



**Valley
Children's**
HEALTHCARE

Nursing Excellence

2018

ANNUAL REPORT



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Valley Children's Healthcare Nursing Services An Integrated Approach

Beverly Hayden-Pugh MOB, BSN, RN

Senior Vice President Clinical Integration, Patient Experience and Chief Nursing Officer

Recently, I had the pleasure of hosting a CNO forum with Valley Children's Healthcare RNs. Designed to support and enhance the professional practice of nursing, these monthly forums facilitate discussion around the following topics:

- How do you support/define the professional practice of nursing at Valley Children's Healthcare?
- What are the opportunities to enhance your practice?
- What are barriers to your practice?
- How can we further enhance our Magnet® journey?

I am always impressed and humbled by the discussions that take place as we focus on our professional practice and how we can continue to support growth as a profession.

In the most recent forum, we discussed innovative ways to support and mentor colleagues in learning and improving the care we offer to our kids and their families. We brainstormed how to ensure our nursing services offer consistent expertise and level of care to kids accessing primary care in Bakersfield, specialty care in Modesto, or intensive care at Valley Children's Hospital. We were actually focused on how to integrate our practice across our healthcare system with the outcome of providing the best care for kids and the best professional environment for RN practice.

"In.te.grat.ed: coordinating separate elements so as to provide a harmonious and interrelated whole."¹

As a healthcare system, we provide nursing care over a 45,000-square-mile geography. With rapid growth over the past 18 months and planned future growth over the next decade, we need to ensure we continue to provide evidenced-based, expert nursing care that is coordinated, seamless and family-centered. I feel fortunate to have a proven template to support that goal, one that we have used for 14 years to advance nursing practice at Valley Children's Healthcare – Magnet®. Magnet® model components and requirements for evidence of the impact of nursing practice have helped us create the culture and structures that ensure our nursing practice is the best.

This Nursing Excellence Annual Report highlights

¹WordReference Random House Unabridged Dictionary of American English © 2018

examples of Magnet® components that support the goal of integrating, sustaining and improving nursing practice across our system.

Transformational Leadership

Recognizing the impact both formal and informal leaders make in inspiring and advancing practice, you will see the accomplishments of our nursing family through articles about integrating advanced practice within our system and positioning high school students for future success.

Structural Empowerment and Empirical Outcomes

Nurses throughout Valley Children's Healthcare have continued to achieve national certification and ongoing academic education. The commitment to excellence is reflected in outcomes achieved in increasing the number of nationally certified nurses and RNs with a bachelor's degree or higher. Through partnerships with the community, enhancements to the care of our children between the school and healthcare setting have improved. We celebrate recognition in U.S. News & World Report, the educational school nurse community, and individuals and teams that contribute to nursing excellence at Valley Children's Healthcare.

Exemplary Professional Practice

Built upon the foundation of our Nursing Professional Practice Model will be a review of the model and how it translates into real-life action around reducing harm to kids from central-line associated blood stream infections.

New Knowledge, Improvements & Innovations

Demonstrating the role of the interprofessional team in systems improvement will be a progress report on our strategic initiative of patient throughput. Nurses have impacted our community at large through nursing and interprofessional research, and podium and poster presentations that have shared knowledge, improvements and innovations.

Thank you for the impact you make on the kids and families we serve, as well as being Magnet® role models for the professional practice of nursing. I am honored to serve beside this amazing team of nurses.

