EBP Conference	Judith Moran-Peters, DNSc, RN, NE-BC
Using Your MEWS to Improve Inpatient Rest. (Poster/Virtual) <i>*Winner of the 2022 Northwell Academic Competition</i>	Northwell Health Annual Academic Competition & Research Symposium	Lorretta Hill-Civil, MSN, RN, PCCN
Increasing Smoking Cessation Quitline Acceptance Rates Among Behavioral Health Inpatients: Effectiveness of an Interdisciplinary Educational Program. (Poster)	NYU/Langone 25 <sup>th</sup> Annual Nursing Research & EBP Conference	Jill Snelders, CTRS Denise Driscoll, RN-C, CARN, PHHCS-BC, NPP Lilly Mathew, PhD, RN, NPD-BC Robert Benney, MSN, RN Jennifer Colucci, BSN, RN, PMH-BC Joanna Stanczak, MD



# 2022 Nursing Research and Evidence-Based Practice Accomplishments

Presentation	Organization	Presenter(s)
Examining Nurses Coping and Adaptation During the COVID-19 Crisis. (Poster)	New York Organization of Nurse Executives & Leaders (NYONEL)	Judith Moran-Peters, DNSc, RN, NE-BC
Creative Solutions to Pain Management: An Experiential Approach. (Podium)	American Society for Pain Management Nursing (ASPMN) 32 <sup>nd</sup> National Conference	Marie O’Brien, DNP, ANP-C, PMGT-BC, CCRN
Serving Patrons with Mental Illness and Substance Abuse in a Public Library Setting: An Innovative Nursing Library Partnership (Podium)	Council for the Advancement of Nursing Science (CANS) State of the Science Congress “Social and Structural Determinants of Health”	Denise Driscoll, RN-C, CARN, PHHCS-BC, NPP Lilly Mathew, PhD, RN, NPD-BC Debra Engelhardt, MLS
Authentic Nurse Leadership: A New Measurement Tool for Nurse Leaders. (Podium) Using the Roy Adaptation Model to Examine Coping and Adaptation Among Nurses During COVID-19. (Poster)	ANCC National Magnet Conference	Marie Mulligan, PhD, RN, CNOR, NEA-BC Judith Moran-Peters, DNSc, RN, NE-BC
Evidence of Changing Perceptions Related to Caring for Patients with Substance Abuse Disorder Among Interdisciplinary Staff Post Narcan Education. (Poster) What’s Stressing You? Incorporating Discussion of Stressors in a Nurse Residency Program. (Poster)	Northwell Health Institute for Nursing 28 <sup>th</sup> Annual Nursing Research & EBP Conference (Virtual Format)	Denise Driscoll, RN-C, CARN, PHHCS-BC, NPP Lilly Mathew, PhD, RN, NPD-BC  Marsha Deckman, MSN, RN, NE-BC, ONC Patricia Alban, MSN, RN-BC, NPD-RN, CEN
Authentic Nurse Leadership: Perceptions of Nurse Leader Attributes Among Clinical Nurses and Nurse Leaders. (Podium)	Institute for Healthcare Improvement (IHI) Forum & Scientific Symposium	Marie Mulligan, PhD, RN, CNOR, NEA-BC
Improving Patient Satisfaction Through a “Commit to Sit” Initiative. (Poster)	Northwell Health Institute for Nursing Annual Nursing Education Conference (Virtual Format)	Patricia Alban, MSN, RN-BC, NPD-RN, CEN Kim Bauman, MSN, RN, PCCN-K
Changing Perceptions Related to Caring for Patients with Substance Abuse Among Interdisciplinary Staff: A Narcan Education Initiative.	ANA – New York Annual Conference Niagara Falls, NY	Denise Driscoll, RN-C, CARN, PMHCS-BC, NPP Alice Miller, LCSW-R Lilly Mathew, PhD, RN, NPD-BC



# 2022 ANCC Annual Magnet Conference





# 3 East Telemetry

## Using Your MEWS' to Improve Inpatient Rest

Loretta Hill-Civil, MSN, RN, PCCN, Department of Nursing, Mather Hospital



**Winner** – Nursing - 57th Annual Northwell Health/Zucker School of Medicine Academic Competition

### Using MEWS To Improve Inpatient Rest

**Presenter:**  
Loretta Hill-Civil MSN, RN, PCCN

#### Introduction

- Uninterrupted rest among patients overnight in the hospital setting promotes a speedier healing process. Evidence suggests that creation of an innovative inverse modified early warning score (MEWS) may result in a significant improvement in "Noise at Night" metrics on the patient experience survey.
- Data suggest there may be a correlation between increase activation of the rapid response system or how it will impact rapid response metrics-analyze any changes in RR data.

#### Purpose

- Improve the patient experience "Noise at Night" score by implementing an innovative inverse MEWS protocol for telemetry monitored patients.

**Goal:** Exceed the quietness at night threshold, goal and stretch benchmarks of 51.2 by 1% base mark established by Northwell 2021.

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- Among patients in a community hospital at night
- Will implementation of inverse MEWS protocol versus
- "current practice" of waking patients up at 2am to take vital signs
- Improve "noise at night" satisfaction by surpassing stretch benchmark?

#### Methods

- Systematic literature review from 2016 to 2021 in Pub Med, WGU library, and Google Scholar database. 30 articles analyzed to develop evidence summary.
- Inverse MEWS implementation (pilot on 3 East/Telemetry).
- Changed vital sign times to 9pm (available prior to unit physician rounds).
- Patients on comfort care and actively dying, with acute confusion, or MEWS score  $\geq 7$  met the **exclusion criteria**.
- CDU patient rooms 2 to-6 from ED MEWS scores were not calculated.

#### Why Can't We Just Let Sleeping Patients Lie ?

Physiological **vital signs** calculated and tracked using the MEWS score **inversely**, would improve safety by adjusting patient monitoring according to their **individual risk profiles**.

Calculated MEWS Scores 0-2 would omit overnight vital signs taking in favor of 2-hour nurse rounding observations, continuous pulse oximetry and cardiac monitoring.

Low scoring patients were at **significantly lower** likelihood of having an **adverse health event** deeming them low risk (Mizrahi et al., 2020; Petersen et al., 2016).

#### Patient Experience (FY 2021 – 2022)

Patient Experience	2021												2022		Variance	Percentile Rank YTD	
	YTD 2021	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	YTD 2022	Jan	Feb			
"I Rest"	45.00											50.00			50.00	N/A	33
"I Eat"	53.05	52.50	52.54	54.25	54.87	54.87	52.88	53.85	47.86	50.00	52.54	57.88	55.51	55.51	58.33	Δ: 0.6	57
"I Sleep"	45.00											50.00			50.00	N/A	33
"I Hear"	45.00	52.50	52.54	54.25	54.87	54.87	52.88	53.85	47.86	50.00	52.54	57.88	55.51	55.51	58.33	Δ: 0.6	57
"I Feel"	45.00											50.00			50.00	N/A	33
"I Think"	45.00	52.50	52.54	54.25	54.87	54.87	52.88	53.85	47.86	50.00	52.54	57.88	55.51	55.51	58.33	Δ: 0.6	57
"I Understand"	45.00											50.00			50.00	N/A	33
"I Remember"	45.00	52.50	52.54	54.25	54.87	54.87	52.88	53.85	47.86	50.00	52.54	57.88	55.51	55.51	58.33	Δ: 0.6	57

SCAN ME

**References:** Scan QR code for references and access to EBP research paper.

#### Results

3 East/Telemetry weekly MEWS score monitoring daily averages=3.5

Vital Signs	Blood Pressure	HR	RR	Temp	SPO2	Total MEWS Score
325-2	100/62	80	18	98.199%2Lo2		6
326-2	119/71	105	18	98.395%RA		4

n = 30/shift

#### Modified Early Warning Score INVERSE MEWS STABLE CHART

Score	3	2	1	0	1	2	3
Resp	<9	9-14	15-20	21-29	>30		
Pulse/min	<70	<40	41-50	51-100	101-110	111-129	>130
Syst. BP	71-80	81-100	101-109	>200			
Temp C	< 35	35.1-36	36.1-38	38.1-38.5			
CNS SCORE	NEW AGITATION OR CONFUSION		ALERT	ALERT		UNRESPONSIVE	

#### ACTION PLAN

MEWS SCORE	0-1	2-3
PATIENT RISK	STABLE	
FREQUENCY OF OBSERVATIONS	MINIMUM 12-HOURLY	
ACTION	CONTINUE WITH OBSERVATIONS AT CURRENT FREQUENCY	

#### Conclusion

Analysis revealed concerns with documented respiratory rate accuracy (e.g., "irregular respiration rate.")

Nurses hesitant to intervene according to the calculated MEWS scores (i.e., nurses with less than 1 year of hospital acute care experience.)

MEWS may have an incidental impact on rapid response metrics (i.e., increase RRTs.)

#### Recommendations

- Create a "Do Not Disturb" order set for physicians' consideration during round on the night shift.
- MEWS measurements may be repeated anytime during the night as indicated by nurses and physicians (Van Galen et al., 2006).
- Refrain from using MEWS as intended to identify patients at high risk for sudden death or those requiring a higher level of care with scores > 7 (Mizrahi et al., 2020; Gerry et al., 2020).



