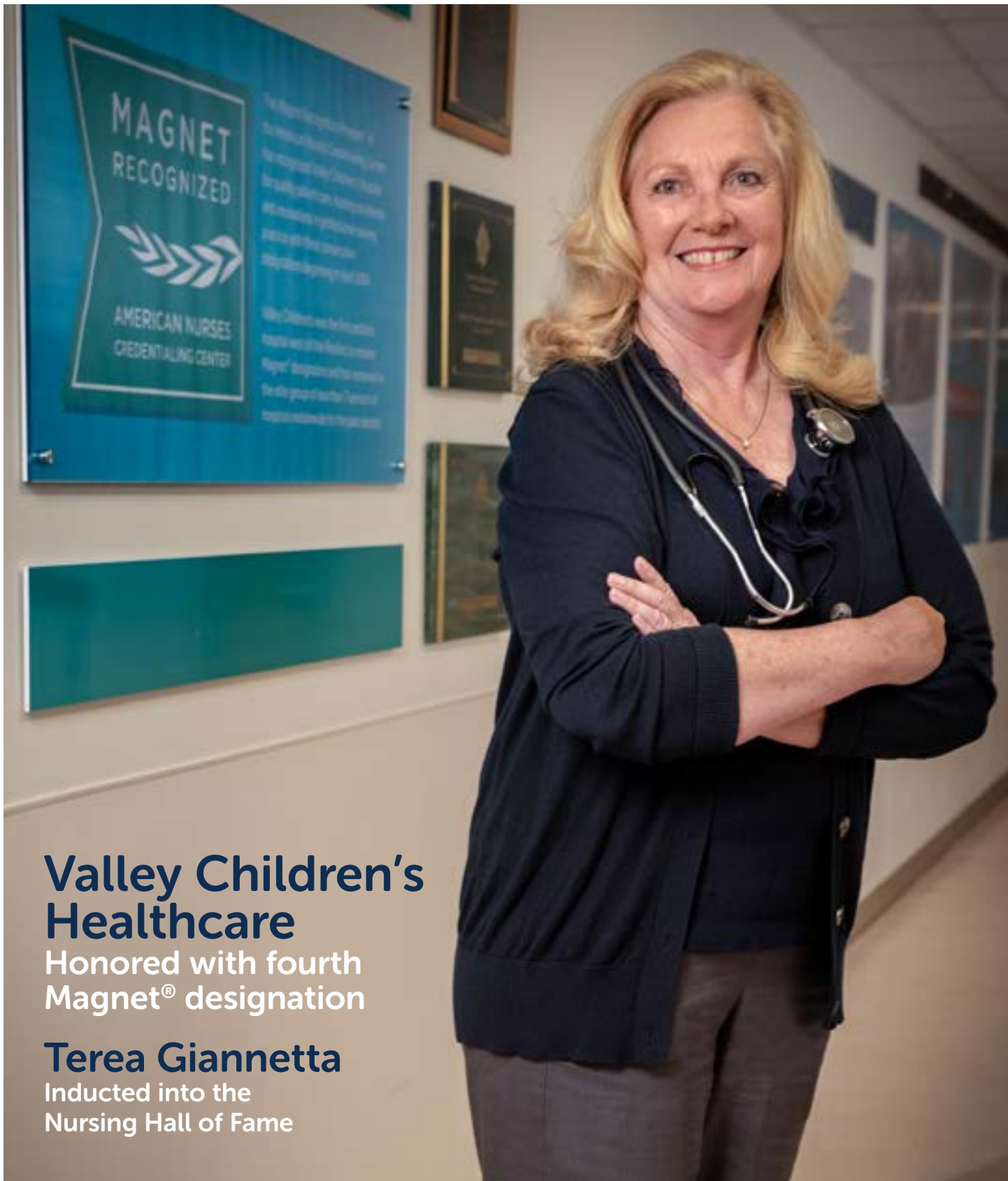




Nursing Excellence

ANNUAL REPORT MAY 2019



Valley Children's Healthcare

Honored with fourth
Magnet® designation

Terea Giannetta

Inducted into the
Nursing Hall of Fame



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Valley Children's Healthcare Nursing Services Magnet®: A Dream Becomes Reality

Beverly Hayden-Pugh MOB, BSN, BHSc, RN

Senior Vice President, Chief Nursing Officer and Chief Transformation Officer

Have you ever had a dream of what could be? With excitement, you work hard, anticipate, wait, and then on the best of days, you wake up and realize your dream has become a reality. Many of our personal and professional goals start with a dream, a dream of what could be.

In 2003, my tenure began as the Chief Nursing Officer (CNO) for Valley Children's Hospital. Together, we were on our journey seeking our first Magnet® designation. On April 9, 2004, the Commission on Magnet® notified us that we had achieved our goal. We were the first pediatric hospital in California, fourth in the state, and the only pediatric facility west of the Rockies to achieve Magnet® designation. We knew we provided excellent care, but to have it validated by achieving the highest recognition in nursing within the nation was humbling.

But this was just the beginning. With each designation, the standards of excellence increased, reflecting the ever-improving quality of care provided to our patients and families, and expected in our community and profession. With each passing year, our nurses in partnership with our interprofessional team members continued to raise the bar on both the level of care and clinical outcomes achieved. The results: Magnet® designation in April 2004, October 2008 and February 2014.

Our journey continued as we became Valley Children's Healthcare. As the CNO for the network, a new dream arose. Could we achieve designation as Valley Children's Healthcare? It would require ensuring clinical integration, consistency, excellence and integrated nursing care throughout the network. As rapidly as we were growing, would this be possible? On March 21, 2019, The Commission on Magnet® conferred Valley Children's Healthcare with our fourth Magnet®

redesignation – the first as a network. Today we are one of 8% of healthcare organizations in the nation that hold the prestigious designation of Magnet® and one of 71 that have achieved this recognition four or more times.

Sustaining excellence requires collaboration, discipline and hard work. When a team of highly skilled, dedicated nurses and interprofessional team members come together bringing their best each and every day, everything is possible, including achieving four Magnet® designations and being a Magnet® organization for 15 consecutive years and counting. Amazing!

Big dreams require big commitments by many. I would like to thank each member of various Magnet® teams, all staff, leaders and medical staff of Valley Children's Healthcare for your commitment to our vision and mission, and bringing your best daily. Thank you for making a difference and making dreams come true!

Beverly

With each designation, the standards of excellence increased, reflecting the ever-improving quality of care provided to our patients and families, and expected in our community and profession.

Transformational Leadership

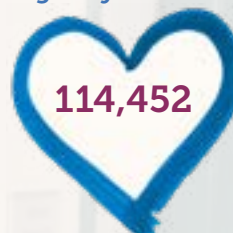


Valley Children's Healthcare Profile

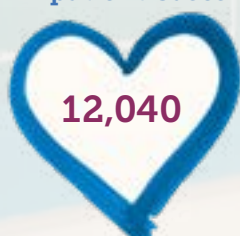
Licensed Beds



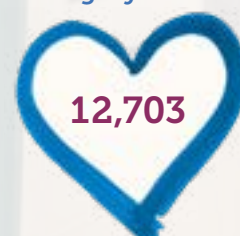
Emergency Room Visits



Inpatient Cases



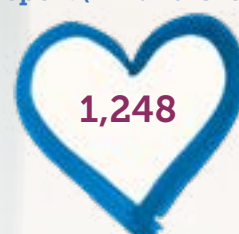
Surgery Cases



Average Daily Census



Transport (Air and Ground)



Hospital-Based Physician Practice Visits



Valley Children's Medical Group Primary Care OB GYN Visits



Valley Children's Medical Group Regional Specialty Center Visits



Valley Children's Medical Group Primary Care Pediatric Visits



The Magnet[®] Team:

Working Together to Achieve Redesignation

The journey of Magnet[®] redesignation is a significant undertaking that requires organization-wide engagement. For the fourth consecutive redesignation, hospital leaders planned to apply as Valley Children's Healthcare, an integrated network. This would expand the application process for the first time beyond the boundaries of Valley Children's Hospital to include nurses working at specialty care centers and other offsite facilities throughout the region.

Early efforts were underway, but in August 2017 – just 12 months before the Magnet[®] application submission date – leaders and stakeholders understood additional structure and support was needed to ensure a successful document submission.

"Because the Magnet[®] journey was so big, we approached the redesignation process in partnership with the Organizational Project Management Office," said Denise Zeitler, MBA, BSN, RN, PMP, Executive Director, Clinical Informatics and Organizational Project Management. "When you have to navigate things broadly, you have to force yourself out of the weeds and look at the process differently, which makes it difficult to use regular operational processes. That's where project management brings value to the process."

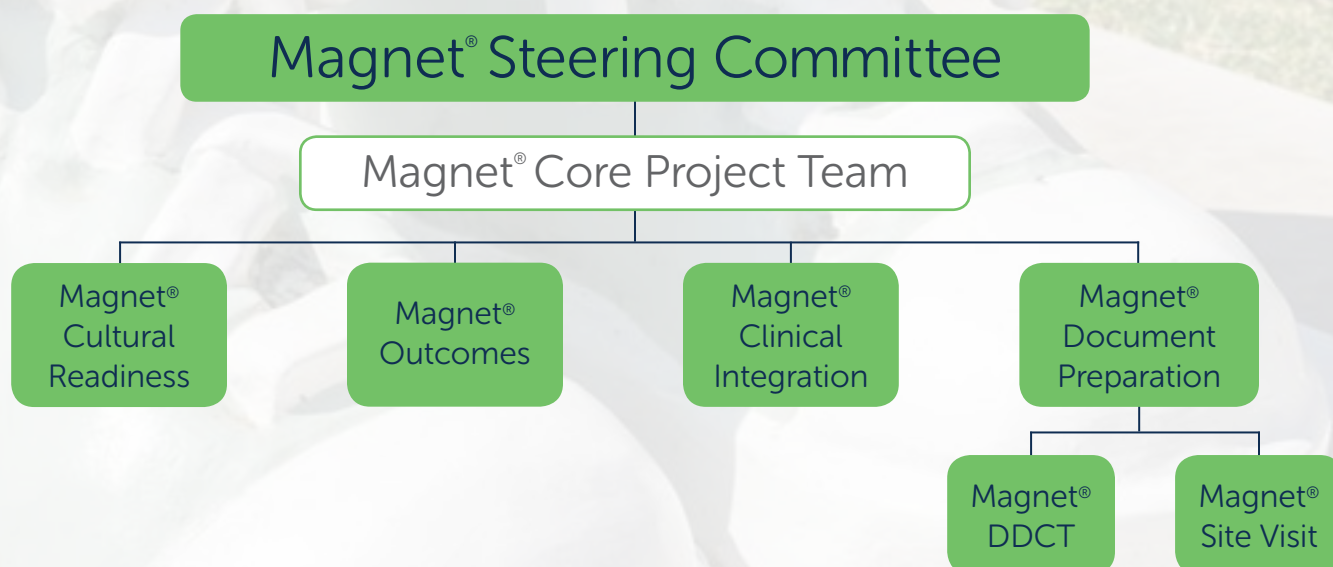
To develop a plan for achieving a successful redesignation, Denise Vermeltfoort, MSN, RN, NE-BC, Director Regulatory and Clinical Practice and Beverly Hayden-Pugh, MOB, BSN, BHSc, RN, Chief Nursing Officer and Chief Transformation Officer joined forces with Zeitler. Together these leaders took the first step by developing a comprehensive project plan to discern the requirements, assemble the documentation and submit the application on time.

"Applying project management methodology kept us from getting stuck on something that wasn't evolving," said Zeitler. "We went forward with the pieces we could advance on, and then came back to the ones we were stuck on. This kept us on track for key milestones, and delivering on those milestones was critical."

Leadership established a structure that included a steering committee and a number of interprofessional teams to address the massive Magnet[®] redesignation undertaking.