Beverly

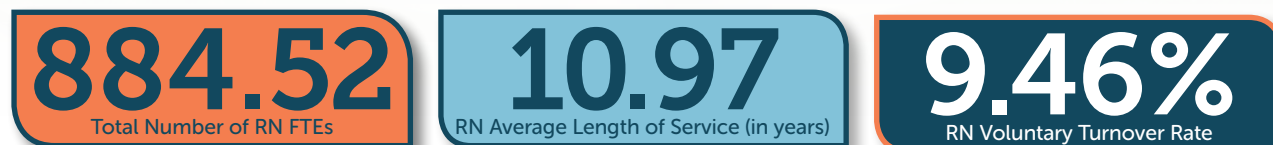


Transformational Leadership

Valley Children's Healthcare Profile

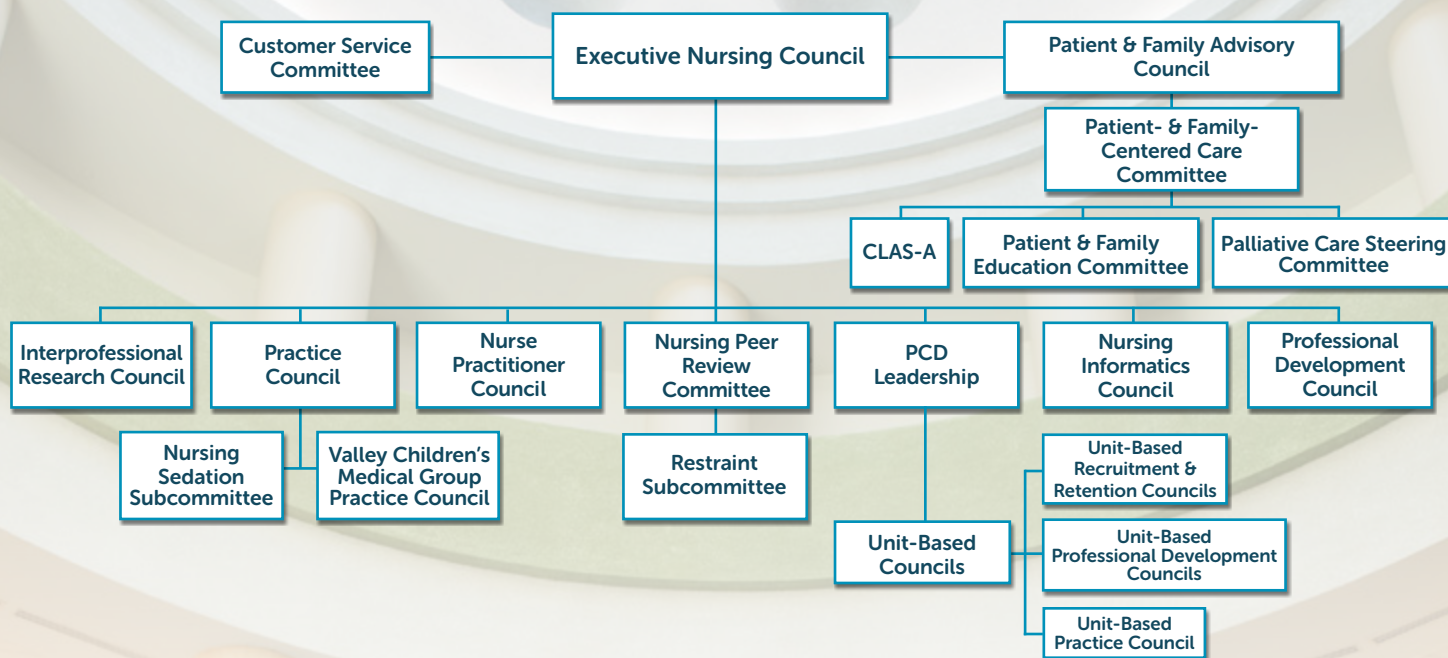


Valley Children's Nursing Profile



Fiscal Year 2017

Nursing Governance Structure



2018 Governance

Executive Nursing Council

Chair: Rachel Hernandez, BSN, RN, CPON
 Facilitator: Beverly Hayden-Pugh, MOB, BSN, BHSc, RN
 Chair Elect: Denise Russo, BSN, RN

Customer Service Committee

Co-Chairs: Margi Dragomanovich, BSN, RN and Kim Booze, BSN, RN

Patient & Family Advisory Council

Co-Chairs: Mary-Ann Robson, MN, RN and Lydia Howard

Patient- & Family-Centered Care Committee

Chair: Rachel Carrillo
 Chair Elect: Danielle Barry

CLAS-A

Co-Chairs: Deonna McPeters, MSW and Maria "Liz" Mejia

Patient & Family Education Committee

Chair: Marlynn Santiago, BSN, RN

Palliative Care Steering Committee

Co-Chairs: Margi Dragomanovich, BSN, RN and Stephanie Fisher, MSN, CPNP

Interprofessional Research Council

Co-Chairs: Angela Veesenmeyer, MD, MPH and Sheena Keding, MSN, RN, CNS, ACCNS-P, CPHQ

Practice Council

Chair: Katie Chan-Boeckh, MBA, BSN, RN (Oct 2017-Feb 2018) and Emily Hunt, MSN, CNS, ACCNS-P, CCRN-N (March 2018-Present)

Nurse Practitioner Council

Chair: Terea Giannetta, DNP, RN, CPNP, FAANP

Nursing Peer Review Committee

Co-Chairs: Jane Henning, A.S.N., RN and Natasha Reilly, BSN, RN

PCD Leadership

Chair: Daniel Davis, MHA, BSN, RN

Nursing Informatics Council

Chair: Allen Henning BSN, RN, CPN

Professional Development Council

Chair: Liz Solis, MAOM, BSN, RN

Nursing Sedation Subcommittee

Chair: Kimberly Sutters, PhD, RN, VA-BC

Valley Children's Medical Group Practice Council

Co-Chairs: Bruce Freeman, RN and Gina Sutton RN, BSN, CPN

Restraint Subcommittee

Chair: Carla Stanley, MBA-HC, BSN, RN, FACHE, HCM-BC, NEA-BC, NE-BC

Valley Children's Healthcare

Nursing Governance

Integrating Advance Practice

Successfully implementing an effective, comprehensive nursing governance structure at one of the country's largest children's hospitals requires dedication and commitment across a broad spectrum of nursing practice from bedside to administration. This accomplishment (among others) helped Valley Children's Hospital become the first children's hospital in the Western United States to gain recognition from the American Nurses Credentialing Center under the Magnet Recognition Program®. Since first receiving Magnet® status in 2004 for the highest levels of nursing excellence, Valley Children's Hospital has maintained this elite distinction. This honor has not been held by resting on past achievements, but rather by constantly pursuing excellence and embracing change.