## 2East Bariatrics – Reduction of Zofran use after Bariatric surgery

39.1% reduction of  
postoperative Zofran  
use from  
January 2022 – July 2022

2022 Bariatric Procedure Volume by Month for Service Line												
Count of Surgery Group	2022											
Surgery Type	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Total 2022
Sleeve	54	26	49	40	43	42	41	43	32	46	37	453
Primary	52	25	47	37	41	42	40	42	30	45	35	436
Revision	2	1	2	3	2		1	1	2	1	2	17
Bypass	6	12	4	9	2	7	7	4	7	4	13	75
Primary	2	3	2	3	1	3	2		2	2	4	24
Revision	4	9	2	6	1	4	5	4	5	2	9	51
Band				1								1
Revision				1								1
Band Removal	1	1	2	1	2	1		2				10
Revision	1	1	2	1	2	1		2				10
Band/Port Reposition		1										1
Revision		1										1
<b>Grand Total</b>	<b>61</b>	<b>40</b>	<b>55</b>	<b>51</b>	<b>47</b>	<b>50</b>	<b>48</b>	<b>49</b>	<b>39</b>	<b>50</b>	<b>50</b>	<b>540</b>



# *3 North*

## ***New Initiative***

Microsoft Teams  
Text-Based  
Communications  
Pilot Program  
**Initiated 10/2022**





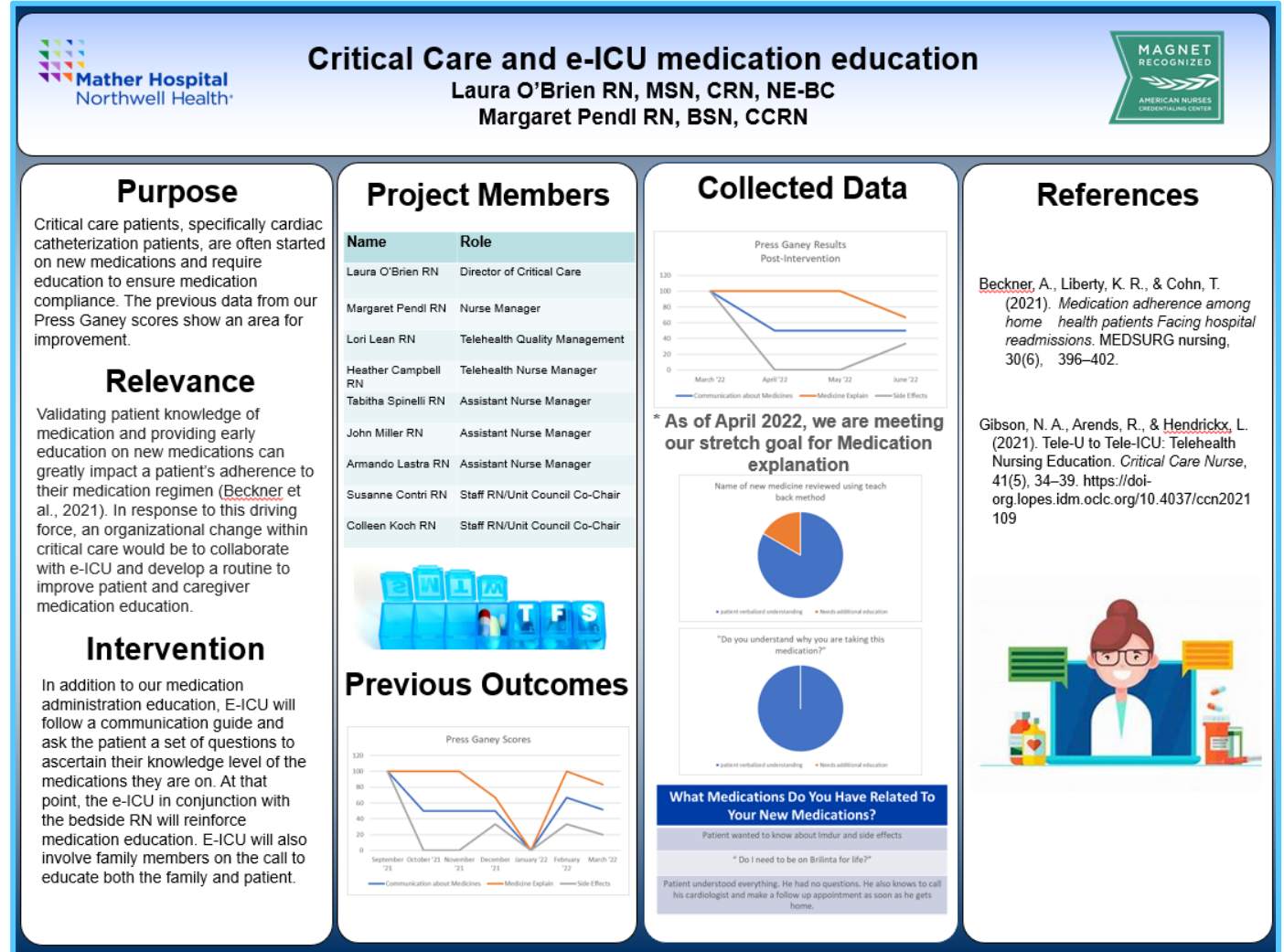
# Critical Care

## Critical Care and e-ICU Medication Education

Laura O'Brien, RN, MSN, CRN, NE-BC & Margaret Pendl, RN, BSN, CCRN



Mather Hospital Northwell Health Quality Showcase 2022  
Voted "Project Most Impactful for Mather's Strategic Plan"





# Behavioral Health

## Increasing Smoking Cessation Quitline Acceptance Rates among Behavioral Health In-Patients

Denise Driscoll, RNC, CARN, PMHCNS, NPP & Jill Snelders, RT

Poster Presented at the NYU 25th Annual Nursing Research Conference





# *Surgical Services - Recognitions*

- Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program
- Robotic & Bariatric COE Site Inspection
  - MBSAQIP Re-Accreditation
  - COERS Re-Accreditation
- Mather Hospital Surgery department addition of third Intuitive da Vinci Robot
- Dr. Sathi, Gleolan Fluorescence Guided Surgery 2022
- Spine image guided Surgery with the use of Stryker/Brainlab AIRO
- Breast Surgery Recognition 2022, Kubtec (Faxitron) & SaviScout





# *Surgical Services - Innovation*



Mather Hospital is committed to innovation, technology and growth



2011 purchased our first da Vinci Robot to enhance patient outcomes

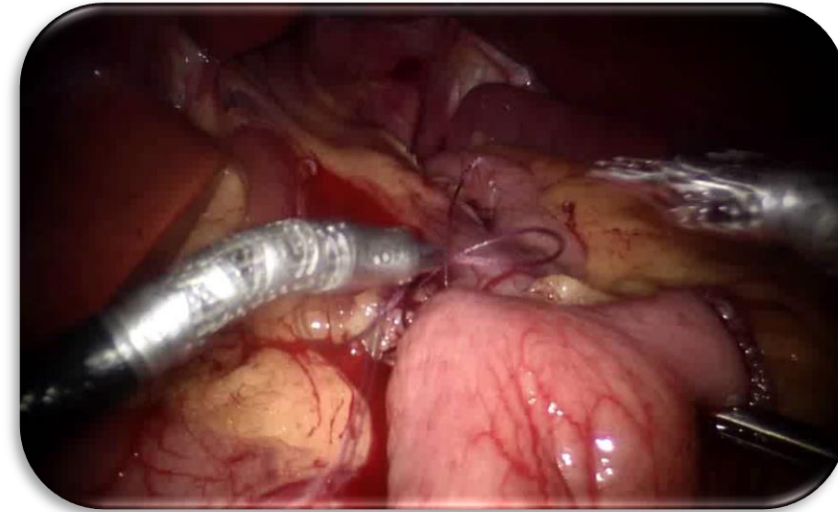


2022 currently have 3 Robots



# *Surgical Services - Innovation*

Today, approximately **90%** of our Bariatric Cases are performed Robotically.



**2,858 Bariatric Robotic cases**

Volume 2011 through July 2022



# Gleolan Fluorescence Guided Surgery 2022



Traditional  
neuro-navigation



Gleolan enhanced  
visualization



# Spine Surgery with AIRO





# Truly *Ambitious*



**Mather Hospital**  
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# *Accomplishment*



Received ANCC Magnet® Third Re-designation - November 17, 2022





# Accomplishment



## *Received 13 Exemplars – ANCC Magnet*

1. Surpassed our goal of 80% BSNs
  2. Surpassed our goal of 51% Certified nurses
- Surpassed the national benchmark (NSI) for 100% of units surveyed for the most recent 8 quarters:**

3. Inpatient Falls with Injury
  4. Inpatient HAPI Stage 2 and above
  5. Inpatient CLABSI
  6. Inpatient Device related pressure injuries
- Surpassed the national benchmark (NSI) for 100% of units surveyed for the most recent 8 quarters:**
7. 0 extravasations in the Infusion Center for 8 quarters submitted

**Surpassed the national benchmark (patient experience) for 100% of units surveyed for the most recent 8 quarters:**

8. Inpatient Patient education
9. Outpatient Patient Education
10. Outpatient courtesy and respect
11. Outpatient responsiveness
12. Outpatient Careful listening
13. For the innovation and the autonomy in advanced nursing practice lead by Marie O'Brien, DNP and presented to surveyors on the Integrative Pain Management Service



# *Accomplishment*

Received American Association of Critical Care Nurses  
Beacon Award Gold-Level





# *Accomplishment*

Received Emergency Nurse Association  
Lantern Award





# *Accomplishment - PTAP 0036*



*Cohort 15 - April 2022*



*Cohort 16 - August & October 2022*



# *PTAP 0036 – Graduation EBP Presentations*

## **Cohort 12 Graduation (February 15, 2022)**

- Commit to Sit – 2 South
- Central Line Compliance – 3 North
- Teamwork between Nurses and Nursing Assistants – 2 East & 3 South

## **Cohort 13 Graduation (October 4, 2022)**

- Importance of Vancomycin Troughs – 2 South
- Rapid Response Team and Code Role Assignments – 3 North

## **Cohort 14 – Graduation (November 7, 2022)**

- Customization of Cardiac Alarms to Reduce Noise – 3 East
- Improving Ostomy Education and Quality Outcomes for Patients in a Hospital Setting – 3 North
- Promoting non-Pharmacological Pain Interventions on an Oncology Unit – 2 South
- Preventing Postoperative Urinary Retention (POUR) – 3 South
- Implementation of “The Buddy System” to improve Teamwork and Decrease Stress Among Nurses – 2East & 3East





# *PTAP 0036 –EBP Graduates in 2022 (hired 2021)*





# *New York State Nursing Assistant Training Program at Mather Hospital Approved August 11, 2022*



Department  
of Health

KATHY HOCHUL  
Governor

MARY T. BASSETT, M.D., M.P.H.  
Commissioner

KRISTIN M. PROUD  
Acting Executive Deputy Commissioner

August 11, 2022

John Balcuk MSN, RN, NPD-BC  
Assistant Director of Nursing Talent  
John T. Mather Hospital  
75 North Country Road  
Port Jefferson, New York 11777  
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**Re: Approval of Facility-Based Nurse Aide Training Program, ID Code 3354119  
Employer ID: 3352131**

Dear Administrator:

The application materials you submitted for a Certified Nurse Aide Training Program (NATP) at John T. Mather Hospital, have been reviewed and approved by the New York State Department of Health through August 9, 2024.

This new NATP has an Identification Code of **3354119** which should be used in all correspondence with the Department regarding this training program. The code is also to be entered on the New York State Nurse Aide Registry Application form as a means of verifying that an individual has successfully completed this approved training program. The identification code is also used by the testing service to provide examination results to the facility.

The facility employer code number is **3352131**. The employer code number is utilized to identify the nursing home as the employer for recertification and other purposes.

New training programs are subject to an on-site review within two years of approval and at least every two years thereafter. The Department's survey teams will conduct the review, most often in association with the facility's State and Federal survey.

You may begin the training program upon receipt of this letter, which should be kept on file as the formal notice of program approval. To maintain a current file of information about your program, a Significant Change Report form is enclosed for your use. Please notify this office whenever any NATP changes occur using this form.