Leadership established the following structure:

The scope of each team was established:



Magnet® Steering Committee – Provide oversight, guidance and support for successfully achieving Magnet Recognition®.

Magnet® Core Project Team – Coordinate activities between various work teams.

Magnet® Cultural Readiness Team - Identify and address opportunities in staff knowledge, application, and practice, ensuring a “magnetic” culture.

Magnet® Clinical Integration Team – Identify Magnet® related structure, process, and policies required across Valley Children’s Healthcare.

Magnet® Outcomes Team – Establish process to track, trend, address, and communicate Magnet® required outcomes.

Magnet® Documentation Team – Analyze data and evidence for Magnet® requirements, interview subject matter experts, prepare written documentation.

The Steering Committee assigned tasks to each of the teams based on the overall project plan. Team leaders pulled together to assemble the elements required for the application and prepare for the site visit.

“The journey the team took together explored clinical



integration across the network,” said Vermeltfoort. “We learned about various care settings, explored our standards, and promoted a culture of excellence. Collaborating with an interprofessional team of talented, committed professionals once again reflected why we are a Magnet® organization.”

“It was an honor and a great learning experience to



be part of the Magnet® redesignation,” said Jolie A. Limon, MD, FAAP, Vice President, Medical Education and Designated Institutional Official. “I had always thought that Magnet® was a nursing program and only about nursing excellence. Through this process, I have to come to realize that Magnet® is about organizational excellence, leadership and teamwork to achieve the best patient outcomes and work environment for all. As an organization that practices interprofessional collaborative care, the core tenets of Magnet® permeate our environment.”

“I have to come to realize that Magnet® is about organizational excellence...”

“It was an exciting time to be part of the interprofessional Magnet® Clinical Integration team,” said Vermeltfoort.

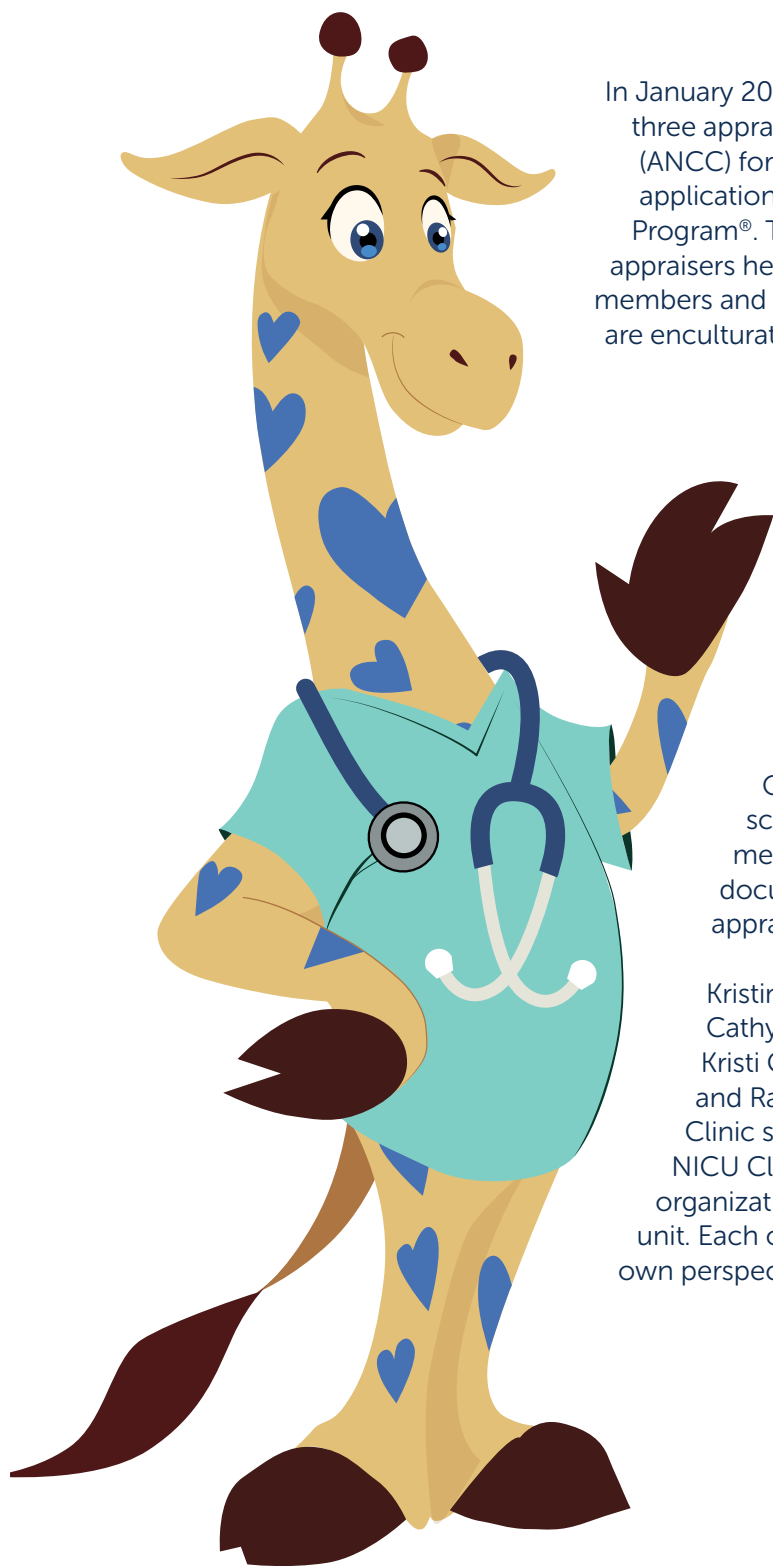
The Magnet® committees were each vital in the process of identifying outcomes and narratives to support the application requirements. Magnet® Program Manager, Katie Chan-Boeckh, MBA, BSN, RN, appreciated the role these committees played in supporting organizational culture and network integration.

“To be successful in achieving Magnet® designation, an organization must have a culture of engagement in the Magnet® process,” said Katie. “Magnet® is a highly regarded designation in healthcare with a focus on innovation as well as ongoing and sustained improvement in patient outcomes and our work environment. We needed key stakeholders at the table as well as broad, network-wide engagement. Our committee structure allowed us to align those needs.”

Working together, the team achieved the strategic goal of achieving the organization’s fourth designation from the Magnet Recognition Program®.

The Magnet[®] Experience:

Perspectives of Magnet[®] and Unit Guides



In January 2019, Valley Children's Healthcare welcomed a team of three appraisers from the American Nurses Credentialing Center (ANCC) for a three-day site visit to verify the contents of our application for redesignation through the Magnet Recognition Program[®]. The site visit also involved a rigorous schedule where appraisers held meetings with bedside staff, leaders, hospital board members and community partners to verify that key Magnet[®] standards are enculturated at Valley Children's Healthcare.

During this vital phase of the Magnet[®] recognition process, some of our nurses served as guides to ensure appraisers seamlessly navigated their way to the meetings and sessions held in various locations across our network.

Magnet Guides escorted appraisers throughout the entire organization, while Unit Guides were assigned to guide appraisers during their visits to a particular unit.

Our Guides did a wonderful job keeping the appraisers on schedule during sessions with patients and their families, members of our nursing staff, and others who provided documentation and responded to questions asked by the appraisers about our Magnet[®] application.

Kristina Pasma, BSN, RN, CPEN, CPST, Trauma Nurse Liaison; Cathy Hinds, BSN, BS, RN, CPN, Perioperative Coordinator; Kristi Crumpton, BSN, RN, VA-BC, Vascular Access Specialist; and Rachel Albertson, BSN, RN, CPHON, RN IV, Oncology Clinic served as Magnet Guides. Travis Dillon, BS, ADN, RN, NICU Clinical Nurse, one of 43 Unit Guides throughout the organization, served as a Unit Guide in our neonatal intensive care unit. Each of these nurses had a unique experience and shares their own perspective of the Magnet[®] experience.



"Guiding a Magnet® appraiser through Valley Children's during the three-day site visit definitely took me out of my comfort zone. I must admit that I was uncomfortable at first, but I'm glad I took the opportunity. I found the experience of being a Magnet® Guide truly valuable, and enjoyed being a part of the sessions I was able to join. I loved seeing all of the truly wonderful things we are doing as a healthcare network. I had not been familiar with many of them prior to the survey. I also loved interacting with the Magnet® appraiser. She was an inspiration and served as a great reminder of why I went into nursing. My takeaway from the experience is to truly know the data for your specific unit and/or program, as the appraisers were quite focused on quality measures. I would absolutely be a guide again and I am truly honored to have had the experience." – Kristina



"It was an honor to meet and guide the Magnet® appraiser through our hospital during the three-day site visit. I was able to attend a few sessions with the appraiser, and gained so much appreciation for the dedication our leadership team has for the Magnet® standards. Their commitment to excellence is evidenced by how the application and survey process lead to earning our fourth Magnet® designation. The dedication and work all of us nurses do for our patients, not only within the walls of our hospital but also within our community, is unique and important. My takeaway from this experience is to know the data and how quality measures affect your practice. The survey team had such a wealth of knowledge and experience. I'm grateful for this amazing opportunity to get to know the Magnet® appraisers and learn about the facilities they currently work in or have visited. I would do this again in a heartbeat!" – Cathy



"Witnessing the significant impact Valley Children's makes in peoples' lives is one of the biggest takeaways I experienced during the process of serving as a Unit Guide. It was incredible hearing parents share stories of coming to Valley Children's when they were young, and now we are caring for their children. I also enjoyed hearing from staff who came forward with stories of how Valley Children's impacted them at a young age and inspired them to pursue a career here. I enjoyed seeing the widespread impact we have throughout our community. It was fun to talk with the Magnet® appraiser and hear his perspective. He shared that he conducts surveys for the love of the experience, and that he enjoys seeing what hospitals are doing around the nation and what nurses are doing within their hospitals. The Magnet® appraiser mentioned the joy of hearing how innovative some of our nurses are, and expressed excitement regarding the potential for a possible future piece of equipment one of our NICU RNs is in the process of creating." – Travis

The Magnet and Unit Guides exemplified our "best" culture, welcoming the appraisers, guiding them throughout the organization and sharing stories of excellence.

Structural Empowerment



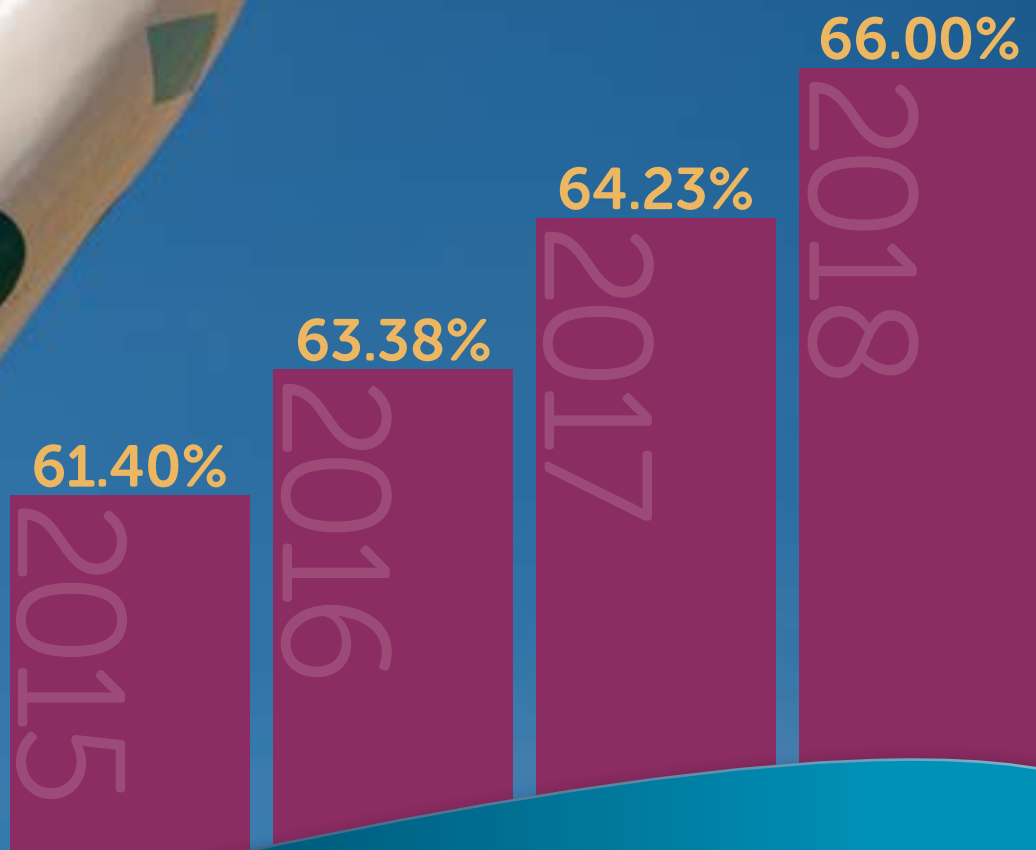
Engaging Nurses in Professional Development

Ongoing professional development through academic advancement and professional certification contributes to the nursing profession and quality outcomes.