This past year, our nursing governance structure expanded to integrate nursing practice across the continuum of care provided by our network. The Executive Nursing Council approved the new configuration as Valley Children's Healthcare Nursing Governance Structure. Formerly known as Valley Children's Hospital Nursing Governance Structure, the expansion includes nursing practice at our primary and specialty care centers in addition to our home care, acute care, and intensive care nurses. The new

structure encourages greater participation among nurse practitioners, regardless of whether they work onsite or at one of our ever-increasing number of offsite locations.

Nurse Practitioner Council membership evolves within our network

Terea Giannetta, DNP, CPNP, FAANP, Chief Nurse Practitioner at Valley Children's, serves as Chair of the Nurse Practitioner Council, which has seen the makeup of its membership change under the new nursing governance structure.

"We've always had a minimal number of nurse practitioners involved in governance," she said. "We tend to keep very busy with patient care and may think there isn't time to attend council meetings."

In an effort to encourage greater participation and support collaboration across the continuum, Valley Children's held a dinner event for our nurse practitioners last December. "We had a very nice turnout," said Terea. "Several of the primary care nurse practitioners came. It provided a good forum for an introduction to how we're expanding and where we now have primary care sites."



"Expanding our governance structure and the Nurse Practitioner Council within the formation of our network increases the ability of our nurse practitioners to collaborate on both their professional practice and shared pediatric population," said Beverly Hayden-Pugh, MOB, BSN, RN, Senior Vice President Clinical Integration, Patient Experience and Chief Nursing Officer. "It was wonderful to see collaboration in action at the December dinner meeting. Many of the participants were meeting face to face for the first time as they shared their specialized roles in supporting pediatric care."

Onboarding materials for nurse practitioners joining Valley Children's primary care centers include detailed information about the network's governance structure and how they can participate – even while working offsite. "We integrated our primary care nurse practitioners into the Nurse Practitioner Council, which meets monthly," said Terea. "We have a nurse practitioner in Bakersfield who has phoned in twice to participate in the one-hour Council meeting." Increased participation in nursing governance helps with communicating global standardized procedures across the continuum.



"Many nurse practitioners at our primary care centers had been working in the individual practices that have now become part of the network," said Terea. "Some processes have changed for them, but we provided them with evidence-based standardized procedures and protocols so they could immediately get into practice."

Nursing Governance involvement extends beyond our network

Valley Children's Healthcare Nurse Practitioners are engaged in nursing governance within the network as well as across the country. "Meeting with nursing leaders from different areas helps give perspective outside the

immediate home of advance practice," said Terea. "When you're looking at something from multiple perspectives, you're going to develop processes and procedures that are good for everybody."



Terea serves on the National Association of Pediatric Nurse Practitioners (NAPNAP) board and is involved in research that helps develop standardized procedures with evidence-based support. "Participating on a national board gives you a perspective that's so much broader than what's going on in California," she said. "Involvement helps Valley Children's nurses be privy to the latest research. We all want to do evidence-based practice because it leads to the best patient outcomes."

"Under Terea's leadership and guidance, our nurse practitioners provide evidence-based care that is critical for our pediatric population," said Beverly. "With the Council's expansion to include primary care nurse practitioners, the families we serve are benefiting from that expertise across the continuum of care. Linking our nurse practitioners through the governance structure ensures consistency in expert practice for practitioners throughout our region, and ensures that they are practicing at the top of their scope of practice in supporting pediatric care."

Valley Children's welcomes nurse practitioners, many with advanced research experience, to become involved in nursing governance and help in developing standardized procedures and protocols that benefit our patients and promote patient satisfaction.

Valley Children's Healthcare

Nursing and the Community

Supporting Duncan Students



Located in the inner city of Fresno, California, Duncan Polytechnical High School is a comprehensive magnet school that attracts students in grades 9-12 from throughout Fresno Unified School District to its vocational training programs. In the morning, full-time Duncan students take general education classes from teachers who relate the instruction to career pathways. In the afternoon, students from other high schools in the district join them in attending vocational training classes.



Full-time Duncan students have one of the highest poverty rates in the school district. Most of them come from ethnically and linguistically diverse families with incomes in the low to lower middle socioeconomic levels. However, due to its focus on preparing students for employment, Duncan has the district's highest graduation rate and one of the highest percentages of students entering college (more than 80 percent).