## **New Certified Nursing Assistant Program Get paid to learn**

Students will be paid while they train and are guaranteed a position at Mather Hospital upon successful completion of the course and the New York State Certification exam.

For more information email Program Coordinator, John Balcuk, MSN, RN, NPD-BC at [jbalcuk1@northwell.edu](mailto:jbalcuk1@northwell.edu)

Apply at [www.matherhospital.org/careers](http://www.matherhospital.org/careers)



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In collaboration with



**American  
Red Cross**





# *Certified NA First Class Graduated 12/12/22*

## *\*January and February Cohorts Planned*



Congratulations to Mather Hospital's first graduates from our Certified Nurse Assistant program. Pictured are Matthew Lagomarsino, Brian Smith, Erik Wikstrom, William Cassata, Josiah Mena, Jennifer Bugliaro, and Ayanna Harrison. The program pays students during their training and guarantees them a position at the hospital upon successful completion of the course and New York State certification exam.



# *Recruitment Event*

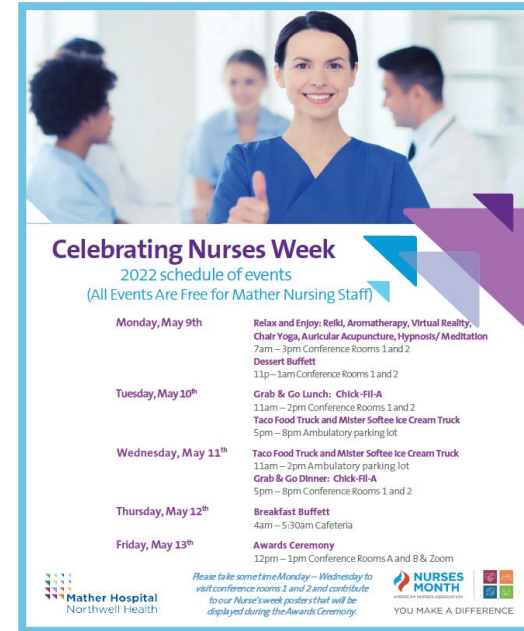
*Event was Held on  
March 1, 2022  
9am – 3pm  
Conference Room B*





# Nursing Recruitment

- 201 nursing staff hired in 2022 to date.
- Presented to students at Centereach and Newfield High Schools on November 29<sup>th</sup> on Nursing as a career and the Nursing Assistant Training Program.
- Nurse's Week included a weeklong celebration and recognition of all the nursing staff at Mather which concluded with our annual nurse award ceremony.
- Recognized all certified nurses on Certified Nurses Day with gifts.





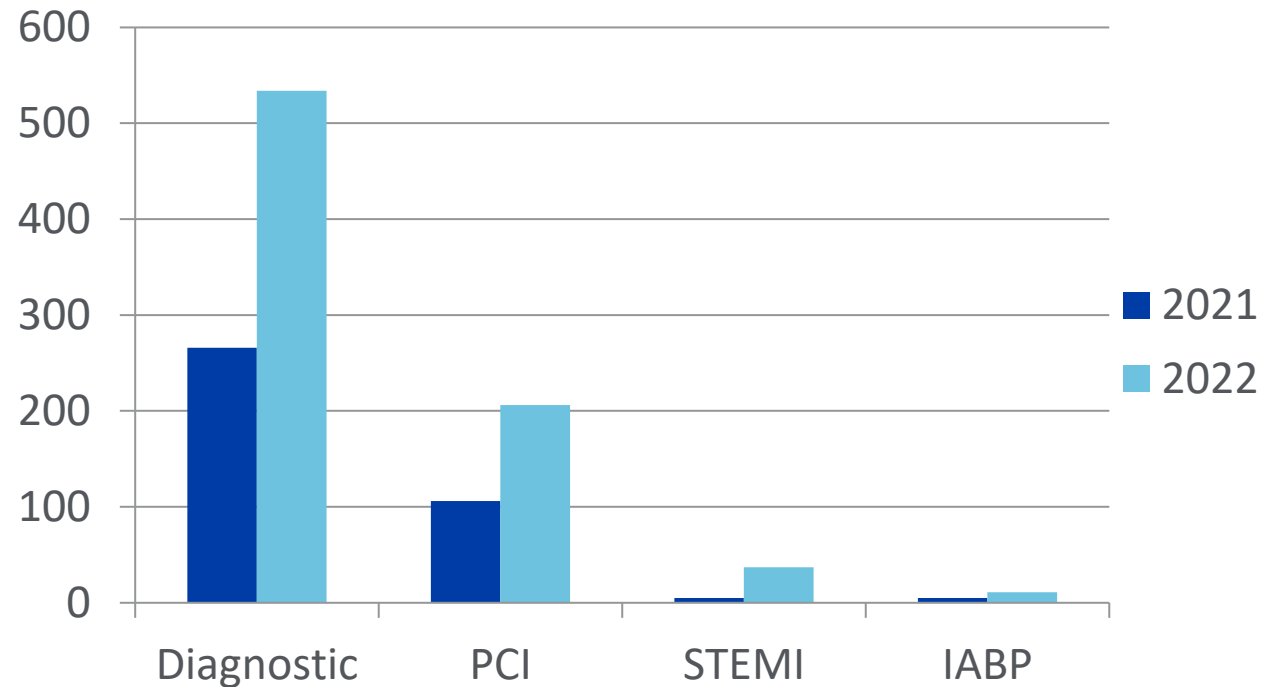
# Cardiac Cath Lab - Volume

*January to November 2022*

✓ 767 procedures




✓ 39 STEMI

✓ 11 IABPs





# Cardiac Cath Lab

Penumbra	Shockwave	Impella (LVAD)
<ul style="list-style-type: none"> <li>• Used for the removal of fresh, soft emboli and thrombi from the coronaries.</li> <li>• Provides sustained mechanical power aspiration for duration of procedure to help maximize efficiency of thrombus removal.</li> <li>• Mather approved for use in March.</li> </ul> 	<ul style="list-style-type: none"> <li>• Used for hard to cross calcified blockages.</li> <li>• Uses sonic pressure waves to crack calcium.</li> <li>• Reduces the risk of perforations and other complications.</li> <li>• Mather approved for use in April.</li> </ul> 	<ul style="list-style-type: none"> <li>• A microaxial heart pump that unloads the left ventricle, reduces ventricular work, and provides circulatory support.</li> <li>• Used in patient's presenting with cardiogenic shock.</li> <li>• Mather approved for use in May.</li> </ul> 



# *EP Lab - Volume*

## Opened January 18<sup>th</sup>, 2022

January to November: 103 procedures  
+ 60 Loop Recorder Implants

- 78 Implants (PPM, ICD & Leadless PM, see picture)
- 24 Right Sided Ablations
- Cross Trained 4 Cath Lab nurses and 3 CVTs in EP





# Accreditation

## 3East Telemetry

American Heart/American Stroke Association's Heart-Check Mark for Advanced Primary Stroke Care Center Certification







## *Leapfrog awards Mather Hospital its 17th top “A” grade for patient safety*

Mather Hospital received its **17th top “A”** Hospital Safety Grade from The Leapfrog Group for its achievements in protecting hospital patients from preventable harm and errors.

Mather was one of five Northwell Health hospitals on Long Island to earn an “A” grade for patient safety, according to a report released today by the Leapfrog Group for fall 2022.



# *Transitional Care Unit*

## Accomplishments

- TCU made the list of US News and World Report 2022-23 Best Nursing Homes ratings, 5 star by Medicare.gov. This rating is based on 3 sources, Health Inspections, Staffing and Quality of resident care.
- The BCAM (Brief Confusion Assessment Method) was trialed on TCU and 3South and now is imbedded in the EMAR to quickly assess and intervene for delirium detection, prevention and intervention. An abstract was sent to Magnet.
- TCU is the designated unit for our new CNA training program. We are providing full hands-on skills on TCU, as well as real time CNA observation.
- TCU had a successful DOH survey in October, with no quality issues identified. Infection prevention survey which was incorporated was also successful.





# *Accomplishment*



3 North Intermediate Care Unit for their achievement on the Press Ganey patient surveys of Best Overall Experience for the first half of 2022. Through June, 3 North achieved above the 90th percentile for Rate the Hospital, Recommend the Hospital, and Nursing Communication, along with high marks in each of the other major patient experience and Magnet Program domains.