Valley Children's supports nurses in achieving their academic goals through a number of programs including the education reimbursement benefit, nursing scholarships and academic partnerships.

In fiscal year 2018, eight nursing scholarships were awarded to support the ongoing academic advancement of nurses at Valley Children's.

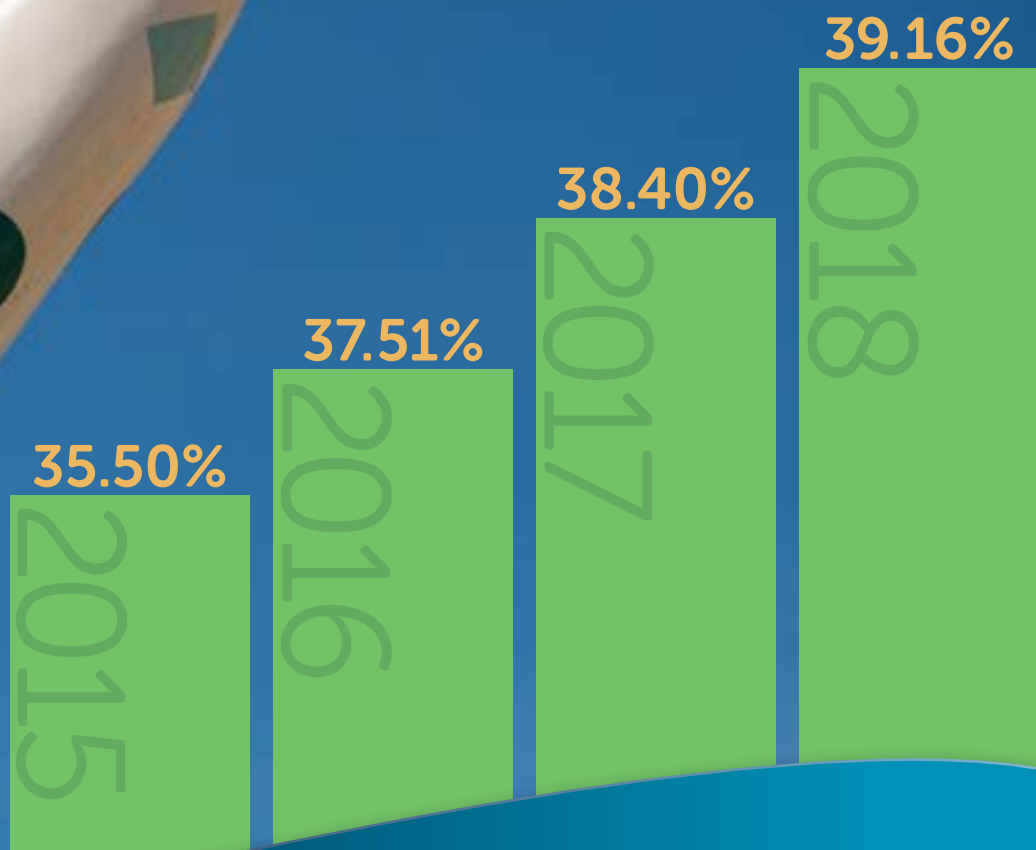
Valley Children's Healthcare Percent BSN or Higher in Nursing



Engaging Nurses in Professional Development

Valley Children's supports nurses in obtaining professional certification through the educational reimbursement benefit. The organization also provides No Pass, No Pay for the CPN certification program offered by the Pediatric Nursing Certification Board (PNCB) and other resources.

Valley Children's Healthcare Percent National Certification



Terea Giannetta

Honored for Lifetime Achievement

One of Valley Children's own has been inducted into the Central San Joaquin Valley Nursing Hall of Fame. This lifetime-achievement award is given to nurses who make significant contributions in research, education and public service over the course of their careers. Terea Giannetta received this well-deserved honor from a nursing coalition that represents a seven-county area in California's Central Valley.

"This recognition comes from groups that have significant influence in healthcare," said Terea. "I am so humbled."

The award was founded by a group of nurse leaders representing the School of Nursing at California State University, Fresno (CSUF), the Nursing Leadership Coalition of the Central San Joaquin Valley and the Sigma Theta Tau International MU NU Chapter Honor Society of Nursing.

"I've received support from the folks here at Valley Children's and also at Fresno State," said. "I'm a professor emeritus from the university, but I'm still working at the hospital every day, so it seems unusual to be in the Hall of Fame. But I was certainly delighted to be recognized for a lifetime of achievement."

Nurse of the Year Awards, which Terea has received more than once, often honor achievements and success on a special project within a single year. However, induction into the Nursing Hall of Fame is limited to nurses who have dedicated their lives to improving professional nursing practice and making a lasting impact on the future of nursing.

A Lifelong Dream

Terea knew from an early age she wanted to be a nurse. Her paternal aunt served as a traveling nurse in the 1930s and 40s. Terea still remembers the stories her Aunt Mary shared about helping people while traveling the world.

Terea enrolled at California State University, Sacramento immediately after high school, and began pursuing her dream of becoming a nurse. The Bachelor's of Science in Nursing (BSN) program comprised two years of prerequisites and two years of nursing school.

Merely completing the prerequisite curriculum did not guarantee acceptance into the nursing program, which accepted only 32 students each year. Terea not only earned her place in the program, she also graduated at the top of her class with honors.

As a new graduate, Terea began working as a pediatric nurse on the night shift at Valley Children's Hospital, and within nine months she became night supervisor. Proving her leadership skills, Terea later became director for surgical services.

A Lifelong Learner



To expand her experiences and knowledge base, Terea left Valley Children's for a season. She worked for migrant health services with Dr. James Caffee, a well-respected pediatrician and medical advisor for a program that trained pediatric nurse associates and practitioners (PNA/P) at Valley Medical Center (VMC). Terea was among the first to graduate from this certificate program, which led to her job as a PNA/P at VMC.

Under the guidance of another Hall of Fame inductee, Elaine Moss, Terea pursued her Master's of Science in Nursing (MSN) degree at Fresno State. This association led her to a teaching assignment at the university. Terea became the university's pediatrics instructor upon joining the faculty full time.

A lifelong learner, Terea could not recommend others pursue a doctoral degree unless she did, too. Terea completed her DNP at Brandman University, and was the first DNP hired to a tenure track position at Fresno State.

She also became the first DNP to achieve full professor status at the university. This accomplishment earned special recognition from the provost because Terea accomplished in four years what usually takes 11 years to achieve.



A Lifetime of Achievements

For 34 years, Terea taught a variety of courses at Fresno State and was instrumental in developing the leadership course for the university's DNP program. Terea touched thousands of lives, including more than 3,600 BSN students, 2,000 MSN students and 60 DNP students.

Terea rejoined the team at Valley Children's in 1992. She has served as our Chief NP for more than 20 years, maintaining responsibility for the professional practice standards of our Magnet®-recognized nurse practitioners. In this position, Terea orients, mentors and monitors more than 50 NPs.

Terea was the first, and to date the only, Fresno State faculty member to be inducted as a Fellow in the American Association of Nurse Practitioners (AANP). This peer-reviewed honor is limited to only 800 members nationwide. AANP Fellows demonstrate excellence in both clinical practice and teaching.

"Nursing is such a wonderful mix of arts and science," said Terea. "Nurses have the knowledge and the background to practice clinical skills and people skills." Her induction into the Nursing Hall of Fame testifies to Terea's grand success with both of these skillsets.

"I think some of the greatest moments that come from a lifetime of doing what I do are when nurses approach me saying, 'You were my pediatrics instructor and that's why I went into peds.' Or, 'Do you remember me? You were my favorite teacher!' I also enjoy seeing the children of my patients. They have genetic diseases that they pass on, and now I'm seeing their babies."

Valley Children's applauds Terea on a lifetime of career successes and commends her for a life well lived.

Congratulations for being inducted into the Nursing Hall of Fame.

ADDITIONAL HONORS AND AWARDS

Central Valley Coalition of Nursing Organizations

Advanced Practice Nurse of the Year, 1999

Sigma Theta Tau International Nursing Honor Society

Mentoring Award, May 2002

Journal of Pediatric Health Care

Nelms-Mullins Department Editor Award, 2009

College of Health and Human Services

Faculty Recognition Award, 2010 and 2013

National Organization of Nurse Practitioner Faculty (NONPF)