Medical academy prepares future nurses

Duncan's Medical Academy of Science and Health offers a nursing pathway for students interested in pursuing careers in registered nursing, licensed

vocational nursing, and other patient care fields. Tana Leon-Toscano RN, BSN, CPN, Day Surgery Coordinator at Valley Children's Hospital, sits on the advisory board for the Certified Nursing Assistant (CNA) program at Duncan. In this role, she provides feedback on health industry trends and competencies that help students prepare for testing to receive California State Nursing Assistant Certification.

"I used to be an instructor at Duncan Polytech, and it was difficult to get mentors to come out and talk to the kids," said Tana. "I promised myself that if I ever left, I would go back as a mentor."

Tana resigned from teaching in 2006 and began working at Valley Children's in 2007. She immediately began recruiting nurses to dedicate a day to conducting mock interviews with students and providing Q&A sessions on the nursing profession.

"I grew up in West Fresno, and identify with these students," said Tana. "My parents were big into education and I was told, 'You need to go to college.' I am one of the first kids in my family to go, and I had to learn the ins and outs after I got there."

Nurses from Valley Children's share their individual experiences while volunteering as mentors to Duncan students, who learn there is no one prescribed path to entering the nursing profession.

Nurses provide real-world experiences

"About five years into it, I realized the students needed more than just one day doing mock interviews," said Tana. "So I would go out earlier in the school year and let students know what the different jobs in healthcare were. I would tell them what they needed to be a nurse, from getting an associate's degree to a Bachelor of Science in Nursing and more. I talked to them about what types of skills they should have and about making an investment in themselves."

Later in the year, Tana returned with a team of Valley Children's nurses to conduct the mock interviews and provide feedback on everything from professional appearance and body language to developing critical thinking and other employability skills. "Together we interviewed about 90 students a day," she said.

Students are not the only ones who benefit from this community partnership. "When we nurses go and talk to these kids, we take away something, too," said Tana. "One time we were giving a student constructive criticism, and she broke into tears. At first we were concerned we offended her, but she said that wasn't it at all. She said until that day, no one had ever told her she could accomplish her goals."

Valley Children's hosts visitation

This year, Valley Children's further increased the scope of our partnership with Duncan by hosting the Duncan Polytechnical MASH Visitation to Valley Children's Hospital for senior students preparing to test for CNA Certification. Seniors who pass this test are able to receive certification as a nursing assistant while still in high school. Many enter the Future Nurses program, which guarantees them enrollment at Fresno City College.



Tana reached out to former Duncan students now employed at Valley Children's to recruit volunteers for the event held April 20. Maria Provencio, MA, CCC-SLP, a speech-language pathologist, responded, "I would love to participate in this day and give back to my alma mater." Maria recounted the benefits of her four years at Duncan Polytech. "The experience that I had at that time in my life has shaped me into the professional that I am today," she said. "Duncan provided me with so much opportunity. I was able to graduate as a certified phlebotomist who went on for an AA then a Bachelor of Arts Degree in Communicative Sciences and Deaf Studies with an emphasis in speech pathology and a minor in Chicano Latino Studies. I then went on for a Master's Degree in Communicative Sciences and Deaf Studies with an emphasis in speech pathology." Maria has worked at Valley Children's for 17 years.

Duncan students attending the event were able to learn from college graduates like Tana and Maria that they, too, can one day be employed in a rewarding health profession.



Structural Empowerment

Professional Development

Nationally certified nurses (based on eligibility)

38.40%

Fiscal Year 2017

RNs with bachelor's degree or higher in nursing

64.23%

RNs Enrolled in an Academic Program

9.82%

Nursing Scholarships Awarded

8

Number of Nationally Certified Nurses



RNs with Bachelor's Degree or Higher in Nursing



Valley Children's Healthcare

Streamlining School Orders

For many years, nurses working in Valley Children's outpatient clinics struggled with the process of sending and receiving school orders, which include all forms that address the medical care of a child during school hours. These orders are especially important for pediatric patients with chronic and/or complex conditions. Without authorization to receive treatment during the school day, these children cannot attend classes.



"Our nurses did the best they could to address the need, but the process was not well defined at all," said Margi Dragomanovich, BSN, RN, Manager, Case Management, Valley Children's. "Several ambulatory clinics were managing school orders, but each had developed their own processes and operated in silos. It was cumbersome and confusing."

The issue was clearly identified during a Lean Process Improvement project in 2015. The Lean strategy at Valley Children's is focused on our relentless pursuit of becoming the best in quality and safety, and increasing engagement by removing waste from processes.