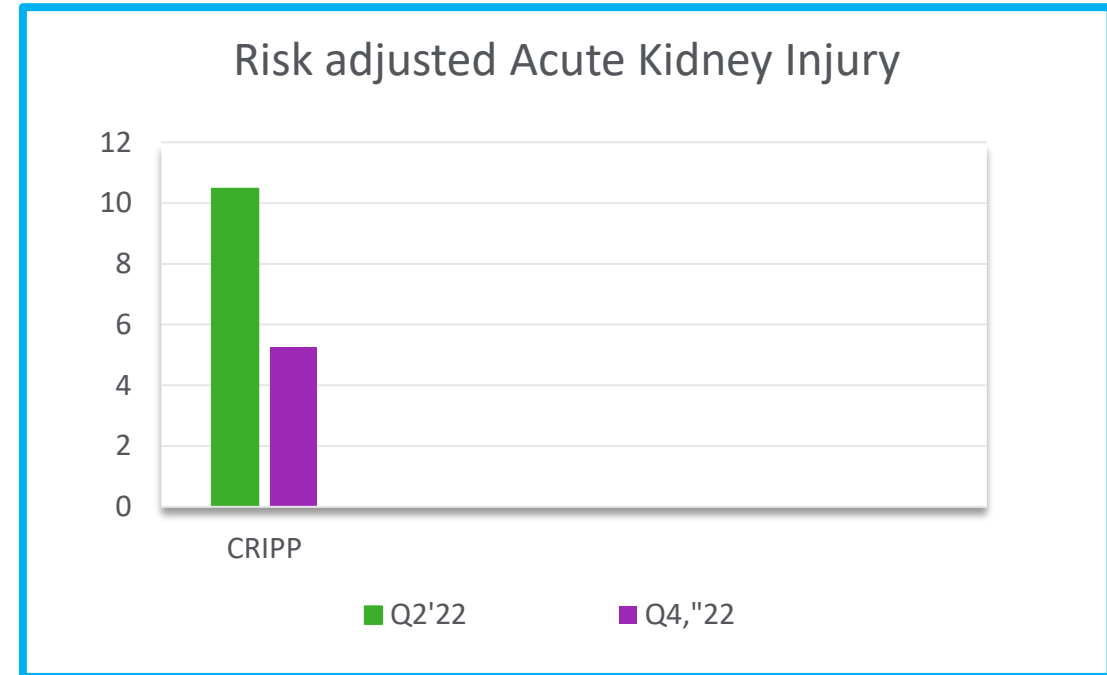
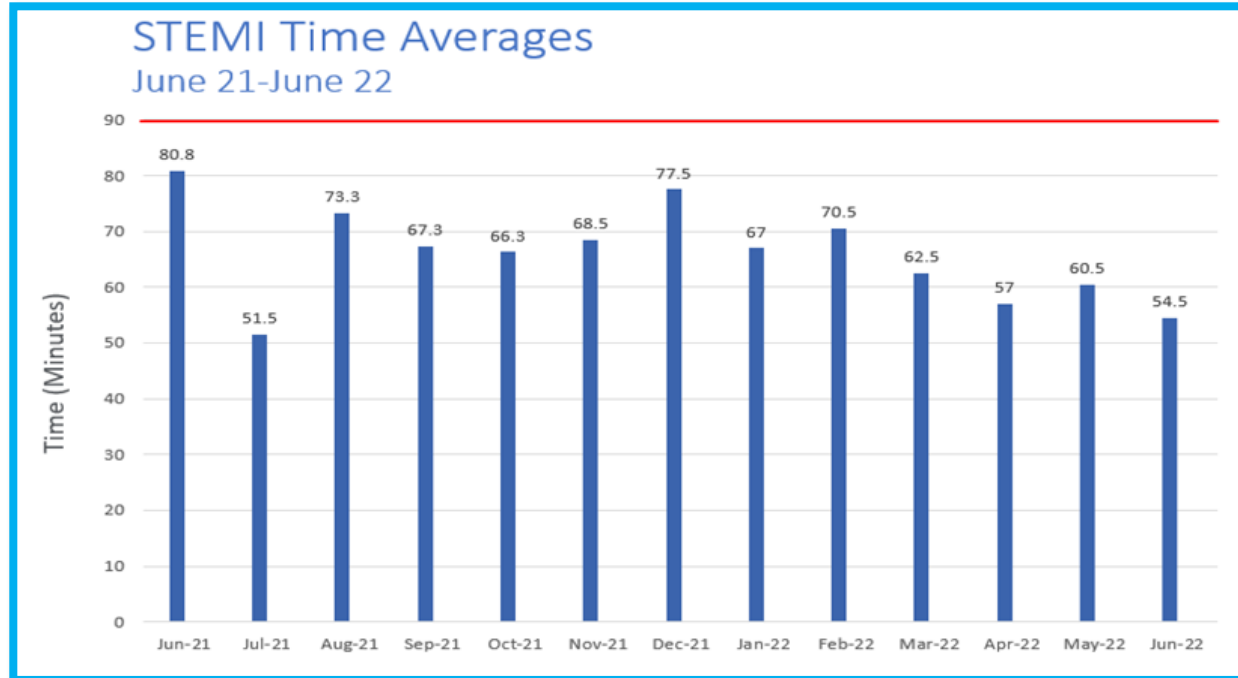
# Truly *Together*



**Mather Hospital**  
Northwell Health®



# Cardiac Cath Lab – Quality Metrics



- D2B <90 minutes National Goal
- Mather's average is 62.3 minutes for D2B time

- CRIPP (contrast induced nephropathy reduction in PCI patients) initiative to prevent acute kidney injury in post stent patients
- Mathers CRIPP score is 5.25%, below the US registry average of 7.93%

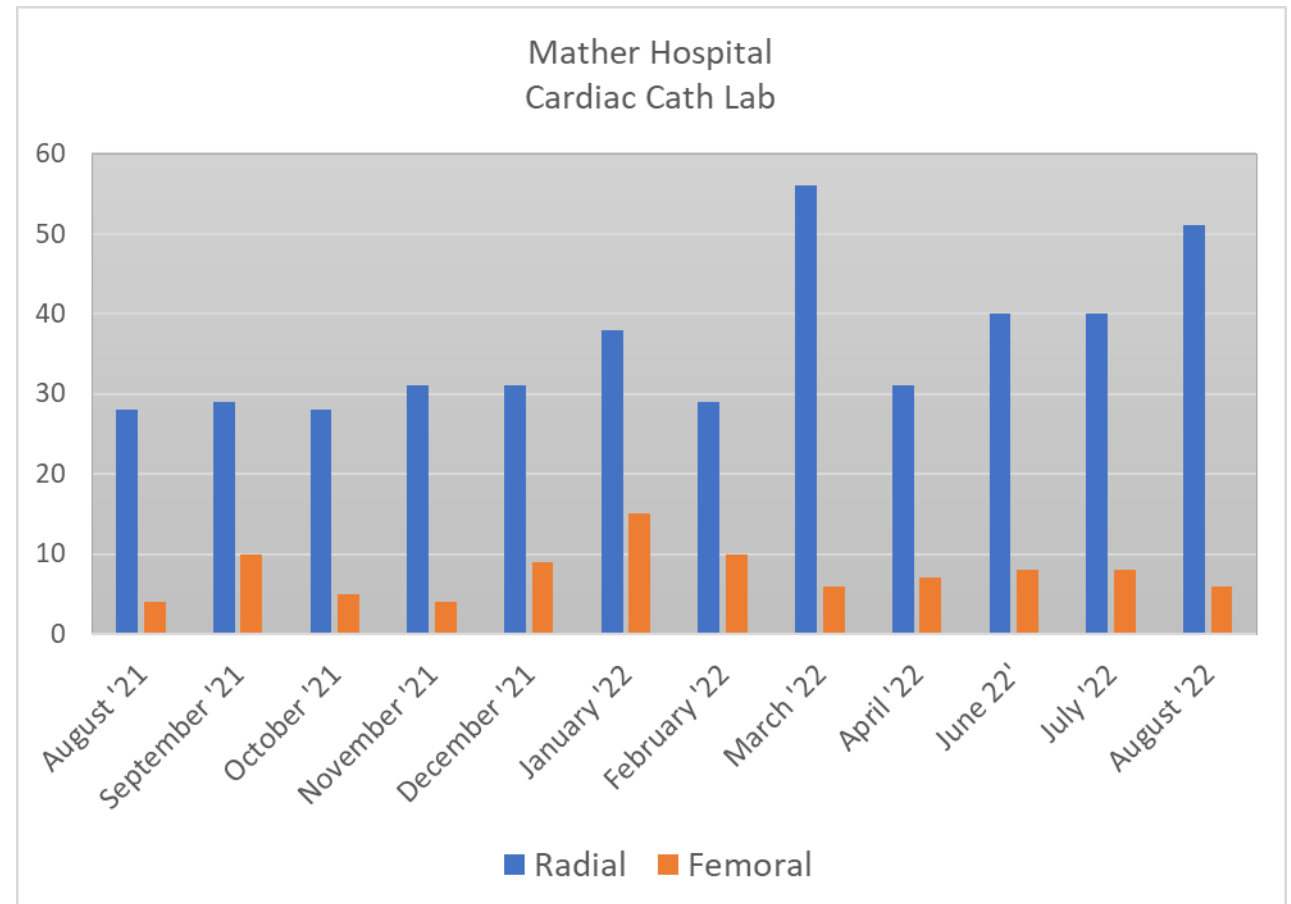


# Cardiac Cath Lab

Radial vs Femoral approach, Mather Cath Lab predominantly uses the radial approach. This chart shows from August '21 to August '22, **82.7%** of cases were done via the radial approach

## Accomplishments

- ✓ Automated Cardiac Rehab referrals in SAM





SSI REPORT 2022	1ST QUARTER			2ND QUARTER			3RD QUARTER			4TH QUARTER			YTD Total 2022	Mather SIR 2022 YTD	CMS SIR 2022	Mather SIR 2021	CMS SIR 2021
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec					
Total # of Infections	0	1	0	0	0	0	0	0	0	0			1	0.309	0.717	0.210	0.717
<b>Colon (COLO)</b>	8	17	17	13	15	16	11	18	7	11			133				
Total # of Infections	0	0	0	0	0	0	0	0	0	0			0	*	0.738	*	0.738
<b>Hysterectomy</b>	2	2	0	4	0	1	0	0	1	1			111				
Total # of Infections	0	0	0	0	0	0	0	0	0	0			0	*	*	*	*
<b>Hip (HPRO)</b>	3	4	8	3	4	7	8	7	4	12			60				
Total # of Infections	0	0	0	0	0	0	0	0	0	0			0	*	*	*	*
<b>Knee (KPRO)</b>	2	3	2	5	2	3	9	7	8	12			53				
Total # of Infections	0	0	0	0	0	0	0	0	0	0			0	*	*	0.000	*
<b>Spinal (FUSN)</b>	22	28	28	18	22	20	18	17	23	20			216				
Total # of Infections	0	0	0	0	0	0	0	0	0	0			0	*	*	*	*
<b>Laminectomy</b>	27	31	37	22	19	23	25	22	26	24			256				

"Confidential and required to be collected and maintained pursuant to Public Health Law Sections 2805-j, k, l, and m, and Education Law Section 6527"

Table Key:

Yellow indicates CMS Category and SIR

Green Grid indicates performing below CMS threshold

Pink Grid indicates performing above CMS threshold



## Infection Prevention Summary Table

CONFIDENTIAL

HAI Report 2022	1st Quarter			2nd Quarter			3rd Quarter			4th Quarter			YTD Total 2022	Mather SIR YTD	CMS SIR 2022 Year	Mather SIR 2021 Year	CMS SIR 2021 Year
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec					
MRSA bacteremia	0	0	0	0	0	3	0	0	0	0	0		3	1.398	0.726	0.000	0.726
VRE	0	1	2	2	0	0	0	0	0	2	0		7	n/a		n/a	
C. difficile	1	0	0	0	1	0	1	0	0	0	0		3	0.203*	0.520	0.217	0.520
CRE	0	0	1	0	0	0	0	1	0	0	1		3	n/a		n/a	
CAUTI	0	0	0	0	0	0	0	0	0	0	0		0	0.000	0.650	0.466	0.650
CAUTI CC	0	0	0	0	0	0	0	0	0	0	0		0	*		0.317	
CAUTI MS	0	0	0	0	0	0	0	0	0	0	0		0	*		0.611	
CLABSI	1	0	0	0	0	0	0	0	0	0	0			0.186	0.589	0.210	0.589
CLABSI CC	1	0	0	0	0	0	0	0	0	0	0		1	0.444		0.428	
CLABSI MS	0	0	0	0	0	0	0	0	0	0	0		0	0.000		0.000	
VAC	2	0	0	0	1	0	0	1	0	1	0		5	n/a	n/a	n/a	n/a
IVAC	2	0	0	0	0	0	0	0	0	0	0		2	0.717	n/a	2.336	n/a
VAP	0	0	0	0	0	0	0	0	0	0	0		0	n/a	n/a	n/a	n/a
All VAEs	4	0	0	0	1	0	0	1	0	1	0		7	0.805	n/a	1.079	n/a

"Confidential and required to be collected and maintained pursuant to Public Health Law Sections 2805-j, k, l, and m, and Education Law Section 6527"