Outstanding Nurse Practitioner Educator Nominee, 2014

Valley Children's Healthcare

Advanced Practice Nurse of the Year, 2015

Nursing Leadership Coalition of the Central San Joaquin Valley

Advanced Practice Nurse of the Year, Nominee, 2015

American Association of Nurse Practitioners

Fellow, June 2015

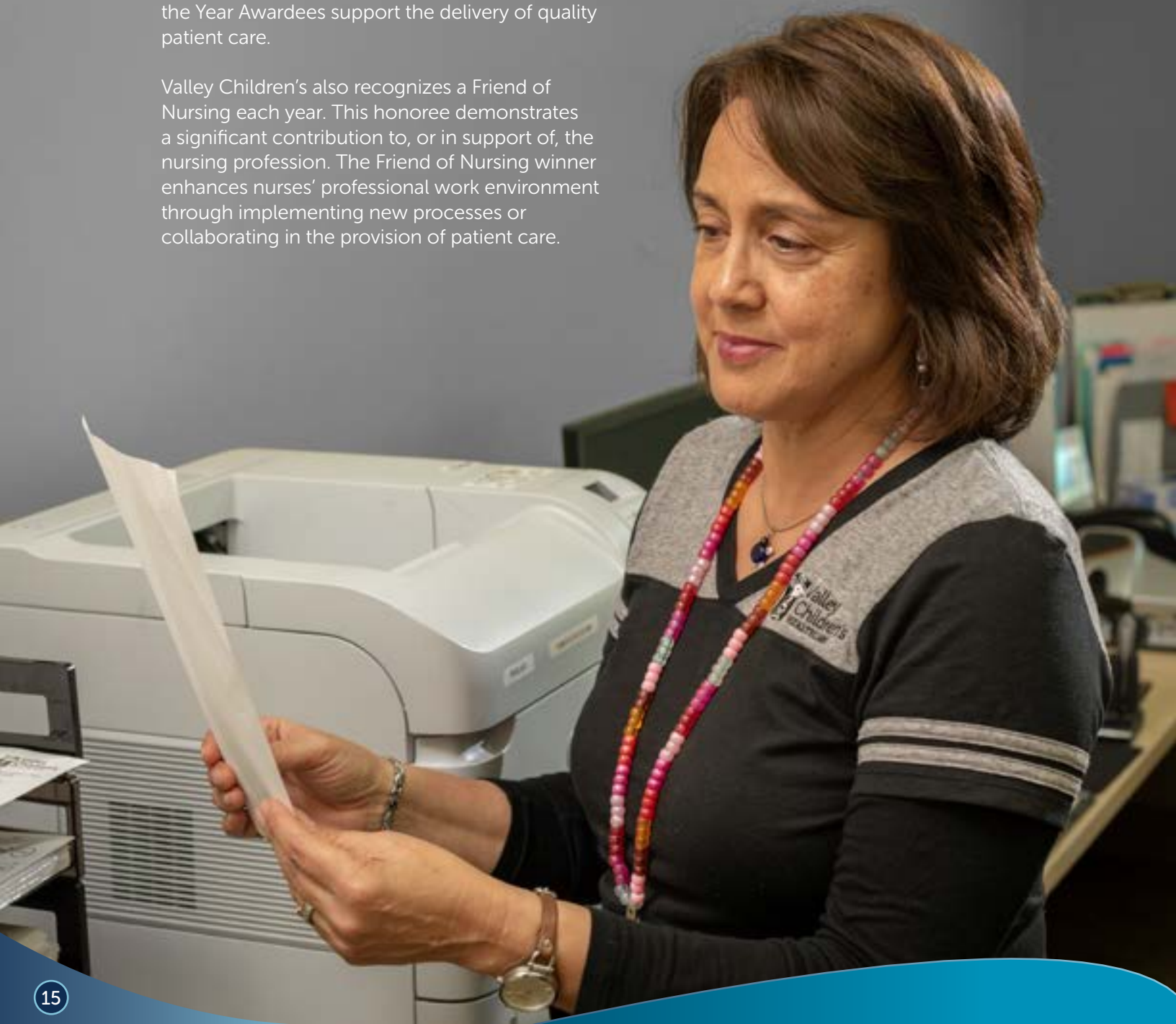
Excellence Recognized

Valley Children's annually bestows the Nurse of the Year Award to nurses who have made a significant contribution to the nursing profession.

Whether recognized for spearheading performance improvement projects, advancing patient safety initiatives or conducting innovative research studies, Valley Children's Nurse of the Year winners stand out and rise above, serving as role models here at Valley Children's and beyond.

Recognized for their leadership at the unit, organizational and community level, Nurse of the Year Awardees support the delivery of quality patient care.

Valley Children's also recognizes a Friend of Nursing each year. This honoree demonstrates a significant contribution to, or in support of, the nursing profession. The Friend of Nursing winner enhances nurses' professional work environment through implementing new processes or collaborating in the provision of patient care.





Valley Children's Healthcare

Nurse of the Year 2019

Excellence in Leadership

Katie Chan-Boeckh, MBA, BSN, RN, CPN
Magnet® Program Manager

An influential nurse leader, Katie Chan-Boeckh initiated a new role at Valley Children's Healthcare in 2017, becoming our first Magnet® Program Manager. Two years later, Katie's leadership resulted in Valley Children's achieving its fourth designation from the Magnet Recognition Program® and its first as a network. This prestigious designation recognizes the highest levels of excellence in patient care through nursing services and is awarded to less than 8% of all hospitals in the nation.

Katie regularly attends the National Magnet® Conference and shares knowledge gained with colleagues through coaching and consulting on Magnet® standards for leaders, nurses and interprofessional team members throughout the network. In her role as Magnet® Program Manager, Katie coordinated the Clinical Leadership Workshop focused on Magnet®. She provided leadership throughout the Magnet® application process by working with internal and external resources, providing technical writing, collaborating with clinical and business stakeholders and serving as the organizational internal consultant applying Magnet® standards to nursing practices to support redesignation. She coordinated efforts of nurses, interprofessional team members and leadership in preparing documents and ensuring cultural readiness.

Katie is an advocate for the professional practice of nursing, and her efforts have resulted in addressing practice concerns, influencing culture and promoting patient/family-centered care and the professional practice of nursing. In a dyad leadership role with Angela Veesenmeyer, MD, MPH, Katie initiated an innovative approach to enhance interest and interprofessional scholarly activities through the implementation of the Interprofessional Research Council. The efforts of the Interprofessional Research Council have resulted in increased nursing and interprofessional research activities. During the recent Magnet® site visit, the efforts of this council and Katie's co-leadership were recognized by the appraisers as an innovative practice..

Committed to exemplary patient care, Katie supports care delivery through leading efforts to promote quality

and communication. She served as the coordinator for Valley Children's Hospital's participation in the National Database for Nursing Quality Indicators quarterly pressure injury prevalence study. This included leading a team of nurses in assessing patients throughout the hospital and promoting awareness of pressure injury prevention. Katie also provided coaching and professional development support for ambulatory nurses by discussing opportunities for clinical and professional practice advancement.

Katie's efforts in coordinating monthly CNO Breakfast Forums helped promote communication and engagement of nurses at Valley Children's. Although recently implemented, the rich dialogue between nurses and the CNO have already identified opportunities for enhancing nursing practice.

Katie is an innovative leader who regularly participates in organization-wide councils. She currently serves as Co-Chair of the Interprofessional Research Council. She also serves on the Executive Nursing Council, as well as on a variety of Magnet® committees and teams. Katie's previous leadership roles include serving as Interim Chair and member of the Practice Council, member of the Patient Family-Centered Care Committee and member of the Patient/Family Onboarding Taskforce.

Katie volunteers annually for the Mennonite Central Committee disaster relief sale and other community service projects sponsored by her church. She has prepared and served dinner to Valley Children's Hospital families staying at Ronald McDonald House, and volunteered for a medical missions trip to Ecuador, serving as an RN with Medical Ministry International.

Katie has promoted an environment that supports the professional practice of nursing and interprofessional collaboration throughout Valley Children's network.

We congratulate Katie for being the Valley Children's Nurse of the Year 2019 – Excellence in Leadership.



Valley Children's Healthcare

Nurse of the Year 2019

Excellence in Education

Tana Leon-Toscano, BSN, RN,
Periop Clinical Coordinator – Day Surgery

Tana Leon-Toscano is a true inspiration to the Day Surgery team. By virtue of her role as Periop Clinical Coordinator, she spends the bulk of her time educating staff on current practice and helping troubleshoot processes and implement change education to improve them.

Tana works collaboratively with every department that sends children to surgery to optimize the surgical event by promoting increased adherence to the pre-operative checklist. She was key in the design and implementation of standardized autonomous nursing practice for human chorionic gonadotropin (hCG) testing in Day Surgery, and integral in the implementation of mandatory Chlorhexidine gluconate (CHG) bathing in Day Surgery. Bathing patients with CHG has proven effective in helping prevent hospital-acquired infections. The autonomous nursing practice of hCH testing as well as reduced infection rates related to CHG bathing in Day Surgery were examples used to support Magnet® redesignation. Tana maintains a significant role in the preoperative bathing initiative, and participates in all unit Quality Improvement projects.

Tana is a highly respected educator. She strives to keep Day Surgery current with education, and works tirelessly to move the team forward in their practice based on evidence and American Society of PeriAnesthesia Nurses standards. She is a constant inspiration to nurses throughout Perioperative Services to pursue higher learning, challenging them to obtain certifications and encouraging them to earn advanced degrees. Tana continues to educate herself as evidenced by her participation in a Master of Science in Nursing Family Nurse Practitioner degree program.

Tana is committed to the growth and education of our future healthcare teams through her work with Duncan Polytechnical High School. She is a board member for the Certified Nursing Assistant program at Duncan. In that capacity, she focuses on continuing to improve the educational curriculum received by the high school's health sciences students. She invites local healthcare organizations to the campus for interview sessions with

the high school students to help them prepare for their future and be exposed to the myriad of healthcare career opportunities available to them.

Tana is a member of the American Society of Peri-Anesthesia Nurses and a student member of California Association for Nurse Practitioners. She is involved in several nursing committees in the organization including the Restraint Committee, Surgical Site Infection task force and the Magnet® Cultural Readiness Committee. Tana is an Epic Implementation Subject Matter Expert for OpTime and Anesthesia, and is also a lead on documentation optimization in Perioperative Services. She serves as the Perioperative Quality Improvement champion for preoperative optimization of the patient, designed to ensure pre-op bathing and compliance with the inpatient pre-op checklist.

Tana has initiated a research project on the effectiveness of standardized procedures in practice, and is in the process of meeting with the organization's Institutional Review Board.

Tana is well respected by many interdisciplinary teams. She is known for consistently bringing good information to the teams and leading discussion to advocate on behalf of patients who would be impacted by proposed changes.

Tana truly believes nursing is a profession. In respect of that profession, she feels obligated to stay current on practice. She routinely reviews the evidence-based, best practice processes for perioperative care in order to ensure her patients receive the best care possible.

Valley Children's greatly appreciates Tana's inspirational style of leadership in education.

We congratulate Tana for being the Valley Children's Nurse of the Year 2019 – Excellence in Education.



Valley Children's Healthcare

Nurse of the Year 2019

Excellence in Clinical Practice

Charito Arriola, BSN, RN, CPN,
Clinical Nurse & Relief Charge Nurse, Acute Care

Charito Arriola started her nursing career more than 30 years ago. A lifelong learner, she is described by peers as a "very well-informed bedside RN and an excellent resource." Her peers gravitate to her not only because she provides them with a wealth of knowledge, but also because she joyfully shares her knowledge as an enthusiastic care partner.

Charito works in the hospital's respiratory acute care unit, Apollo, where she functions as a relief charge nurse, problem solving and matching each patient's needs to the staffing mix. Active in the unit's Patient and Family Satisfaction and Education Committee, Charito assists in formulating strategies to better meet the needs of the patients – some with chronic illnesses requiring complex care and many with infectious diseases that prevent them from interacting with others in the hospital. These challenging situations require an innovative approach to enhance patient satisfaction.

Charito's diverse skillset includes experience in hemodialysis, rehabilitation and adult medical surgical nursing. She effectively manages a broad variety of complex patient assignments. Charito volunteers to float to all other inpatient care areas (acute and intensive), and is often sought out as the first choice of floats due to her reputation for high levels of competence.

Charito took the initiative to research and create a policy for the use of "red robin" catheters at Valley Children's Hospital. When nurses approached her with questions about providers' orders for its use, Charito recognized the lack of standardized guidelines and worked diligently to find a solution. She also serves as a point person for Laboratory Point of Care Testing, answering clinical questions regarding the utilization of the devices and ensuring competence.

As a unit representative of the house-wide Patient Classification System Committee, Charito annually evaluates the projected acuity of inpatients on her unit to gather data to promote safe staffing decisions. Charito further contributes to patient safety through her work

on the Central Line and Blood Stream Infection (CLABSI) Prevention Committee, researching evidence-based practice techniques to improve patient outcomes. Charito assisted in revising the implanted port policy for the organization. She biannually reviews the Central Venous Line policy for the latest evidence-based practice updates, and serves as a resource on her unit for accessing difficult implanted ports.

Outside the hospital, Charito volunteers to educate the community on car seat, water, medication and helmet safety. She has worked the Clovis Night Out event four consecutive years, serving as lead coordinator for the last three. She has also supported Zoo Boo, a fun event to promote child safety and wellness. Additionally, Charito volunteers with the Valley Children's Teddy Bear Health Fair, where preschool and elementary school students bring their favorite stuffed friend to practice medical examinations and minor procedures. The event is designed to make the hospital feel more welcoming for children. Charito has also supported the Cystic Fibrosis walk for the last 10 years.

Charito is passionate about mentoring new nurses and growing the next generation of nurses. She volunteers at the Teen Health Career Fair, sharing with high school students the exciting possibilities offered by a career in nursing.

Charito's dedication to improving both patient outcomes and the patient experience make her a valuable asset to Valley Children's Healthcare.

We congratulate Charito for being the Valley Children's Nurse of the Year 2019 – Excellence in Clinical Practice.