"A group of nurses with a vision to streamline school orders helped make this project a success," said Margi. "Three of the nurses involved were from different clinics, each with a high volume of school orders. Other

members included representation from our health information management department and school nurses who work per diem at Valley Children's in case management. The Director and Manager for Fresno Unified School District school nurses also took part." The scope of the improvement project addressed the entire process of authorizing a child's medical care during the school day, from the moment a clinic received a request from the school or family to when the school received the orders issued by a licensed provider.

"We looked at ways to reduce the time required for processing school orders; we wanted to get them right the first time with nothing slipping through, and make sure the school districts' requirements were being met," said Margi. "We had in-depth discussions with internal and external partners for a general assessment of school order workflow and opportunities for improvement."

Increased communication and collaboration

Fresno County has 18 unified school districts. The largest, Fresno Unified School District, has more than 100 schools. Valley Children's serves school-age children living in several Central California counties. The challenge to coordinate multiple clinics and hundreds of schools was enormous. Valley Children's partnered with Fresno Unified to pinpoint gaps and explore solutions.



"When we started this project, we found 67 different forms were

being used by the schools," said Margi. "We were able to develop a universal form and a few specialized forms. We also went from having to obtain a hard-copy signature from the provider and manually faxing forms, to issuing standardized electronic orders with e-signatures. The partnership we experienced with our IT department was integral to our ability to quickly create and implement the new forms and processes."

Simply directing schools where to send requests for orders and identifying contacts at each school site ahead of time resolved a labor-intensive and frustrating

obstacle. A standardized Valley Children's fax cover sheet was created and provided to schools, and a school district contact list was compiled and distributed to clinic nurses. Another timesaver came with proper interpretation of the Health Insurance Portability and Accountability Act (HIPAA) and timely Release of Information (ROI) to school nurses.



"Many hospitals interpreted HIPAA as restricting our ability to share medical information with school nurses," said Margi. "Waiting for written authorization from families to release information to schools created a huge barrier and decreased the efficiency of the whole process. Our legal department, privacy officer and corporate compliance reviewed the law, and they determined it was acceptable to share a patient's medical needs with the school nurse about issues that would need to be addressed during the school day."

Other process improvements included developing a standard for naming conventions, placement of completed orders within the electronic medical record, and process flow – with education sessions provided to both school and clinic nurses.

"We established a standardized process that met the needs of the schools, and our nurses found ways to improve the process as they worked in the new system," said Margi. "We were able to create school order templates that all are adopting."

By streamlining school orders, Valley Children's nurses are helping our patients gain better access to essential medical care while at school.

VISION: In order to optimize school attendance and safe participation in school activities, Valley Children's Healthcare will provide individualized orders to meet the medical needs of the student. We will accomplish this using a standardized process that is efficient and pro-active and which meets educational and healthcare guidelines.

Team Members

Margi Dragomanovich
 Alissa Villard
 Vandy Anderman
 Gina Clarke
 Nancy Orong
 Denise McEowen
 Patricia Atitya
 Bobbi Shepard
 Joseph Irwin
 Celsa Torres
 Courtney McGhee
 Teresa Deason

Project Goals:

- Optimize school attendance related to missing school orders
- Improve family satisfaction and compliance
- Improve staff satisfaction
- Improve regulatory compliance while reducing complexity
- Improve internal and external coordination and timing of tasks

Project Results:

- 84% reduction in forms (from 67 to 11)
- 82% reduction in lead time (from 2 weeks to 5 days)
- 30% reduction in RN cycle time (from 15 minutes for completing simple forms and 60+ minutes for complex forms to an 11-minute average)

Valley Children's Healthcare

U.S. News & World Report

A Nursing Perspective



To help families find the best healthcare for their child, U.S. News & World Report publishes comprehensive, quality-related information on our nation's pediatric medical centers each year through its Best Children's Hospitals rankings. In their 2017-18 rankings, 82 of the 187 hospitals surveyed ranked among the top 50 in at least one pediatric specialty. For the second consecutive year, Valley Children's Hospital received the honor of this recognition.

This year, Valley Children's was named one of the nation's best in three pediatric specialties:

- **Diabetes & Endocrinology**
- **Gastroenterology & Gastrointestinal Surgery**
- **Orthopaedics**

Objective measures used by U.S. News & World Report to determine scores include efficiency and coordination of care delivery, compliance with best practices, clinical outcomes, patient volume and infection control,

among others. Nursing excellence plays a significant role in achieving the quality standards required to rank in these methodologies among the nation's best.

In an article announcing the 2017-2018 Best Children's Hospitals, U.S. News Health Rankings Editor Avery Comarow said, "The ranked pediatric centers in Best Children's Hospitals provide an extraordinarily high level of care and deserve to be recognized for their commitment. Children with life-threatening illnesses or rare conditions need the state-of-the-art services and expertise these hospitals deliver every day."

Whether implementing best practices to prevent surgical site infections or providing greater access to care through collaboration with mid levels and physicians, our nurses continually strive for excellence in their practice. Whether working one-on-one to ensure understanding in families with a recent diagnosis or conducting research to acquire new knowledge that improves outcomes, our nurses exemplify a strong commitment to patient advocacy and lifelong learning.