### Table Key:

Yellow indicates CMS Category and SIR

Green Grid indicates performing below CMS threshold

Pink Grid indicates performing above CMS threshold

\*C. diff is run quarterly



# 3 North

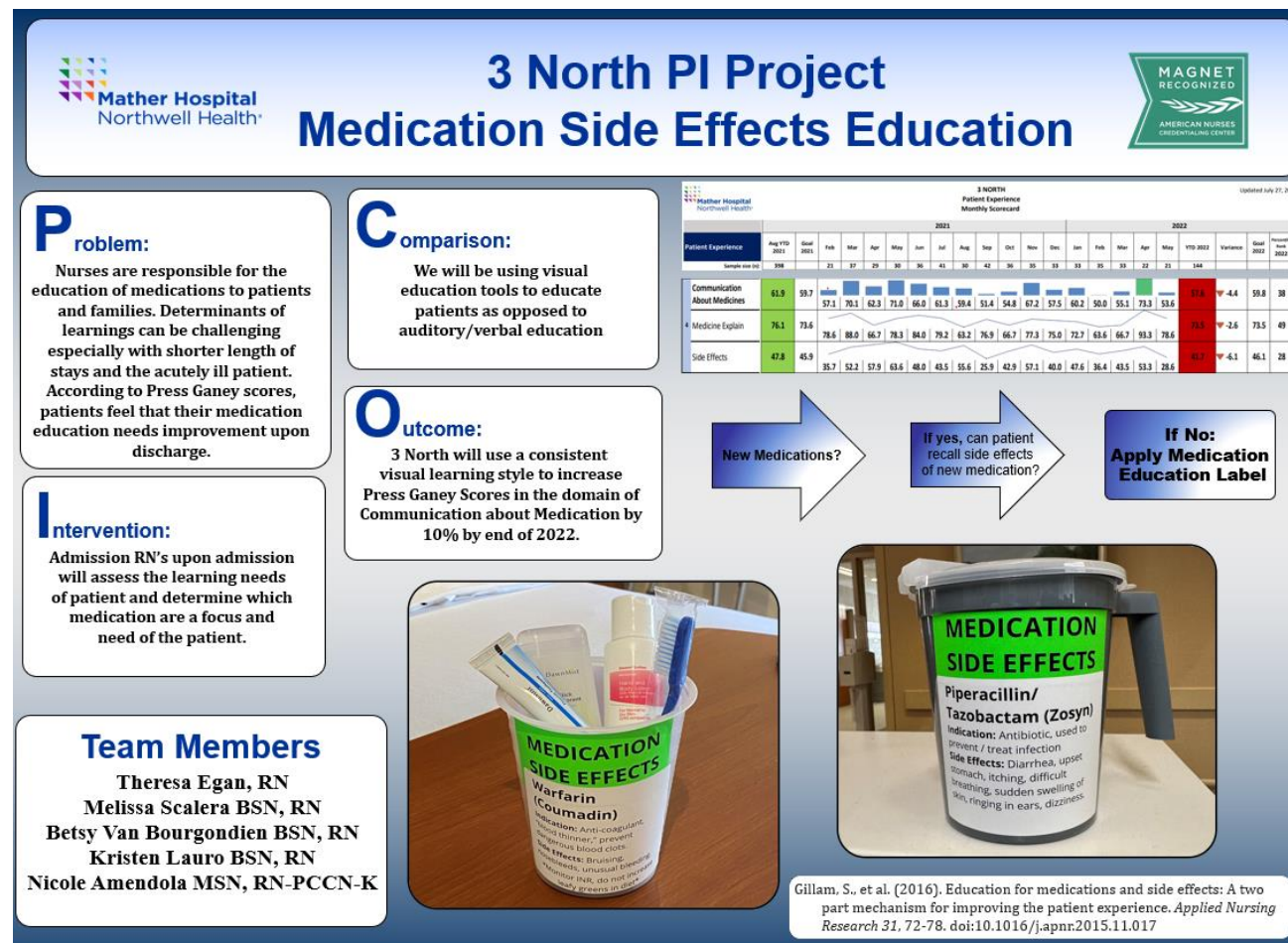
## Medication Side Effects Education

Nicole Amendola, MSN, RN, PCCN-K,  
Melissa Scalera, BSN, RN, Kristen Lauro,  
BSN, RN, Betsy Van Bourgondien, BSN,  
RN, & Theresa Egan, RN



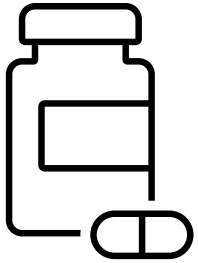
**Mather Hospital Northwell Health  
Quality Showcase 2022 Voted  
“Most Visually Appealing”**

Consistently Improved HCAHPS  
Communication about medicines side  
effect question from June (25.0% Top  
Box) to September (68.4% Top Box)

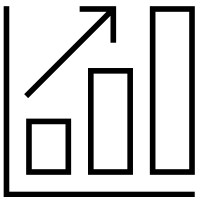




## 2 South



Nurse-Driven Collaborative Education Model for Oncology-targeted Medicines Leveraging clinical pharmacists, hematology/oncology providers, and clinical nursing staff to provide comprehensive medicine education to patient and caregivers



**Anticipated outcomes:** Improvement in HCAHPS “Communication about Medicines” Domain



# 2 South PI Project

## Improving Inpatient Medical Oncology Patients' Experience of Care using Goals of Care Conversations

Deanna Lupo, BSN, RN; Bryce Paganas, BSN, RN

Poster Presentation: Northwell Health 2022 PTEXP Every Moment Matters Conference  
**Mather Hospital Northwell Health Quality Showcase 2022**



- Voted 'Project most impactful for Mather's Strategic Plan'
- Currently in Act phase of PDSA cycle



### Background:

- **Age-Friendly Health System Initiative** is a joint venture of the John A. Hartford Foundation, Institute for Healthcare Improvement, American Hospital Association and Catholic Health Association of the United States.
- 2019: Mather Hospital Northwell Health began its journey toward becoming an age-friendly health system, quickly launching workgroups to address the **4Ms Framework**, which aims to guide holistic, high-quality, evidence-based care for older adults in 4 categories: **What Matters Most, Medication, Mentation, and Mobility**.
- **What Matters Most** states we must "know and align care with each older adult's specific health outcome goals and care preferences including, but not limited to, end-of-life care, and across settings of care."<sup>1</sup>

### Overview:

- August 2020: Phyllis Macchio, NP, Palliative Medicine, approached the nursing leadership team of Mather Hospital's 2 South Medical Oncology Unit. The team surveyed patients to identify topics of conversation they found most important to their care.
- Two tools were developed to promote **Goals of Care** conversations during daily interdisciplinary bedside rounds and throughout a patient's stay.
- **Let's Talk About It!**: Encourages patients to identify daily concerns for conversation.
- **My Goals of Care**: developed August 2021. Serves as an overarching discussion guide. This Tool is placed above the headboard to guide conversations between clinicians and patients.

## Improving Inpatient Medical-Oncology Patients' Experience of Care using Goals of Care Conversations Mather Hospital Northwell Health – 2 South Medical Oncology

Bryce Paganas, BSN, RN, Assistant Nurse Manager  
Deanna Lupo, BSN, RN, Assistant Nurse Manager

### Implementation / Method:

- **Key Stakeholders:** Nursing Leadership and clinical RNs, Certified Nursing Assistants, Palliative Medicine, Hospitalist and Resident Physicians, Social Work, PT, OT.
- **Logistics:**
  - Staff education through daily huddles, lineups, and briefs
  - Both tools are provided to each patient upon admission.
  - Tools are laminated and reusable between patients following appropriate infection control practices. A dry erase marker is provided to each patient.
  - The admitting team encourages patient to consider the questions on each tool and raise concerns/questions often.
  - The care team reiterates the patient's goals during daily interdisciplinary rounding

### Every Moment Matters:

This intervention promotes active engagement and partnership with patients to personalize care during hospitalization and afterwards. It encourages patient's to better understand their health condition and allows providers and staff to align a patient's care plan with their short- and long-term goals.

### Outcomes / Metrics:

#### Top Box Score Improvements 2020-2021

- 7.9 % "Communication with Nurses"
- 13.1% "Communication with doctors"
- 10.3 % "Response of Hospital Staff"
- 13.3% "Communication about Medicines"
- 11.1% "Care Transitions"
- 2% "Response to concerns/complaints"
- 7.2% "Staff worked together to care for you"

Patient Experience	2020	2021	2022	2023
Communication with Nurses	7.9%	13.1%	10.3%	13.3%
Communication with doctors	11.1%	13.3%	10.3%	13.3%
Response of Hospital Staff	10.3%	13.3%	10.3%	13.3%
Communication about Medicines	13.3%	13.3%	10.3%	13.3%
Care Transitions	11.1%	13.3%	10.3%	13.3%
Response to concerns/complaints	2%	13.3%	10.3%	13.3%
Staff worked together to care for you	7.2%	13.3%	10.3%	13.3%

#### Qualitative Feedback:

"It wasn't until the ANM asked the GOC question, which really got the patient to open up about their wishes. She had verbalized that her goal was to go on comfort care, stop treatment, and return home for the remainder of her time. This sparked a discussion with the medical team and changed the patient's entire treatment plan. Ultimately, they were able to fulfill her wishes and get her home on Hospice Care." – CC, 2 South Nurse Leader

### Conclusions / Key Findings:

- Not all patients give their **Goals of Care** the same amount of thought. Start the conversation by introducing the concept and helping the patient set small, short-term goals.
- Similarly, not all team members have experience with **Goals of Care** conversations. Leadership should encourage practice through observation and role playing.
- The tools should be addressed as often as possible to ensure the team is up-to-date and understands the patient's wishes.
- Staff should encourage patients to use the **Goals of Care** tool to guide conversations with their family members.