Valley Children's Healthcare

Nurse of the Year 2019

Excellence in Innovation in Professional Nursing

Mary Grove, BSN, RN,
Clinical Nurse, Rheumatology/Infectious Disease

Mary Grove made a significant impact to improve patient outcomes and clinic processes through conceptualizing and implementing an innovative way to streamline referrals for certain patients with a potentially life-threatening diagnosis.

As clinical lead nurse in the rheumatology/infectious disease practice at Valley Children's, Mary plays an instrumental role in the clinic's day-to-day operations. She grew concerned by the delay in many referrals for patients testing positive for coccidioidomycosis, a fungal infection also known as Valley fever. Obtaining test results from the Emergency Department (ED) at Valley Children's Hospital takes from seven to 10 days due to the nature of the screening method. The process of sending positive results to the patient's primary care physician for referral was causing delays in many patients' treatment. This greatly concerned Mary because postponing treatment for Valley fever can lead to dissemination of cocci. If the infection spreads to the brain or other vital organs, it can be fatal.

Mary took it upon herself to connect with Information Technology Services to create an interdepartmental system of screening positive results. She worked with ITS to develop a report that tracks all positive cocci results from the ED and sends them to the clinic weekly. Mary leads her team in reviewing reports and notifying the patients' primary care providers of referral needs. Mary then notifies the families, providing frontline education on Valley fever and making appointments in the clinic as soon as possible.

Mary's innovation has also led to improvements in care coordination and medication management, exemplifying our core value of Best Advocacy for her patients. She teaches families the complex medication regimen often required by patients of the clinic. She also put in place a new process to ensure timely reordering of medications and adequate stock on hand. To further streamline methods and enhance care, Mary worked diligently to develop a better onboarding process for educating and training nurses new to the clinic. As a result of her efforts,

nurses gained a superior understanding of their patients' care needs.

The ambulatory practice manager recognizes Mary's clinical experience and leverages her knowledge to elevate the clinic's practice. Mary is member of the Ambulatory Core Orientation workgroup, which creates tools and resources to assist ambulatory nurses in various clinics to improve communication and customer service. She also serves on the Ambulatory Professional Practice Council.

Mary gives back to the community through volunteer service. She invests time each year at educational outreach events like Rheumatology Care Day and Valley Fever Awareness Week in Bakersfield. She volunteered for three consecutive years at St. Baldrick's, a head-shaving event to support pediatric cancer research. Mary also sings in a choir that performs to raise money for scholarships to promote the arts.

Mary faces change with a can-do attitude and does not shy away from a challenge. When a clinic clerical position was vacant, she went above and beyond on her own time to ensure medical records were properly scanned into another modality for continuity of care. Mary continually strives to increase efficiencies in patient follow up, often networking with other ambulatory clinics.

Beloved by her clinical co-workers, Mary is passionate about ensuring her patients receive the best care. She remains focused on promoting the practice of nursing for the patient population she serves.

We congratulate Mary for being the Valley Children's Nurse of the Year 2019 – Excellence in Innovation in Professional Nursing.



Valley Children's Healthcare Friend of Nursing 2019

Lakesha Smith,
Unit Support Specialist, Emergency Department

An innovative leader and champion, Lakesha Smith enriches the practice environment at Valley Children's, especially in the Emergency Department (ED). Lakesha assisted with a hospital-wide improvement project called Value Stream Analysis. Her project role in the restructuring of ED supplies and the standardization of workspaces helped improve patient care and increase nursing satisfaction.



The reduction in search times for supplies and equipment by ED nurses also resulted in better supply management and cost savings for the organization. Lakesha's work in this Value Stream project was used to support Magnet® redesignation. Word spread of Lakesha's success with Value Stream Analysis in the ED, and she was sought after as kickoff champion for other departments. Lakesha willingly shared her success strategies and challenges.

Lakesha's innovation results in all kinds of ways to make equipment management for the nurse easier. She created a toolbox containing spare otoscope/ophthalmoscope heads with the correct battery. Lakesha tests equipment regularly to make sure it is in working order. She always has an otoscope ready to switch with one that has burned out. She made laminated signs and applied them to the supply bins to communicate with staff whether that particular supply was backordered.

Lakesha takes care of things behind the scenes to support the flow of care delivery in one of the busiest patient care environments in the organization. She created a weekly newsletter called ED Essentials that focuses on Environment of Care topics and supply and equipment updates. The newsletter provides nurses and staff with information to support streamlined and efficient patient care. Lakesha supports rounding weekly with Environmental Service to ensure the Environment of Care meets established standards, and actively rounds with nursing staff to ensure they have the equipment needed to support safe patient care. Lakesha also serves as the Par Ex-Champion in ED.

An advocate for patient safety, Lakesha is an executive board member of Safe Kids Central California, which focuses on teaching injury prevention to the public. She is a Child Passenger Safety Technician, a senior checker and a Special Needs Safety Technician. At the hospital's Car Seat Checkup Events, she volunteers at the Inspection Fitting Station, providing education to families on car seat installation. She also volunteers at Valley Children's Annual May Day Event, where more than 1,000 first and second graders from around the Valley take part in a summer safety fair and drowning prevention program.



We congratulate Lakesha for being the Valley Children's Friend of Nursing 2019.

Exemplary

Professional Practice





Nursing Professional Practice Model

History: In 2012, Valley Children’s Hospital established a nursing professional practice model (NPPM) that is still in place today. The model was adapted from research conducted at Valley Children’s Hospital entitled, “Common Components of Current Nursing Professional Practice Models in the Hospital Setting in the United States of America: A Qualitative Study.” The study was completed by Denise Vermeltfoort, MSN, RN, NE-BC, director regulatory and clinical practice, Patient Care Support; Margarita Dragomanovich, BSN, RN, NE-BC, manager, Case Management; and Keitha Mountcastle, EdD, MSN, NNP, RN, CNS, clinical nurse, Neonatal Intensive Care Unit (NICU). The Executive Nursing Council originally adopted the NPPM as a comprehensive reflection of Valley Children’s Hospital’s nursing professional practice. Then in April 2017, as Valley Children’s Hospital expanded into a network, they adopted the model to apply to all sites of nursing practice at Valley Children’s Healthcare.

Evaluation of the Nursing Professional Practice Model

Overview: Valley Children’s NPPM incorporates 12 elements of nursing practice – Professional Values, Theoretical Framework, Professional Practice, Governance, Collaborative Relationships, Care Delivery, Outcomes, Research/Evidence-Based Practice, Professional Development, Reward and Recognition, Communication and Operations.

Renewed Focus: In October 2017, a survey was distributed to all nursing staff to determine if the NPPM still resonated with nurses and if they identified any room for improvement with the model. The five-question survey was available to all 1,169 Valley Children’s nurses to assess which components apply to the NPPM, if any components are missing or need to change, if the definitions and examples are still applicable and current, and if the NPPM was centered on the patient and family. Each focus also asked an open-ended question, allowing for additional feedback. A total of 1,019 nurses (87.2%) responded. Of that number, 855 (83.9%) were clinical nurses.

Focus Review Team: In February 2018, Sheena Keding MSN, RN, CNS, ACCNS-P, CPHQ, clinical practice specialist, gathered a core team of nurses to form the NPPM Focus Review Team. The team included Janet Del Real, MSN, RN, PHN, CNS, Acute Care; Kristi Downs, BSN, RN, PHN, IBCLC, RNC-NIC, NICU; Laura Grant BSN, RN, Central Staffing; Ruth Martinez BSN, RN-BC Hematology Clinic; and Jean Hoelscher MSN, RN, BC, clinical education specialist, Patient Care Education.

Literature Review: The team evaluated 15 peer-reviewed journal articles and one expert-opinion article. The team used both Pubmed and Google Scholar from 2013 to present for their literature search, and then conducted a comprehensive literature review of NPPMs created up through 2014 by Slatyer et al. (2015).¹

Each team member utilized a rubric (the NPPM Evaluation Tool) to independently review which components, definitions, or examples required changes based on the literature. The team met, discussed and voted on proposed changes to components or definitions.

¹Slatyer, S., Coventry, L. L., Twigg, D., & Davis, S. (2015). Professional practice models for nursing: a review of the literature and synthesis of key components. *Journal of Nursing Management*, 24(2), 139-150. doi:10.1111/jonm.12309



Survey Results: On February 21, 2018, the team met to evaluate the results of the NPPM survey and current literature. The results were consistent among all nurses and the subset of clinical nurses:

- Components that are missing and/or need to change:
 - » All Nurses: 94.7% answered no
 - » Clinical Nurses: 94.4% answered no
- Definitions of the 12 components still applicable and current:
 - » All Nurses: 95.4% answered yes
 - » Clinical Nurses: 95.3% answered yes
- Examples of each component are still applicable and current:
 - » All Nurses: 95.2% answered yes
 - » Clinical Nurses: 95.6% answered yes
- NPPM is still centered on the patient/family
 - » All Nurses: 96.9% answered yes
 - » Clinical Nurses: 96.8% answered yes

The team members independently used the NPPM Evaluation Tool to score the findings. The team discussed and reached a consensus on the analysis of the information and associated recommendations, and they documented the team consensus. The comprehensive evaluation process, analysis and recommendation were combined into a final report.

Recommendations: On March 26, 2018, the team presented its recommendations, based on input from all nurses, but especially clinical nurses, to the Executive Nursing Council: no changes to the 12 components or the definitions of the NPPM. However, there were some updates to the examples of the components.

Beverly Hayden-Pugh, MOB, BSN, BHSc, RN, senior vice president chief nursing officer and transformation officer, communicated the outcome of the evaluation process to the nursing staff and nursing leadership, thereby concluding the process. She acknowledged the efforts of the NPPM Focus Review Team and shared that the Valley Children's Healthcare NPPM is applicable to our practice. Staff was provided with the details of the model and highlights of the new additions to the examples.

Regional Specialty Nursing:

Enhancing Access to Care

Valley Children's Healthcare currently operates seven pediatric Specialty Care Centers and a growing network of outpatient locations. These regional Valley Children's locations ensure Central California families receive specialized pediatric care closer to home. Valley Children's plans continued growth so that every family in our region is within 30 minutes or 30 miles of receiving quality care for their children.



"Regional specialty nursing allows us to provide care to children in their home communities," said Beverly Hayden-Pugh MOB, BSN, BHSc, RN, Senior Vice President, Chief Nursing Officer and Chief Transformation Officer, Valley Children's Healthcare.

Providing multidisciplinary, specialized care in several different locations poses a unique challenge for Valley Children's nurses. "Nurses at our regional centers have to be well rounded," said Jenny Golleher, RN, practice manager at Eagle Oaks Specialty Care Center in Bakersfield. "Nurses in the clinics at our main campus work in one specific specialty, but not here. We have



multiple specialties onsite, so the nurses have to be trained and knowledgeable in all of them."

Eagle Oaks Specialty Care Center opened in October 2018 and offers medical services in 13 pediatric specialties provided by more than two dozen specialists. "Our pediatric cardiologist, endocrinologist and gastroenterologist live here in Bakersfield. The other providers may come to Bakersfield once a month, while some are here every week," said Jenny. "But all the providers are not onsite every day."



Valley Children's has been providing pediatric services in Modesto for close to 20 years. In February 2019, the organization expanded its presence in the North Valley with the opening of the newest location, Pelandale Specialty Care Center. 10 providers live in the area to provide medical care to children, ensuring every child's specialized healthcare needs are met. Pelandale Specialty Care Center currently offers more than a dozen pediatric specialties and will continue to grow.



Of the 1.3 million children in Valley Children's region, many are in underserved communities. Regional specialty nursing supports the commitment to meeting their healthcare needs and enhancing access to care and pediatric specialists.

Patients visiting a specialty care center often need ongoing treatment for chronic conditions. "Nurses are the bridge of communication between the doctor and the family because we are always here," said Jenny. "We take calls from families with questions about their child's symptoms or medications, so education to the families is something we do often. We are the first line in that bridge of communication."

Specialty care center nurses not only must have a broad knowledge base, but also must be flexible, adapting easily to a constantly changing environment.