Valley Children's acknowledges our nurses for the exemplary work they do every day. Achieving this prestigious recognition would not have been possible without their dedicated efforts to provide the highest levels of care.



Recognition of Excellence

The Valley Children's Healthcare RN of the Year Award is awarded annually to recognize excellence in nursing. Individuals are nominated by staff and physicians. Representatives of the Executive Nursing Council serve as the selection committee, giving careful consideration to each nominee's practice, outcomes, innovation, and contributions to the organization, community and professional practice of nursing.

Award categories include:

- Excellence in Leadership
- Excellence in Education
- Excellence in Clinical Practice
- Innovation in Professional Nursing
- Team Excellence



Recipients of the Friend of Nursing Award demonstrate a significant contribution to or support of nursing. In addition, these individuals collaborate within nursing in the provision of patient care or development of processes to enhance the professional work environment for nursing.





Valley Children's Healthcare

Nurse of the Year 2018

Excellence in Leadership

**Carol Cobb, BSN, RN, CRRN, Charge Nurse,
Rehabilitation**

With her passion for rehabilitation nursing, Carol has been instrumental in helping Valley Children's Pediatric Rehabilitation Center maintain our impressive designation as the only inpatient pediatric rehab center in Northern California to be accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF) – an internationally recognized award for excellence in pediatric rehabilitation. Carol helped prepare multiple department leads for their roles in the CARF survey process.

Through encouragement, support and collaboration, Carol creates an environment for her team to flourish. She knows the benefits of succession planning, and has initiated the process of mentoring a peer to take the lead in preparing for their next Rehab reaccreditation. As a Charge Nurse, she provides ongoing opportunities for staff to step outside their comfort zones and grow their nursing skills. A Certified Rehab Nurse since 1990, Carol encourages her team to become certified to further their professional growth and enhance quality of care.

Using her knowledge from over 30 years of nursing, Carol serves as a presenter in the Rehab Core curriculum. She seeks opportunities to attend conferences on traumatic brain and spinal cord Injuries, bringing back information to share with staff and peers.

Keenly aware that interprofessional care is foundational for Rehab patients, Carol regards collaborating with other disciplines as learning opportunities. She respectfully takes on the role of student or teacher to fit each encounter. Carol worked interprofessionally on a performance improvement project with Occupational Therapy for traumatic brain injury patients. The results demonstrated significant improvement in toileting and hygiene tasks for these patients. The outcomes will be reported as part of the CARF reaccreditation program next year.

As a member of the Environment of Care Committee, Carol has been actively involved in developing a safe process for evacuating patients. These efforts have

been piloted in Rehab and have demonstrated positive results during biannual drills.

Due to her successful role implementing changes to promote patient safety, Carol was asked to join the Fall Prevention taskforce, which was charged with the implementation of the evidence-based Fall Prevention bundle from Solutions for Patient Safety (SPS) on Rehab. Carol took the opportunity to mentor a fellow taskforce member to become the project champion. She then worked with her champion to develop a plan to continue fall prevention efforts once the taskforce completed the project. The taskforce was able to experience how research can affect practice and become part of daily patient care. They developed a project charter, established roles and responsibilities, and created education for the staff.

In support of the Rehab community, Carol and her team plan the annual Rehab Family Picnic for previous patients. With her team, Carol identified the event's potential for an educational component, and pursued support from vendors and community resources. Now the picnic not only serves as a fun connection for patients and families, but also an opportunity to receive valuable instruction.

Carol serves as a nurse on the annual camping trip taken by the youth group at her church, where she uses her influence to encourage youth group members to volunteer at the Hospital. This activity provides opportunities for the youth to see potential for their futures. Some have informed Carol they are working toward a career in nursing.

Carol's strength as a leader empowers nurses in her charge to challenge themselves, knowing she will be there for them.

We congratulate Carol for being the Valley Children's Nurse of the Year 2018 – Excellence in Leadership.



Valley Children's Healthcare

Nurse of the Year 2018

Excellence in Education

Rachel Caro, BSN, RN, CCRN, CWOCN, Wound and Ostomy Specialist, Patient Care Support

Rachel engages in the full scope of her role as a Wound and Ostomy Specialist: clinical practice, evidence-based practice, quality initiative projects, leadership, and education. She applies her vast knowledge to carefully assess each patient's unique clinical issues and recommend an evidenced-based plan of care.

With tireless drive, Rachel teaches her patients and their families essential wound and ostomy management skills, spending hours consulting and educating them to address their individual concerns. This is where Rachel really shines. And she doesn't stop there. She collaborates with bedside staff and physicians, educating them on how to best manage each patient's wound or ostomy. By partnering with staff and family members, she helps patients and families become comfortable with managing their own care and return home sooner.