### Transferability:

- Easily integrated into any facility where interprofessional rounds occur at the bedside
- Age-friendly with simple design, plain language and large text
- Can be introduced by any team member comfortable or officially trained for goals of care conversations

#### Project Team:

- Phyllis Macchio, MSN, ANP, GNP, Palliative Medicine NP
- Catherine Castro, BSN, RN, Nurse Manager 2 South
- Kathryn Picciano, MSN, RN, ANM
- Deanna Lupo, BSN, RN, ANM
- Bryce Paganas, BSN, RN, ANM
- Karen Lospinoso, BSN, RN, ANM
- Clinical RNs, nurse assistants and ancillary staff.
- 2 South physician and providers team

\* References available upon request



**20. "Prevention of Early Discharges"**

Kerry Caldroney, LCSW-R, CASAC

**21. "Project Firstline"**

Jacqueline Luerssen, BSN, RN, Nancy Clavin, MSN, RN, ONC, Kelly Coleman, MS, RN, CNOR, & Julius Ade, DrPH, MPH, CIC

**22. "Reduction of Zofran Use After Bariatric Surgery"**

Janet Domke, RN, BSN, Dr. Arif Ahmad, MD, FACS, FRCS,  
Anna M. Braslow, RN, EMBA, & Nicole Drepaniotis, MS, RDN, CDN

**23. "Restore, Nurture & Empower Women: Nurse-Led Oncology Program"**

Marie O'Brien, DNP, ANP-C, PMGT-BC, CCRN, Patricia Dodd, MSN AGNP-C, RN HN-BC, PMGT-BC, HW-NC, MS LAc, Reiki Master/Teacher, Maria Rubino, MSN, ANP-C, AGACNP, PGMT-BC, CHPN, Margaret Scharback, RN, Reiki Master/Teacher, Labyrinth Facilitator, Christine Cirolli, RN, RYT, & Maureen Burke, RN, HN-BC

**24. "Soars: A Self Harm Reduction Tool for the Inpatient Adolescent Psychiatric Unit"**

Julia Vetere, BSN, RN, Christine Viterella, MSN, RN,  
Shajimol Shaji, MSN, RN-BC, & Robert Benney, NPP, RN

**25. "The Effectiveness of Screening, Assessment and Management of Individuals Served at Risk for Suicide"**

Sue Morin, NPP, Denise Driscoll, RN-BC, CARN, PMHCNS-BC, NPP & Partial Hospitalization Staff

**26. "Ultrasound-Guided Cannulation of Hemodialysis Vascular Access"**

Laura O'Brien, RN, MSN, CRN, NE-BC & Genine Schwinge, ACNP, ANP-BC, PNP, VA-BC

**27. "Using MEWS to Improve Inpatient Rest"**

Lorretta Hill-Civil, MSN, RN, PCCN

**28. "Utilizing the Infusion Center pharmacist to foster cost savings when feasible with infliximab, a costly and commonly prescribed medication in that patient care area"**

Larios Olga, RPh, MS, BS, Jose Badillo, RPh, Marion Fracassa, RN, & Nancy Robb, RN

**29. "What's Stressing You?" Incorporating Discussion of Stressors in a Nurse Residency Program**

Patricia I. Alban, MSN, RN, CEN, PCCN, Marsha A. Deckman, MSN, RN, NE-BC, Lilly Mathew PhD, RN, NPD-BC



**Mather Hospital**  
Northwell Health®

# 12<sup>th</sup> Annual Quality Showcase

A Showcase of all organization-wide  
quality improvement projects and  
outcomes

**October 20<sup>th</sup>-21<sup>st</sup>, 2022**

**EVIDENCE-BASED NURSING PRACTICE PROJECTS  
INTERDISCIPLINARY PROBLEM-SOLVING INITIATIVES**

Sponsored by Hospital Quality Management & Nursing Quality Council





# Quality Showcase Poster Presentations:

- 1. “Aggression Reduction Adult Inpatient Psychiatry”**  
Danielle Allgaier, LCSW, Christine Viterella, RN, Kevin Hood, NA,  
Krista Vanhove, RN, Robert Benney, RN & Denise Driscoll, NPP
- 2. “Bleeding Risks in the Cardiac Cath Lab: Radial vs. Femoral Approach”**  
Kyla Powers, BSN, RN, CV-BC & Nicole Hoefler, MSN, BSN, RN, CVN
- 3. “Completion of 2022 Dysphagia Screen for Inpatients with Stroke Diagnosis”**  
Dina Sposito, MA, CCC-SLP
- 4. “Critical Care and e-ICU Medication Education”**  
Laura O’Brien, RN, MSN, CRN, NE-BC &  
Margaret Pendl, RN, BSN, CCRN
- 5. “Decreasing Triage to CT Scan Time for Code Stroke Patients in the Emergency Department”**  
Christine Carbone, MBA, RN, Stacey Hartcorn, MSN, RN, CEN,  
Marina Grennen, MSN, RN, CEN, & Katelyn Martin, BSN, RN
- 6. “Enhancing Skills and Confidence Through a WOC Nurse Led Competency Fair”**  
Andrea Wohlenberg, NS, RN, CWOCN
- 7. “Evaluating the Risk of Acute Kidney Injury in Patients Receiving Combination Therapy of Vancomycin and Piperacillin/Tazobactam”**  
Maricelle O. Monteagudo-Chu, PharmD, BCIDP, BCPS-AQID,  
Christina Gearges, MD, MBA, Gregory Haggerty, PhD, Daniel  
Rizopoulos, PharmD, & Anjali Kewalramani, MD
- 8. “Gold is Cool but Platinum Rules”: Improving Therapeutic Communication Between Nursing Staff and Elderly Patients”**  
Brianna Genova, BSN, RN, Brianna Mahon, BSN, RN,  
Courtney Reid, BSN, RN, & Chelsea Steigman, BSN, RN
- 9. “Improving Inpatient Medical Oncology Patients’ Experience of Care using Goals of Care Conversations”**  
Bryce Paganas, BSN, RN & Deanna Lupo, BSN, RN

- 10. “Improving Patient Engagement with the Chemical Dependency Clinic”**  
Alice Miller, LCSW-R
- 11. “Improving Press Ganey Question #38: Courtesy of Person Who Took Personal/Insurance Information”**  
Patient Access Registration, Scheduling & Insurance  
Verification/Financial Clearance
- 12. “Improving the Quality of Safety Planning for Suicide Prevention on an Inpatient Psychiatric Unit”**  
Shannon Kennedy, CTRS & Michelle Templeman, RN
- 13. “Increased Independence in Toileting Tasks During Rehabilitation Stay”**  
Christine Piazza Darrohn, OTR/L, MSHCM
- 14. “Increasing Smoking Cessation Quitline Acceptance Rates Among Behavioral Health In-Patients: Effectiveness of an Interdisciplinary Educational Programs”**  
Jill Snelders, BS, MBA, CTRS, Denise Driscoll, RN-BC, CARN, PMHCNS-BC, NPP,  
Lilly Mathew, PhD, RN, Robert Benney, RN, NPP, Jennifer Colucci, RN-PMH-BC, &  
Joanna Stanczak, MD
- 15. “Interdisciplinary Approach to Reducing Unnecessary Laboratory Testing”**  
Hospital Medicine
- 16. “Interprofessional Fall Prevention Collaboration”**  
3 South
- 17. “MD to Order to PT Documentation Times”**  
Kerri Hamilton, PT, DPT
- 18. “Medication Education”**  
2 East
- 19. “Medication Side Effects Education”**  
Nicole Amendola, MSN, RN, PCCN-K, Melissa Scalera, BSN, RN, Kristen Lauro,  
BSN, RN, Betsy Van Bourgondien, BSN, RN, & Theresa Egan, RN





## 12<sup>th</sup> Annual HealthCare Quality Week Showcase Poster Contest **WINNERS**

**Most Visually Appealing Project:** “Medication Side Effects Education” Nicole Amendola, MSN, RN, PCCN-K, Melissa Scalera, BSN, RN, Kristen Lauro, BSN, RN, Betsy Van Bourgondien, BSN, RN, & Theresa Egan, RN

**Most Creative Project:** “Interdisciplinary Approach to Reducing Unnecessary Laboratory Testing” Hospital Medicine

**Highest “Quality” Project:** “Decreasing Triage to CT Scan Time for Code Stroke Patients in the Emergency Department” Christine Carbone, MBA, RN, Stacey Hartcorn, MSN, RN, CEN, Marina Grennen, MSN, RN, CEN, & Katelyn Martin, BSN, RN

**Most Impactful Project:** “Restore, Nurture & Empower Women: Nurse-Led Oncology Program”

Marie O’Brien, DNP, ANP-C, PMGT-BC, CCRN, Patricia Dodd, MSN AGNP-C, RN HN-BC, PMGT-BC, HW-NC, MS LAc, Reiki Master/Teacher, Maria Rubino, MSN, ANP-C, AGACNP, PGMT-BC, CHPN, Margaret Scharback, RN, Reiki Master/Teacher, Labyrinth Facilitator, Christine Cirolli, RN, RYT, & Maureen Burke, RN, HN-BC

**Project Appeals to an Interdisciplinary Audience:** “Evaluating the Risk of Acute Kidney Injury in Patients Receiving Combination Therapy of Vancomycin and Piperacillin/Tazobactam” Maricelle O. Monteagudo-Chu, PharmD, BCIDP, BCPS-AQID, Christina Gearges, MD, MBA, Gregory Haggerty, PhD, Daniel Rizopoulos, PharmD, & Anjali Kewalramani, MD

**Project most impactful for Mather’s Strategic Plan:** **It’s a TIE!!!**

“Critical Care and e-ICU Medication Education” Laura O’Brien, RN, MSN, CRN, NE-BC & Margaret Pendl, RN, BSN, CCRN

**“Improving Inpatient Medical Oncology Patients’ Experience of Care using Goals of Care Conversations”**

Bryce Paganas, BSN, RN & Deanna Lupo, BSN, RN



# *Awards/Recognitions*



**Nassau Suffolk Nurse of Excellence Nominee:**  
Elizabeth Giordano, RN, MSN, CCRN-K, CDE



**Roy Zuckerberg Family Award**  
Jacqueline Luerksen, RN



**American Nurses Association  
National Award for Advocacy**  
Denise Driscoll RNC, CARN, PMHCNS, NPP



# *Awards/Recognitions*

- Kevin Hood NA Honored by the Voyage to Excellence Leadership Team for Patient Engagement
- Amanda Pflumm social worker in Behavioral Health Honored by Voyage to Excellence Leadership Team for Communication Champion
- Debra Hart social worker from CDC won the Voyage to Excellence Leadership Team for Employee Engagement
- Dr. Pasqua Spinelli recognized for her work in mental health within the Muslim community here in New York and abroad in Saudi Arabia



# *Awards/Recognitions*



**Leadership Award:**  
Jeanne Brennan, MSN,  
RN-BC, CNL



**Clinical Nurse of the Year:**  
Ashley Herrera, BSN, RN



**Nurse Leader of the Year:**  
Tabitha Spinelli, BSN, RN



**Clinical Instructor of the Year:**  
Kim Bauman, MSN, RN,  
PCCN-K



# *Awards/Recognitions*



**"Rookie" of the Year:**  
Chloe Drzymala, BSN, RN



**Humanism in Nursing:**  
Danila Podmore, BSN, RN



**Unit Secretary of the Year:**  
Paula Tsororos



**Advanced Practice Nurse of the Year:**  
Lisa Sammarco, MSN, MSHCPM, FNP-BC



**Nurse Preceptor:**  
Karlie Herrera, BSN, RN



**Nursing Assistant of the Year:**  
John Cullen



# DAISY Award Winners



**Cardiac Catheterization Lab**  
**Lisa Lobasso, MSN, RN**



**3 North**  
**Amy Pirozek, BSN, RN & Kristina Proscia, BSN, RN**



# *Community Outreach – Cardiac Cath Lab*

- Terryville Fire Department EMS Recognition Event 4/8/2022
- Rocky Point Fire Department EMS Recognition Event 5/11/2022
- EMS Education Event
- STEMI Case presentation and management 4/11/2022
- Treatment for lethal arrhythmias 6/20/2022
- One Tuesday a month Nicole Hoefler along with Cath/EP physicians meet and greet physician's offices and urgicenters in the area to promote the labs
- HealthyU Webinar on Cardiovascular Disease 11/15/2022