"Every day is a different day because each specialty is different," said Jenny. "The changing dynamic at a regional center means we may get a call from a urology patient on a GI day."

Families receiving care at regional facilities do not sacrifice quality for convenience. In April 2004, Valley Children's was the first pediatric hospital west of the Rockies to receive Magnet® designation from the American Nurses Credentialing Center (ANCC). With four consecutive re-designations, Valley Children's has remained in this elite group of less than 8% of hospitals nationwide for 15 years. This proof of nursing excellence and innovations in professional nursing practice now extends throughout the network. In March 2019, Valley Children's received the most recent re-designation, officially including offsite nurses as part of the Magnet Recognition Program®. Families visiting pediatric Specialty Care Centers within their own communities receive care for their children from nurses who have earned the highest benchmark for nursing excellence.

"The 2019 Magnet® standards require outcomes and sustained improvements in the ambulatory setting," said Katie Chan-Boeckh, MBA, BSN, RN, CPN, Magnet® Program Manager. The ambulatory leaders and nursing teams have played an important role in demonstrating excellence during each of the four Magnet® designations, and are working to build a structure to meet the 2019 standards."

OUTPATIENT LOCATIONS

Bakersfield
 Fresno (2)
 Madera
 Merced
 Modesto
 Visalia

SPECIALTY SERVICES*

Audiology
 Cardiology
 Endocrinology
 Gastroenterology
 Genetics
 Hematology
 Infectious Disease
 Maternal Fetal Medicine
 Nephrology
 Neurology
 Neurosurgery
 Orthopaedics
 Otolaryngology (ENT)
 Pediatric Surgery
 Plastic Surgery – Telehealth
 Pulmonology
 Rheumatology/Immunology
 Urology

*Includes currently available and planned services



Equipped with state-of-the-art technology, Valley Children's two newest specialty care centers are enhancing access to care. "Eagle Oaks and Pelandale are tightly connected with the main hospital," said Jenny. "Nurses at the main hospital site identify which patients are coming from Bakersfield for surgery, and they work with us to coordinate post-op visits using telemedicine so families don't have to make the drive. Nurses at the offsite locations are trained to conduct the appointments with telemedicine," she said. "We're always looking for opportunities to help families know when they need to go to Madera and when they can stay here."

With an ultimate goal of placing pediatric specialists within 30 miles or a 30-minute drive of every family in our region, Valley Children's Healthcare depends on our nurses. Their integral role in our pediatric outpatient centers is enhancing access to care and helping families stay closer to home.



"We're always looking for opportunities to help families know when they need to go to Madera and when they can stay here."

– Jenny Golleher, RN practice manager, Eagle Oaks Specialty Care Center, Bakersfield

Nurses Engaged in Bringing Their Best



When nurses not only love their work but also enjoy their work environment, they bring their best and are supported in doing their best.

“Leadership is committed to our core values,” said Stacie Venkatesan, MSN, CNS, RNC-NIC. She is director of critical care, overseeing the neonatal and pediatric intensive care units. Over the last two years, she has seen the NICU’s traditionally high engagement scores go even higher. “As leaders, we share our vision of what becoming our best looks like, and then model that vision so staff believes in the words that we’re saying.”

Nurses across Valley Children’s Healthcare participated in the Employee Engagement Survey. This year, the nurses’ response rate reached 75%. The organization’s outcomes exemplified excellence with Valley Children’s nurses outscoring the benchmark in all Magnet® categories.



Category	Score given by nurses at Valley Children's	Avg. score of Magnet® organizations participating in survey	Difference
Autonomy	5.11	5.04	+.07
Fundamentals of quality nursing care	5.25	5.15	+.10
Professional development (education, resources, etc.)	4.77	4.70	+.07
Interprofessional relationships (includes all disciplines)	5.10	5.03	+.07
Leadership access and responsiveness (includes nursing administration / CNO)	4.56	4.40	+.16
Adequacy of resources and staffing	4.53	4.43	+.10
RN-to-RN teamwork and collaboration	5.06	5.02	+.04

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Organizations with designations from the Magnet Recognition Program® represent an elite group of exemplary healthcare facilities who value nursing talent and support greater autonomy at the bedside. For Valley Children's nurses to exceed the engagement scores of other Magnet® organizations demonstrates an exceptionally high level of nursing satisfaction.

"Our leadership team holds regular roundtables so staff have the ability to give input into what's going on and to hear feedback on processes," said Stacie. "It's all about asking our staff where they see the problems lie and what creative solutions they can identify. Then following through on our promises—even when the answer is no or not now."

Leadership at Valley Children's works to break down silos and paint a broader picture so nurses have an eye for what is going on throughout the organization and understand where the greatest needs lie.

"We're good at closing the loop when staff provides input to make sure that even if we can't launch a project or follow through on something, we explain why," said Stacie.

Building a culture of leadership presence helps contribute to an open-door policy.

"It's important for leadership to be physically present in the units so staff know they can stop you if they have questions," said Stacie. "The NICU managers are in their units every day, and I walk through at least once a day. Bedside nurses see me and feel confident to bring things forward."

Leadership circles back on areas receiving lower scores to engage staff in being part of the solutions. "We hit the reset button and fix problems with transparency," said Stacie. "We're working better with each other to ensure great patient outcomes."

Nursing leaders at Valley Children's not only engage staff in the decision-making process, but also recognize and reward successes.

"I think thank yous are big, big deals," said Stacie. "It's the small things that make you connect with people. It's those personal check-ins that people value."

Promoting an environment of trust, where people do not jump to blame but rather assume the right intent, supports nurses in their roles bedside and helps ensure safe patient care. Exceeding the Magnet® benchmark in nursing engagement means Valley Children's nurses are bringing their best and doing their best.

CLABSI-Free in Craycroft for More Than a Year

The Valley Children's Craycroft Oncology Team achieved 500 days with no central line-associated blood stream infections (CLABSI).

"For Craycroft, it's a huge challenge to achieve our goal of zero CLABSIs because we work with immunocompromised children," said Gina Hull, BSN, RN, Charge Nurse, Craycroft Unit. "After we have a CLABSI, we hold Zero Hero Huddles with doctors and nurses on Craycroft and people from infection prevention and patient safety." A Zero Hero Huddle allows the team to evaluate risk factors for CLABSI and identify room for improvement. "We look at charting to see if there were opportunities with things like timeliness of needle changes. We also review family compliance in keeping the patient safe. Did they agree to daily room cleaning, bathing and linen changes?"



Valley Children's Healthcare implemented new protocols throughout the organization based on best practices for infection prevention as recommended by the Centers for Disease Control and Prevention (CDC), Association for Professionals in Infection Control and Epidemiology (APIC), Infusion Nursing Society and Children's Hospitals' Solutions for Patient Safety (SPS).

Adopting the SPS CLABSI Prevention Bundle set in motion several procedural changes in Craycroft. "We used to use adhesive strips and thought they helped to secure the Mediport™ needle, but recommendations suggest not using any extra adhesive under the dressing," said Gina. "In our minds, we thought the strips

were helpful, but found out they could be a source of infection because of the adhesive. Now we don't have anything underneath the dressing at the insertion site except the Biopatch®, which helps prevent infection with chlorhexidine gluconate."



Pediatric oncology patients often receive drug therapies requiring hospitalization for months on end. To prevent infections, the Craycroft staff also implemented practice changes in regards to the handling of medication tubing. Gina explains: "Now, when we're handling an IV fluid bag or putting a medication on the Medfusion™ pump, we walk in the room, gel and put gloves on. Any time we have anything to do with the line, we have to have gloves on."

Policies also changed for giving medications on the Medfusion™ pump. Best practices were adopted to maintain a closed system as much as possible to prevent the line from exposure to the air. Microclave connections were placed at what used to be open-ended lines to maintain a closed system, and now they are scrubbed with alcohol for 15 seconds or capped with a CuroS™ Disinfecting Cap between medication administrations.

"We're always trying to find evidence-based best practice," said Gina. "When we find out about new evidence to improve care, we do it. Everybody on Craycroft is on board to implement any changes based on best practice."

Our commitment to patient safety

Craycroft's success in maintaining a CLABSI-free oncology unit for 500 consecutive days demonstrates our nurses' commitment to reducing the occurrence of hospital-acquired infections. Staff stepped up to comply with more stringent patient safety standards, and the culture on the unit shifted.

"When we first set the goal to go a year CLABSI free, I thought, 'I don't know if there's any way we can,'" said Gina. "One year we had nine CLABSIs. How are we going to go to zero?' It almost seemed impossible in my mind. But going 500 days shows the staff's commitment to providing the best possible care for our kids. They did it! It was awesome. I honestly didn't think it could happen, but going that long without a CLABSI proved we could do it."

"Ten years ago, it would be hard to believe that it would be possible for any organization to get zero CLABSI, especially in a department as high risk and vulnerable to infection as oncology," said Dr. Karen Dahl, vice president of quality and patient safety. "This accolade is proof that it can be done and is a true testament to the leadership of the Valley Children's Craycroft Oncology Team. They are a key component to the internal drive that leads to this kind of success."

The unit conducts regular audits to ensure compliance with the SPS CLABSI Prevention Bundle. Families are also called upon to help minimize the risk of infection. Some cancer patients feel too sick to brush their teeth and do not have the strength to get into the bathtub. Craycroft assembled kits for oral care and offers patients the option to use chlorhexidine gluconate (CHG) wipes rather than bathing with water.



"We're really buckling down on bathing and oral care," said Gina. "It's hard on the families because they can see their sick child and it's not easy to put rules on them. We tell parents that we nurses can be the rule enforcers, insisting on bathing and oral care, and we've had good response with that."

Reaching the 500-day mark without a central-line infection made the goal of zero CLABSIs for an entire year attainable.

"We've proven we can go a long time without an infection," said Gina. "We've proven that following best practices works to prevent infection. Everything that's been implemented has played a role, and nurses played a huge part. I'm very proud of our staff. They worked hard and they really care about our patients. I work with a great group of people, and it makes me really proud to work here."

Valley Children's salutes Craycroft nurses for a job well done.

OVERVIEW OF SPS PREVENTION BUNDLE

INSERTION

- Hand Hygiene
- CHG Scrub
- No iodine ointment
- Prepackaged or filled insertion cart, tray or box
- Insertion checklist with staff empowerment to stop non-emergent procedure
- Full sterile barrier for providers and patients
- Insertion training for all providers

MAINTENANCE

- Daily discussion of line necessity, functionality and utilization, including bedside and medical care team members
- Regular assessment of dressing to assure clean/dry/occlusive
- Standardized access procedure
- Standardized dressing, cap and tubing change procedures/timing
- An in-depth review of all identified CLABSI with multidisciplinary involvement AND the intent to change the process if needed.
- Daily CHG bathing and linen changes

New Knowledge

Improvements & Innovations





**GEORGE'S
PASS**

Novel Practices Worth Replicating

On March 21, 2019, Valley Children's Healthcare received the much-anticipated call from the Commission on Magnet® with the exciting news that Valley Children's had achieved its fourth consecutive Magnet Recognition®.

During the call, the chair of the Commission informed the organization that George's Pass had been recognized as an Exemplar. In the world of Magnet®, an Exemplar is an innovation recognized as a best practice in nursing care delivery. George's Pass is an enculturated, nurse-driven program that demonstrates the care team partnering with the patient and family to meet the patient's unique needs.

During the site visit, the Magnet® appraisers also identified Clinical Partnerships and the Interprofessional Research Council as innovative practices at Valley Children's. According to the Magnet® appraisers, these nurse-driven innovations meet different needs ranging from the community, to care delivery for unique populations, to providing the most current evidence-based practice. Each was commended for improving quality and increasing efficiency in care delivery.

Valley Children's is honored by this recognition, and is pleased to highlight each of these creative, problem-solving innovations.