Seen as the "specialist within the specialty," Rachel has presented numerous educational offerings on pressure injury prevention for acute and critical care nursing staff, respiratory therapists, and perioperative services. Mid-level practitioners and physicians regularly seek out Rachel for her expertise. In addition, wound specialists from other institutions approach her for guidance in managing their pediatric patients. Students and interns interested in this field rely on Rachel's knowledge and abilities as a preceptor.

Rachel's scope of practice is multidimensional. She serves on several teams at Valley Children's to evaluate practices and patient care products and their effects on skin integrity. Her advocacy led to the acquisition of specialty mattresses, products and equipment for patient positioning. She was instrumental in working with a vendor to develop a Bed Decision Tree, which assists healthcare providers in choosing the appropriate bed for patients with skin issues.

Rachel's enthusiastic efforts educating healthcare providers on pressure injury prevention has heightened awareness and accountability to prevent hospital-acquired pressure injuries (HAPI) throughout the

organization. She has made a measurable impact in the prevention of medical device-related pressure injuries.

Rachel is a pioneer in her role at Valley Children's. Every referral she receives presents opportunities to identify and support quality patient care through review and implementation of best practice. She researches literature and consults experts to provide the best plan of care for her patients. Actively engaged in changing the mindset on traditional wound care, Rachel empowers nurses to advocate for their patients' needs. She strongly believes each healthcare provider brings individual experiences to collectively provide better outcomes for each patient.

Rachel's passion for nursing and education extends from the hospital setting into her community. She helps fundraise for the organization's Adaptive Sports Program, which provides various sports activities for children with disabilities. She participates in providing religious education among youth in her local congregation of bible students, and advocates for healthy lifestyles by educating peers in her in long-distance running community.

Rachel has presented nationally via webinar for the Solutions for Patient Safety (SPS) on "Best Practice with Respiratory Devices." She is a member of the American Association of Critical Care Nurses (AACN), the Pacific Coast Region of Wound, Ostomy, and Continence Nursing, and also Wound, Ostomy, Continence Nursing (WOCN). From 2011 to 2013, she served as an ambassador for American Association of Critical Care.

Rachel embodies professionalism and positive role modeling in the practice of nursing. She promotes interprofessional collaboration, with her influence reaching bedside and boardroom. Her passion for education is the embodiment of a change agent making a difference in nursing.

We congratulate Rachel for being the Valley Children's Nurse of the Year 2018 – Excellence in Education.



Valley Children's Healthcare

Nurse of the Year 2018

Excellence in Clinical Practice

Kristi Crumpton, BSN, RN, VA-BC, Vascular Access Specialist, Patient Care Support

Board-certified in vascular access, Kristi has made a significant contribution to advancing the art and science of vascular access at Valley Children's Hospital. Her influence is felt at the bedside in day-to-day practice, as well as through her involvement in nursing governance and performance improvement projects.

During her short three-year tenure at Valley Children's Hospital, Kristi has placed over 500 peripherally inserted central catheters (PICCs) with a 97 percent success rate. She has also placed nearly 2,000 ultrasound-guided peripheral IVs with a 99 percent success rate. The majority have been with difficult-access patients. Her efforts have increased patient, family, staff and provider satisfaction.

Kristi serves on the Central Line-Associated Bloodstream Infection (CLABSI) Subcommittee, and has collaborated on several initiatives to reduce catheter-related bloodstream infections and other catheter-related complications. She is a member of the Infusion Nurse's Society, which sets the infusion nursing standards of practice. Kristi is also a member of the Association for Vascular Access (AVA), as well as founding member, past president of four years, and current president advisor on the board of the local Central Valley Vascular Access Network (CVAN).

A role model for frontline adoption and implementation of best practices and product innovations, Kristi keeps a finger on the pulse of various social networking websites to stay abreast of the latest discussion threads in the field of vascular access to consider their potential application in pediatrics.

Kristi demonstrates the behaviors, actions, and values she desires to see in others, inspiring her teammates to do the same. She supports staff in skill development with central-line care, offering practical advice while coaching them to develop competence and confidence. She regularly recognizes peers for their great work, and also addresses opportunities for improving their skills. Great coaches build strong teams, and Kristi creates an environment that fosters

trust, mutual respect, and collegial relationships with all members of the healthcare team.

Among Kristi's many strengths is her commitment to training other vascular access nurses in the use of ultrasound guidance, including two nurses on the Neonatal Intensive Care Unit (NICU) Line Team – a truly cutting-edge practice. Despite recommendations for the use of ultrasound guidance as a standard of care in adults and pediatrics, only 2 percent of respondents in a 2017 national survey of neonatal PICC practices identified its use for PICC placement in NICUs.