# Community Education - Stroke

- Feb. 2 – Free blood pressure screening: outside cafeteria, 11:30-1:30pm
- Feb. 4 –Wear Red Day • Take a photo and post on social media with #gored or #raisewomenshealth, then send your photo to matherhospital@northwell.edu for posting on our social media. • Stop by the Go Red for Women table outside the cafeteria from 10am-2pm to learn more about women and heart disease. • Enjoy red apples as a healthy snack in the cafeteria and red lollipops delivered to each unit and department
- Feb. 9 – Free blood pressure screening: outside cafeteria, 12-2pm
- Feb. 15 – Healthy: Stress management to reduce cardiovascular risk in women, Marie O'Brien, NP. Register at [matherhospital.org/healthy](http://matherhospital.org/healthy) U
- Feb. 16 – Free blood pressure screening: outside cafeteria, 4-6pm
- Feb. 23 – Free blood pressure screening: outside cafeteria, 7-9am
- June through Dec. Monthly stroke education and blood pressure screening at Longwood library





# *Community Education*

**Riverhead Community Awareness Program, Inc. (CAP)** is a non-profit community-based organization to address growing problems caused by alcohol and other drugs within the Riverhead schools and community. Today, CAP is the major provider of drug and alcohol prevention, counseling and community coalition services in the Riverhead Central School District and community. Mather Nursing Quality Director presents monthly and attends the community march in June.





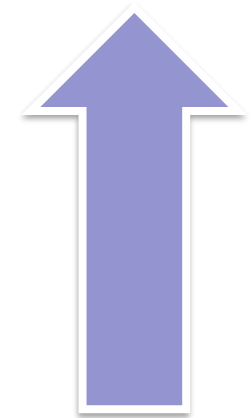
# *Certification Rate*

**Goal for 2022:** Promote and support nursing board certifications and continuing education programs, maintain certification rate.

**2022** 3rd Quarter Total Overall Nursing FTE Certification Rate 54.33%

**2021** Total Overall Nursing FTE Certification Rate 51.48%

**Goal for 2023:** Increase our certification rate for eligible nurses.

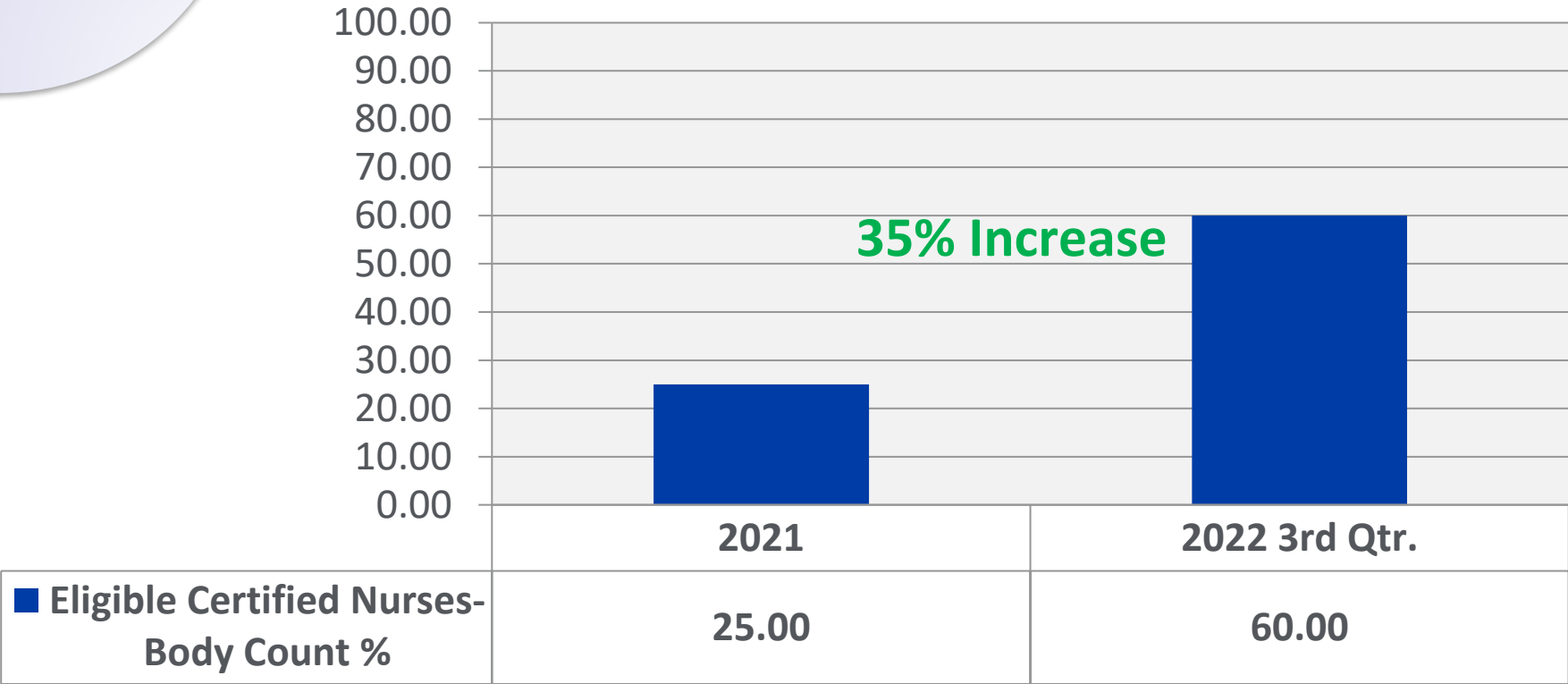






# Most Improved Unit Pre-Surgical Testing (PST)

Mather Hospital  
Certification Rate – PST

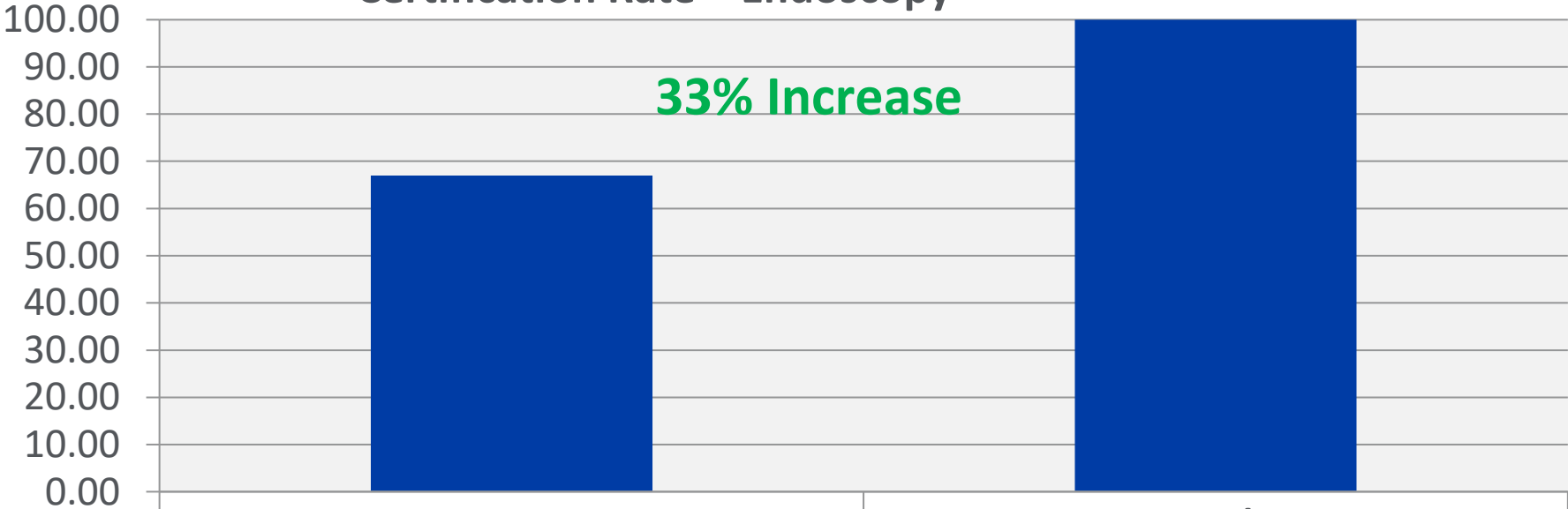






# Most Improved Unit Endoscopy

Mather Hospital  
Certification Rate – Endoscopy



■ Eligible Certified Nurses-Body  
Count %



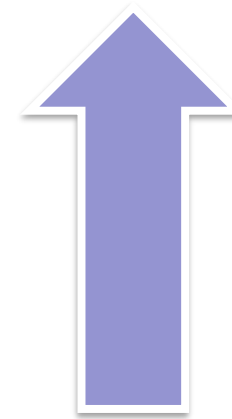
# *BSN Rate*

**Goal for 2022:** *Achieved goal of attaining 80% baccalaureate prepared nurses by 2020.*

**2022 YTD** Clinical Nurses BSN Rate 89.52%

**2021** Clinical Nurses BSN Rate 87.91%

**2020** Clinical Nurses BSN Rate 86.42%



**Goal for 2023:** *Sustain 80% baccalaureate prepared nurses*



# Behavioral Health - Events

- Stress First Aid Kick Off June 2022.
- Chemical Dependency Clinic first in the system to obtain Gambling Certification May 2022.
- Received 400 thousand grant from Mother Cabrini for Behavioral Health.
- Received Grant from CUNY school of Nursing to fund the project “Respond to Opioid Crisis to Save a Life: Narcan Training”.
- Provided Community and Staff Narcan Trainings throughout the year
- Sue Morin and her staff participated in the NEDA National Eating Disorder Awareness Spring Walk.
- Received grant from the Morrison foundation for adult and adolescent clothing to provide clothing to those who do not have.
- OMH facility wide survey with 11 positive comments/exemplars.

## Stress First Aid





# Truly *Inclusive*



**Mather Hospital**  
Northwell Health®



# Mather Hospital and the BERGS Collaboration

The Business Employee Resource Groups (BERGS) program was established to enhance engagement, innovation, talent development, and promote an inclusive culture at Northwell Health. Mather hospital implements the same vision by promoting diversity, equity, and inclusion through its Cultural Diversity Committee efforts and collaboration with different BERGS.