Magnet® Highlights

Clinical Partnerships

Valley Children's Healthcare introduced the Clinical Partnership Program in 2014 with a goal to ensure access to high-quality pediatric healthcare services throughout our region. What began as a business development strategy has evolved into an innovative outreach program with a strong emphasis on nursing processes and precepts. The Commission on Magnet Recognition® recognized the program as an example of "transformational leadership" and commended its new and novel approach to improving health outcomes for pediatric patients treated in our partnering hospitals.

Developed and operationalized by nursing leaders at Valley Children's, the Clinical Partnership Program provides a greater depth of assessment and intervention than most forms of outreach offered by other regional healthcare facilities. The program provides partnering community hospitals with an ongoing, cyclical improvement process that assesses the pediatric care provided throughout their facility, and then develops action plans to enhance care for children. This unique program, which has grown to include 13 inpatient partnerships in just four years, involves a confluence of structure, a substantial resource commitment and interprofessional engagement.

"This isn't about Valley Children's Healthcare coming in as a consultant," said Randy Guerrero, MSA, BSN, RN, Director Clinical Partnerships and Telemedicine. "Our goal is to work together with our partners and learn from each other. It's a give and take. The partnering hospitals' commitment in resources is equal to or greater than ours."

Valley Children's is a regional children's hospital with inherent expertise and specialization in the care of children. We openly share that expertise through clinical pathways, clinical education and more.

"We're improving our partners' confidence in caring for pediatric patients," said Randy. "They don't have 100% of their resources geared toward treating children. We do, which creates a different paradigm for treating kids. With clinical partnerships, we're trying to share some of that paradigm."

The Clinical Partnership Program is reducing the burden on patients and families by facilitating patients being closer to home for their care.

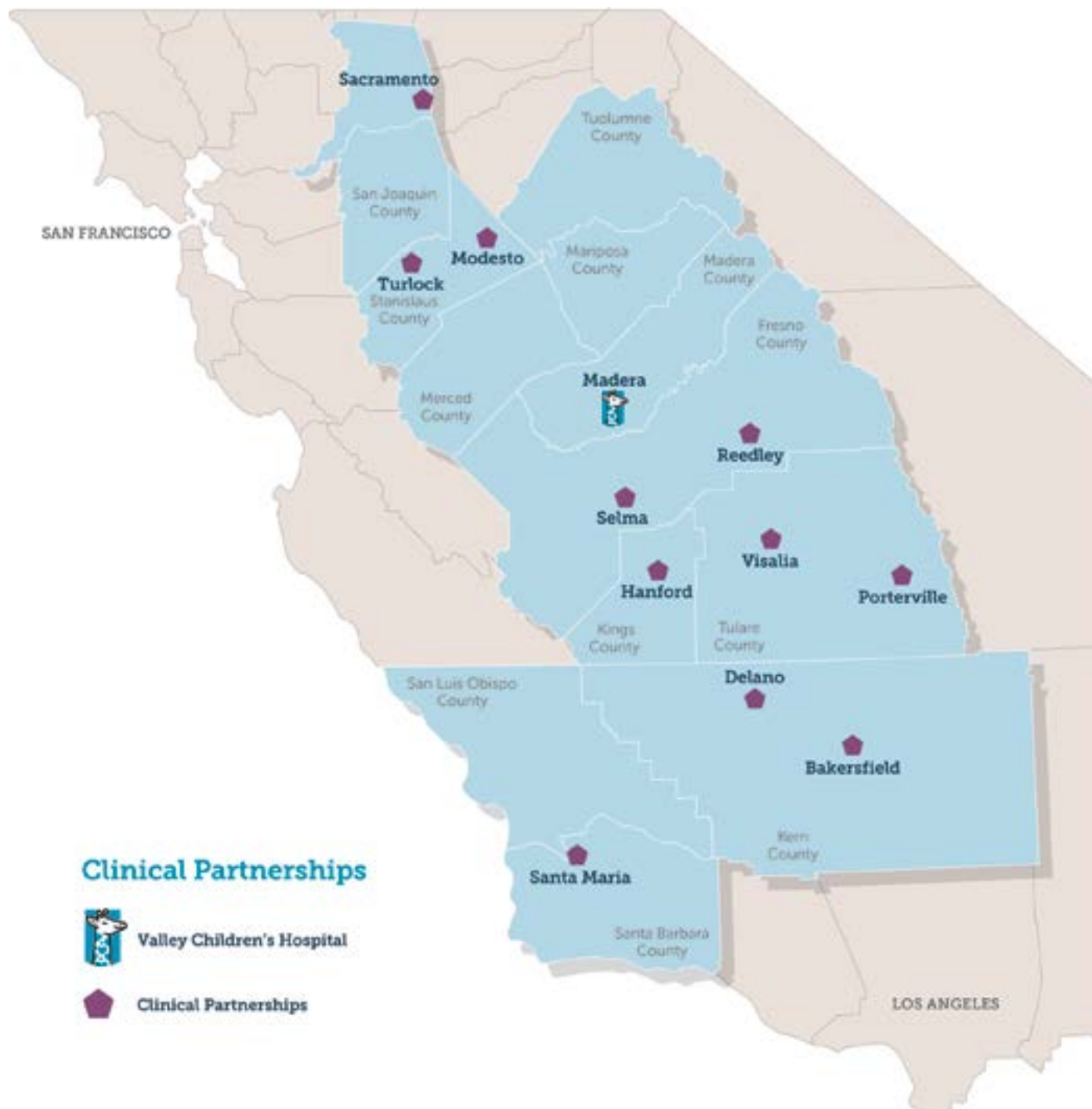
"There's always new clinical evidence and new best practices in pediatric care, and we feel a responsibility to funnel that information to our partners so they have the opportunity to continuously improve care," said



Randy. "We don't just provide the clinical standards, policies and best practices. We review the content and discuss whether it makes sense for the level of care our partner is providing. We work together to identify any gaps and opportunities relative to the standards and evidence provided. We're certainly not telling them what to do. We're sharing with them how we do things and providing the context behind the care we provide. Our partners make the decision whether they actually change their practice."

Feedback from partnering hospitals has been positive. Not one partner has expressed a desire to dissolve the relationship.

Valley Children's is pleased Magnet® appraisers acknowledged the Clinical Partnership Program for its excellence in improving care delivery in the community.



Magnet[®] Highlights

Interprofessional Research Council

In recent years, Valley Children's has received greater recognition on the national scene. In addition to achieving the honor of being named one of U.S. News & World Report's best children's hospitals in multiple pediatric specialties, Valley Children's also initiated a Graduate Medical Education (GME) program to train residents. This level of achievement comes with greater expectations for the quantity and quality of research conducted by an organization.

Preparing to apply for redesignation from the Magnet Recognition Program[®] drew attention to an opportunity in the nursing research structure at Valley Children's. Magnet[®] requires hospitals to educate nurses about research, establish an infrastructure and resources to support the advancement of research in all clinical settings, and set targets for research productivity. Additionally, GME programs must demonstrate an environment of inquiry and scholarship with an active research component.

Historically, the Nursing Research Council (NRC) at Valley Children's met quarterly, and struggled with consistent leadership, maintaining momentum and driving new knowledge. Then in 2017, the Executive Nursing Council prioritized establishing a research structure, and recommended creating a new council with interprofessional membership.

Katie Chan-Boeckh, MBA, BSN, RN, Magnet[®] Program Manager; Sheena Keding, MSN, RN, CNS, ACCNS-P, Clinical Practice Specialist; and Angela Veesenmeyer, MD, MPH, Research Education Director and Associate Program Director, Valley Children's Pediatric Residency Program worked together to develop a plan. They adapted the NRC bylaws and planned a structure to support the caliber of research expected from a nationally recognized organization.

"Meeting requirements for integrating scholarly activity into practice can be daunting, particularly for nonacademic hospitals such as ours," said Angela. "How do we, as a healthcare network, harness our resources to meet these requirements? I believe the answer lies

in interprofessional collaboration. That's when two or more professions work together to achieve common goals and solve a variety of problems and complex issues."



"Angela's support as a physician enabled us to reimagine a council that had previously been nursing focused," said Katie. "In the past, the NRC reviewed articles and conducted nursing-centered studies, but the Interprofessional Research Council goes much further."

Katie, Sheena and Angela launched the Interprofessional Research Council in January 2018, and held its first meeting with Sheena and Angela as interprofessional co-chairs. Katie assumed the role of co-chair in Sheena's place in August 2018. Nurses, physicians and respiratory care practitioners together with representatives from the Institutional Review Board (IRB) and the Research Department serve on the Council. Any interprofessional team member with an interest in research is invited to participate as a member.

"Collaboration allows participants to achieve more together than they can individually, to serve larger groups of people and to grow on individual and organizational levels," said Angela. "Together, we can work to meet our organizational requirements for excellence, while contributing to knowledge that will directly benefit the children for whom we care."

"Research definitely supports the best quality care," said Katie. "We're excited that we've been able to demonstrate new knowledge through scholarly activity as an organizational need."

The Interprofessional Research Council is helping support the advancement of research through education, networking and mentoring. The council not only heightened awareness of the tools available to conduct research, but also contributed to an increase in nursing research studies in the organization. This year, there are 11 active studies with nurses serving as Principal Investigator. Prior to launching the Council, there were on average only two to three of these studies conducted per year.

"We want to support junior researchers to become more experienced researchers who in turn mentor other junior researchers," said Katie. "Our increasing research output will continue to strengthen our skills and status as an organization recognized for contributing to evidence-based practice."

Resources available to nurses and interprofessional team members interested in scholarly activity are now disseminated and utilized more broadly. Those who are ready to begin a study may approach the Council for didactic training on a variety of scholarly activities, including critical appraisal of evidence, developing a survey question and coding qualitative research data. The IRB Coordinator assists with their applications and assigns a one-on-one research coordinator to each principal investigator.

"Historically, research has been a gap for us," said Katie. "But this year the Magnet® appraisers recognized how we had successfully addressed this gap through an interprofessional structure."

The Interprofessional Research Council serves as a model for promoting a culture of inquiry and scholarly activity.



Magnet[®] Exemplar



GEORGE'S PASS

Established at Valley Children's in 2014, George's Pass has significantly eased the stress of pediatric surgery for families dealing with autism spectrum disorder (ASD). Shelly Reyes, BSN, RN, CPN not only serves as charge nurse in Day Surgery at Valley Children's Hospital, but also raises a son who has ASD. Driven to help families like hers, this delightfully creative and fiercely passionate mom and nurse developed the George's Pass program to pave the way to a smoother surgical experience for children with ASD.



"One thing I love about this program is that I can genuinely tell another mom, 'We have been educated in recognizing your child's needs on the spectrum, and we want to incorporate that knowledge into their care,'"

said Shelly. "We understand your child's special needs and how our hospital environment can affect them."

Named after the popular Valley Children's George the Giraffe mascot, George's Pass provides personal tours and patient education to help prepare children for their procedures. Each child is taken through a "social story" that gently explains coming events and contains pictures to make the experience less frightening, such as the "arm hug" of a blood pressure cuff.

"Caring for a patient with autism spectrum disorder or special needs is an opportunity to improve care and give every child our best," said Shelly.

George's Pass reduces a child's exposure to bright lights and beeping monitors, permits parents' presence at induction of anesthesia and ensures patients awaken post-op in a quiet, darkened room with their parents at bedside.

George's Pass utilizes kid-friendly technology. Children engage in hands-on activities with iPads that entertain and distract. Soon, virtual reality goggles will divert eyes from intravenous needles, and projections screens on walls or ceilings will limit (or eliminate) the need for sedation.

As awareness of George's Pass increased, Shelly grew convinced the program could improve the hospital experience for any child who needs a structured environment. Her efforts to roll out the iDrive program were fueled by her passion to expand the program's benefits beyond patients with special needs.

"Dr. Tamura and I saw a YouTube video of a hospital using remote-controlled cars to take children back to surgery," said Shelly, referring to Valley Children's Pediatric Surgeon Dr. Douglas Tamura. "We wanted it for our patients and were able to bring it to Valley Children's through George's Pass and support from other donors. Now we use iDrive for anyone who qualifies."

Available primarily in Day Surgery, iDrive puts patients in the driver's seat. Remote-controlled by staff, the cars shuttle children into surgery, replacing the need for gurneys. Children think they are driving the cars themselves.



"With iDrive, there are a lot less tears and a lot more smiles during separation," said Shelly. "Watching their child going off to the OR on a gurney is stressful for parents, but when their child drives, parents are more excited about getting a picture and are less anxious watching them go."

Proven effective for children who have neurological or other developmental disorders, the program also benefits those who suffer from post-traumatic stress disorder or have a high level of anxiety from numerous hospitalizations.

"Being part of George's Pass is initiated once a patient is identified as having ASD or special needs," said Shelly.



"Through physician orders, preoperative medical history interviews and staff awareness, we implement the George's Pass program to those in need."

Magnet® appraisers were especially impressed with George's Pass, calling it new and novel in healthcare and worth replicating.

"I was touched when one appraiser said to me, 'I have seen hospitals try to do this but not to this degree,'" said Shelly. "One person can have an idea, but it took our whole team to carry it out. Everything George's Pass is for these families is exactly what I want for my son, and all these resources are in place now without me having to advocate for it."

Initiated through a grassroots effort, George's Pass enjoys strong support from hospital leadership, who would like to see this innovative program expand to all Valley Children's Healthcare sites.

"Through education, our staff has become confident in caring for kids with ASD and special needs," said Shelly. "Staff have a better understanding and create a less stressful hospital experience for kids like mine. I'm proud to say that we have become the place that families trust. We've got this!"



Valley Children's Healthcare is pleased to offer George's Pass to families who need a little extra structure. We acknowledge the multidisciplinary team working to make this program available throughout our network, and we commend Shelly for rolling out an idea that has become a Magnet® Exemplar in Innovation.

Research, Publications & Presentations

Research

HSC923 – Common Components of Current Nursing Professional Practice Models in the Hospital Setting in the United States of America (Exempt) – PI – Denise Vermeltfoort, MSN, RN, NE-BC; Sub-Investigators Margarita Dragomanovich, BSN, RN, NE-BC; Keitha Mountcastle, NNP, EdD, RN, CNS

HSC939 – Pediatric Early Warning System – PI – Mary-Ann Robson, BSN, RN, CCRN; Sub-Investigators Carole Cooper, MHA, BSN, RN, CNS, CPN; Lori Medicus, MN, RN, CNS, CPNP; Mary Jo Quintero, RN, CCRN, CPN, MICN

HSC963 – Development and testing of an instrument to measure Nursing Perception of Components of Professional Practice – PI – Denise Vermeltfoort, MSN, RN, NE-BC; Sub-investigator Margarita Dragomanovich, BSN, RN, NE-BC

HSC973 – HEADS UP Program Questionnaire – PI – Mary Jo Quintero, RN, CCRN, CPN, MICN; Sub-Investigators: Carole Cooper, MHA, BSN, RN, CNS, CPN; Mary-Ann Robson, BSN, RN, CCRN; Lori Medicus, MN, RN, CNS, CPNP

HSC1091 – Use of High-Fidelity Simulation in an Interdisciplinary Preceptor Program (Exempt) – PI – Candice Biberston, MSN, RN, CPN

HSC1111 – A Retrospective Study Comparing Bowel Regimen versus Anticholinergic Therapy in Resolving Daytime Incontinence and Lower Urinary Tract Dysfunction – PI – Tracy Chin, MSN, DNPc, CPNP

HSC1138 – The Electronic Medical Record from the Nurse Perspective (Exempt) – PI – Candice Biberston, MSN, RN, CPN

HSC1171 – Retrospective Case Review Pre-Post PICU Patient Centered Sedation Guideline – PI – Carole Cooper, MHA, MSN, RN, ACCNS-P; Sub-Investigators Lori Medicus, MN, RN, CPNP; Stacie Licon, MSN, RN, CNS, ACCNS-P, CPN; Sheena Keding, MSN, RN, CNS, ACCNS-P

HSC2015 – A Pilot Study of a Child's Perspective of Living with a Home Ventilator – PI – Mary Hunsader, RN, MSN, CNS, AE-C

HSC2030 – The Impact of Concurrent Care for Medically Fragile Children – PI – Sean Hunt, MSN, RN, PNP, CPN

HSC2045 – Assessing Students' and Healthcare Professionals' Interprofessional Care Competency Learning from an Inter-agency Collaborative-sponsored Interprofessional Educational Workshop using the IPEC Questionnaire – PI – Patricia Lindsey, MSN, RN, CNS, CPN

HSC2119 - Central Line Maintenance Bundle with Contemporary Simulation Based Education – PI – Aurelia Rae Ayala, RN, CCRN; Sub-investigators – Tara Lemoine, MD; Lorene Campbell, RN; Carole Cooper, MHA, MSN, RN, CNS, ACCNS-P; Heather Tripp, BSN, RN; Kimberly Bilskey, MSN, BSN, RN; PICU

HSC2160 - Nurses' Perception of Discharging the Medically Complex Pediatric Patient – PI – Stacie Licon, MSN, RN, CNS, ACCNS-P, CPN

HSC2182 - Pediatric Patients with Diabetes Mellitus - Transition to Adult Care – PI – Sara Jennings, MSN, FNP-C, CPN, PHN

HSC2059 – Development in Children with Intrauterine Drug Exposure – PI – Jennifer Nelson, MSN, RN, PHN, CPNP

HSC2154 – Evaluation of the ACES (Assessment of Clinical Expertise in Simulation) Tool Using Simulation for Experienced and Inexperienced Nurses in the Neonatal Intensive Care Unit (NICU) – PI – Kathy Chamberlain, CNNP, MSNed

HSC2142 - Early Intervention Services: Education for Parents of High-Risk Infants Admitted to the Neonatal Intensive Care Unit (NICU) – PI – Ronny Potts, BSN RN

Publications

Bilskey, Kimberly, MSN, RN

Bilskey, K & Catron, L. (2018). Chapter 43: SIMCamp: Trauma Simulation, Rapid Cycle Deliberate Practice Team Training, in S.H. Campbell & K. Daley (eds) Simulation Scenarios for Nursing Educators: Making it REAL, Third Edition. Springer Publishing Company, Inc.

Lindsey, Patricia, MSN, RN, CPN

Limon, J., Lindsey, P., Roberts, S. (2018). Assessing students' and health professionals' competency learning from interprofessional education collaborative workshops. *Journal of Interprofessional Care*, 33 (1), 38-46.

Sayaseng, Kammi, MSN, CNP, PNP-BC

Sayaseng, K. & Vernon, P. (2018). Pathophysiology and Management of Mild to Moderate Pediatric Atopic Dermatitis. *Journal of Pediatric Health Care* (2), S13-S14.

Presentations (Posters and Podium)

Anderman, Vandy, ADN, BSP, RN

Podium Presentation

"Food Allergies in School Children", California School Nurses Organization Fall Conference, Clovis, CA (October 2018)

Badhesha, Prabhjot, MSN, RN, CPNP-PC

Poster Presentation

"Assessment of RSV Risk and Prevention Knowledge of Nursing Students", Central California Research Symposium at California State University, Fresno, Fresno, CA (April 2018)

"Assessment of RSV Risk and Prevention Knowledge of Nursing Students", St. Agnes Research Conference, Fresno, CA (April 2018)

Catron, Leslie, BSN, RN, FAHCEP, CHSE**Podium Presentation**

"Train faculty for simulation: How a stand-alone rural hospital developed a competency-based, interprofessional simulation education model using simulation standards for team development." International Meeting for Simulation in Healthcare, Los Angeles, CA (January, 2018)

Catron, Leslie BSN, RN, FAHCEP, CHSE & Cooper, Laura, MHA, BSRT, RRT-NPS**Podium Presentation**

"Hands-on orientation for embedded learning: Taking didactic knowledge to the simulation experience, a pilot critical care transport team orientation SIMCamp." International Meeting for Simulation in Healthcare, Los Angeles, CA (January, 2018)

Flores, Carlos, ASN, RN**Podium Presentation**

"Baby 911", Fresno Teen Parent Conference, Fresno (February 2018)

"Stupid Teen Tricks", Doctors Medical Center Trauma Conference, Modesto, CA (April 2018)

"Teen Depression and Suicide Prevention", Friday Night Live California Summit, Santa Clara, CA (October 2018)

"Baby 911", Madera Unified Pregnant and Teen Parent Conference, Madera, CA (November 2018)

Garnica, Christian, MSN, RN, CCRN, RNC-NIC, NNP-BC**Poster Presentation**

"Decreasing Unplanned Extubations," Chatham Nursing Conference, Pittsburg, PA (September 2018)

Grosz, Erin, MSN, RN, CPNP-PC**Podium Presentation**

"Asthma in the Pediatric Patient", St. Agnes Research Conference, Fresno, CA (April 2018)

Hunt, Sean, MSN, RN, PNP**Podium Presentation**

"Oil Blending for Pain and Symptom Management," Coalition for Compassionate Care of California Conference, Anaheim, CA (April 2018)

Poster Presentation

"The Impact of Concurrent Care for Medically Fragile Children", Center to Advance Palliative Care National Conference, Phoenix, AZ (November 2017)

"The Impact of Concurrent Care for Medically Fragile Children", Coalition for Compassionate Care of California Conference, Anaheim, CA (April 2018)

Lemoine, T.J., Catron, L., Webber, T., Seigel, S., Poliquin, C., Rodriquez, E., Hernandez, D.A., Geller, E.G., & Kallas, H.J.**Poster Presentation**

"Using interprofessional simulation training for building a new pediatric ECLS center." International Meeting for Simulation in Healthcare, Los Angeles, CA (January, 2018)

Lingenfelter, Deborah, ASN, RN, RNC-NIC

Poster Presentation

"Valley Children's Hospital Services", First 5 Children's Summit, Merced County, CA (April 2018)

Loo, Kamela, MSN, RN, NNP-BC, FNP-BC

Podium Presentation

"Not Every High Count Means Infection", Central California Association of Neonatal Nurses, Valley Children's Hospital, Madera, CA (September 2018)

Martinez, Ruthrolen, BSN, RN, RN-BC

Poster Presentation

"Bleeding Disorders Education Day for School Nurses", World Federation of Hemophilia World Congress, Glasgow, Scotland (May 2018)

Mauk-Fisher, Amy, ASN, RN

Podium Presentation

"Shaken Baby Demonstration and Education", Chowchilla Enterprise Secondary School, Chowchilla, CA (April 2017)

Mendoza, Rosalina, ASN, RN, IBCLC, LCCE, RNC-NIC

Poster Presentation

"Valley Children's Hospital Services", First 5 Children's Summit, Merced, CA (April 2018)

Nasrudin, Freshta, ASN, RN-BC

Podium Presentation

"Nursing Intervention on Hemophilia Patients", Bleeding Disorders Patient and Family Education Day, Valley Children's Hospital, Madera, CA (April 2018)

Nelson, Jennifer, MSN, RN, CPNP-BC

Podium Presentation

"Development in Children with Intrauterine Drug Exposure", St. Agnes Research Conference, Fresno, CA (April 2018)

"Development in Children with Intrauterine Drug Exposure", Fresno State Research Conference, Fresno, CA (April 2018)

Norgaard, Jennifer, MSN, RN, RNC-NIC, ACCNS-P

Podium Presentation

"Therapeutic Hypothermia and Hypoxic Ischemic Encephalopathy: Considerations of Care", Mid State Perinatal Conference, Modesto, CA (May 2018)

Whitaker, Veronica, ASN, RN, CCRN

Poster Presentation

"Suicide Awareness and Prevention", Best Practice Summit Conference for the Central Valley Chapter of American Association of Colleges of Nursing, Fish Camp, CA (September 2018)



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