**ASIAN BERG:** Executive Coordinator for Year 2022

Co-Chair for 2-year term 2023-2024

**Board Member:** Language Advisory Board (LAB-ASIAN BERG)

**Mather Cultural Diversity Committee:** Co-Chair (August-2022)

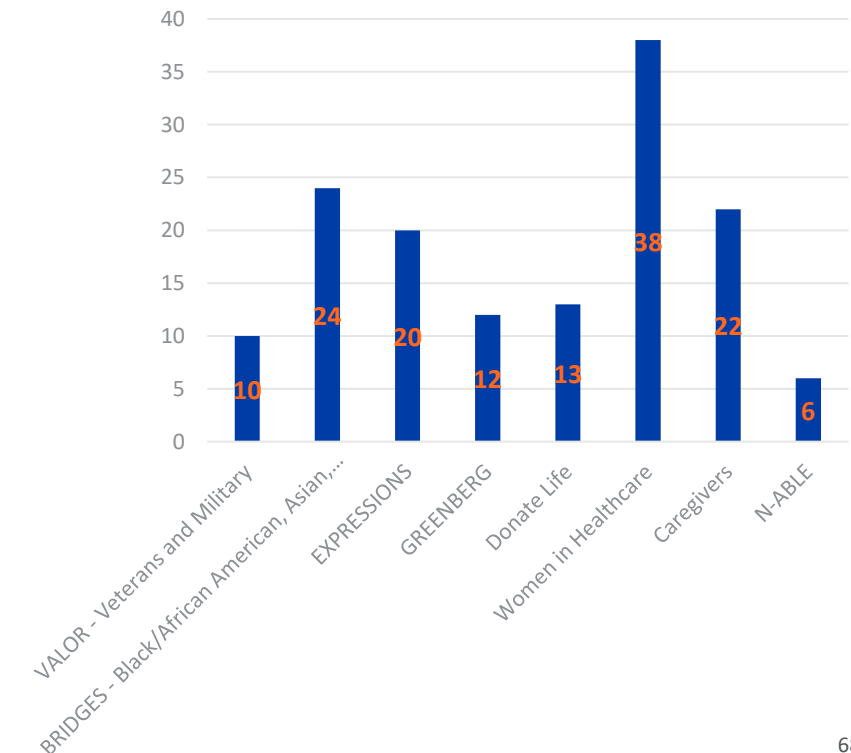
**BERGS Pulse Check:**

**Respondents: 57**

BERGS	10-2021	11-2021	12-2021	2-2022	5-2022	8-2022	Grand Total
VALOR - Veterans and Military		1	1	8			10
BRIDGES - Black/African American, Asian, Latinx, Jewish)	2	2		19	1		24
EXPRESSIONS	1	1		16	1	1	20
GREENBERG	1	2		8	1		12
Donate Life		1		12			13
Women in Healthcare	6	3		28		1	38
Caregivers	1	1		19	1		22
N-ABLE				5	1		6
Grand Total	11	11	1	115	5	2	145



**BERGS PULSE at MATHER**





# Mather Hospital and BERGs Collaboration

Opportunity	Action
<b>Lunar New Year</b>	Mather hospital collaborated with Asian BERG to celebrate Lunar New Year <ul style="list-style-type: none"> <li>•Social media 5-day virtual celebrations at Northwell Life page and Yammer</li> <li>•Tabling event at the site with a lot of giveaways including red envelopes, chocolate gold coins, informational flyers</li> <li>•Collaborated with Nutritional Department and Community Relations Team who provided Red Apples and helped decorated the entire cafeteria in celebration of Lunar New Year respectively</li> </ul>
<b>Ramadan Awareness and Eid ul Fitr celebrations</b>	Ramadan is the ninth month of the Islamic calendar and holy month of fasting, observed by billions of Muslims around the world. Mather collaborated with Asian BERG to present an informative Q & A session about Ramadan. <ul style="list-style-type: none"> <li>•Virtual one hour Q&amp;A session</li> <li>•Social media 3-day celebrations at Northwell Life page and Yammer</li> </ul>
<b>Halal Food Program</b>	Mather is collaborating with System Food Svc leadership- Chef Bruno, Ambika Chawla and site culinary leadership to help bring fresh halal food options for our patients, visitors, families, and employees. We will be the first site in the System to have freshly prepared halal food options available in our cafeteria. System Food Svc leadership assigned myself and Farhana Ahmed (NSUH) as System Leads on this initiative.
<b>Raise Awareness about increase in Anti-Asian Violence</b>	<ul style="list-style-type: none"> <li>•Virtual session on Knowing Your Rights from legal perspective with the Chief of the Hate Crimes Unit, Nassau County DA office- Featured Speaker: Joseb Gim. This increased education on local laws regarding self-defense.</li> <li>•Virtual presentation with Northwell Senior Security Investigator, Corporate Security on the topic of De-Escalation. Featured Speaker: John Amodeo.</li> <li>•50-page Anti-Asian Hate Presentation with support of CEC (Dr. Salas-Lopez), HR (Maxine Carrington) and Bridges BERG executive sponsors (Rich Miller and Rita Mercieca); sent to CLI for Inclusion Academy review.</li> </ul>
<b>AAPI Allyship and Cultural Sensitivity Education</b>	Virtual presentation roll out to sites and service lines at CCMC, NSUH, CMC ED, SIUH and LIJVS. Strong engagement by over 14 members all across the system as Content Contributors and Leads who dedicated their time and expertise into this 50-slide presentation; high praises and feedback from attendees and leadership from various sites. This was presented to Mr. Dowling in Asian BERG Co-Chairs meeting as well.
<b>SAYA-Northwell Partnership</b>	Working with SAYA-South Asian Youth Action Organization to engage community members and students in connection with Northwell employees to begin building their professional networks and provide mentorship in their careers
<b>Human Trafficking</b>	Hosted Bridges ASIAN BERG Summer Social and Cycling4Change Fundraiser with Dr. Paulus, Santhosh- Human Trafficking Senior Program Director -Northwell Health
<b>National Coming out Day</b>	<ul style="list-style-type: none"> <li>•Collaborated with Expressions BERG to celebrate LGBTQ+ at Mather</li> <li>• Tabling event outside cafeteria with many resources and informational flyers distributed</li> </ul>



# *Looking into 2023*

## **Driving HCAHPS “Communication with Nurses” Domain Performance**

- Phase Two: House-wide Commit to Sit/Platinum Rule Initiative
- Expand 2 South’s Goals of Care Conversation work
- Driving ‘Discharge Information’ and ‘Care transitions’ Domains
- Collaborative Discharge process – follow-up appointments
- Launch of Caregiver Center Program

## **Increase presence of Spiritual Services through Partnership with Culture & Diversity Committee, and Palliative Care Program**

- Improving HCAHPS ‘Response of Hospital Staff’ Domain
- Partner with Volunteers Services to implement patient-facing programs
- Supporting a Healthy Work Environment
- Expansion of Team Lavender Response Team
- Re-launch of Schwartz Rounds



# *Looking into 2023*

## Authentic leadership Publication

Marie Mulligan, PhD, RN, NEA-BC, CNOR,  
Judith Moran-Peters, DNSc, RN, NE-BC  
Sarah Eckart, MS

Article to be published in JONA in February 2023,  
Titled: *Authentic Nurse Leader Attributes Among  
Clinical Nurses and Nurse Leaders.*







# *Looking into 2023*

Mather Hospital's Nursing Quality Department submitted the following 8 Abstracts for the 2023 MAGNET conference to be presented as Podium/Poster presentations:

**2 SOUTH: Improving Medical-Oncology Experience: Goals of Care Conversations**

Bryce Paganas, BSN, RN, Assistant Nurse Manager; Deanna Lupo, BSN, RN, Assistant Nurse Manager

**EMERGENCY DEPARTMENT: Decreasing Triage to CT time: CODE STROKE patients in Emergency Room**

Christine Carbone, MBA, RN, Stacey Hartcorn, MSN, RN, CEN,

**2NORTH Adolescent Psychiatry: Using the Suicide Onset Aftercare Reasons "SOARS" Tool to Reduce Harm**

Julia Vetere, BSN, RN; Christine Viterella MSN, RN;

**NURSING PROFESSIONAL DEVELOPMENT: Investing in the Future: An Innovative Nursing Assistant Program**

Marsha Deckman, MSN, RN, NE-BC, Jeanne Brennan, MSN, CNL, RN-BC and John Balcuk, MSN, RN, NPD-BC,

**TRANSITIONAL CARE UNIT: Catching Confusion: Implementing Brief Confusion Assessment Method**

Cassandra Willie MPH, CHES; Carolyn Germaine, MSN, CNL, RN

**INTEGRATIVE CARE AND PAIN MANAGEMENT PROGRAM: Nurse-Led Integrative Oncology Clinic**

Marie O' Brien, DNP, ANP-C, PGM-T-BC, CCRN

**Nursing Research: The Art and Science of Professional Practice Models**

Judith Moran-Peters DNSc, RN, NE-BC

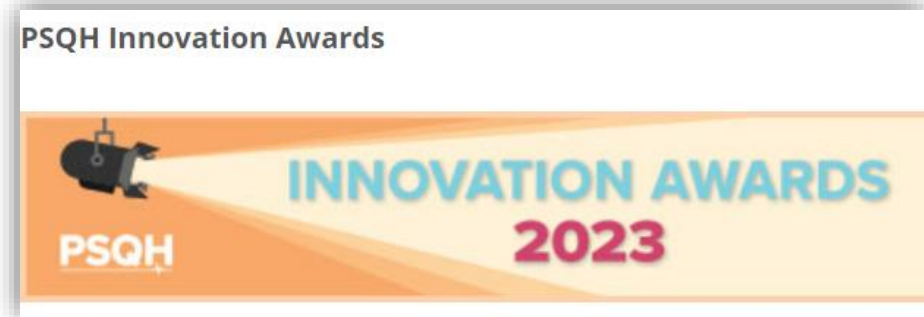
**Nursing Research: Importance of a Strong Magnet Program Director Succession Plan**

Judith Moran-Peters DNSc, RN, NE-BC



# Looking into 2023

- Journey to Accreditation: Goal to Obtain Joint Commission Advanced Total Hip and Total Knee Replacement Accreditation
- Hospital Based Certified Nurse Aid Training Program Improves Healthcare Staffing Crisis submitted for 2023 ANA Innovation Award and American Hospital Association Leadership Summit
- PSQH Submission to Present on “Code Fall Cart”
- New construction: Expansion and Relocation of Emergency Department
- Collaboration to Expand Medication Cabinets to Last 2 Med Surg units





# Thank you