Kristi's collaborative approach has promoted recognition of the Vascular Access Specialist as an integral member of the healthcare team. She has earned a high level of credibility and respect, which has enabled her to successfully partner with physicians and staff to achieve the best outcomes for patients.

Kristi's influence is felt every day through her dedication to best practice at the bedside, where she considers the patient's current and future access needs and advocates for the right device at the right time. Her quiet, unassuming manner and humility are balanced with self-confidence to assert herself when needed.

Vascular access is not just a procedure anymore; it's a professional practice that has tremendous value to the healthcare system when done right. Kristi does it right! With Kristi, it's not just about procedural success in the moment. Her conviction, passion and heartfelt commitment to promoting excellence in the field of vascular access have helped shape practice and enhance outcomes.

We congratulate Kristi for being the Valley Children's Nurse of the Year 2018 – Excellence in Clinical Practice.



Valley Children's Healthcare

Nurse of the Year 2018

Innovation in Professional Nursing

**Vandy Anderman, ADN, BSP, RN Case Manager,
Case Management**

Vandy has been caring for patients at Valley Children's Hospital for over 30 years. As a single mom who raised a child with special needs, she understands the challenges of caring for a medically fragile child. Her enjoyment with equipping parents to care for their child after discharge led her to pursue a position as Case Manager. For the past 20 years, Vandy has served patients and families visiting the Charlie Mitchell Clinic, a rural health clinic onsite at Valley Children's Hospital that provides primary care to medically complex and fragile kids.

Vandy loves being a nurse and truly enjoys working with children with special needs. She educates families regarding their child's health condition to empower them to provide better care. She listens to parents and offers emotional support, encouraging them to advocate for their child.

Vandy believes making even small changes can greatly improve the quality of life for medically complex and fragile children. She also believes the two biggest influences in a child's life are family and school. When children with medical needs attend school, physicians must provide orders to the school to deliver healthcare during school hours. Vandy recognized and communicated challenges related to creating and sending school orders, including lack of workflow standardization, manual faxing processes, and handwritten orders that were difficult to read or incomplete.

Vandy has seen the medical complexity of children increase dramatically over the years. As the complexity has increased, school orders have become more complex as well. For some time, she had envisioned an innovative approach to processing school orders through creation of computerized standard order sets that could be individualized for each child.

Vandy participated in a performance improvement project to streamline the school order process, and quickly assumed an informal leadership role. She helped identify barriers and develop processes to

address them. Her enthusiastic and creative approach contributed to an enhanced school order process that improved efficiency and stakeholder satisfaction. She provided leadership in the creation of an order set that was later named "Universal School Orders." These orders are completed on a computer and then forwarded electronically to the child's physician for review. The physician makes any needed changes, approves the orders, and electronically faxes the order to the child's school.

Vandy demonstrates excellence when collaborating with school nurses, parents and other agencies to ensure optimal coordination of school orders for medically complex children attending school. Her exemplary work positioned her as a key resource for other Valley Children's clinic nurses during and after implementation of the new process.

Vandy continues to innovate and support the new school order process. She recommends and implements improvements, and remains an informal leader who serves as an encourager and mentor to nurses in other clinics using the order sets.

A valued support to school nurses and school health, Vandy was recognized by the Central Valley Section of the California School Nurses Organization (CSNO) as the 2017-2018 Partner in Education. She was also recognized as the 2017-18 Partner in Education for the State of California.

We congratulate Vandy for being the Valley Children's Nurse of the Year 2018 – Excellence in Innovation in Professional Nursing.

Valley Children's Healthcare

Team Excellence 2018

Central Staffing, House Resource Pool



The Central Staffing, House Resource Pool embodies the epitome of Valley Children's Healthcare's motto: We bring our best knowing children are counting on us.

On many occasions, staffing one or more units presents a challenge. Valley Children's depends on the highly qualified registered nurses, pediatric care technicians and health unit coordinators in the House Resource Pool to float to these units and help meet patient care and support needs. Central Staffing nurses never know where they will be needed until they reach the Patient Throughput Manager's office and see their name listed under the unit they have been assigned to. Yet, they come to work every day ready to help their colleagues and care for the children and families they serve.

At times, nurses in the House Resource Pool must transition mid shift to compensate for a staffing challenge that arises as the result of a change in patient acuities, an unexpected patient surge, or an employee emergency or illness. They willingly relocate – often to another unit – with a friendly face and the determination of getting the job done. Their flexibility helps meet the needs of our patient population regardless of the location. They are a group who consistently pick up additional shifts during the winter in order to support patient care needs. House Resource nurses thrive on the flexibility and variety floating provides.

Several nurses in the House Resource Pool are members of organizational committees and participate in activities within various units at the Hospital. As a team, House Resource Pool staff host dinners throughout the year at the Ronald McDonald House for families staying there during their child's hospital stay. With the social workers' assistance, they identify one family during the holidays and shower them with Christmas gifts. Last year, as a result of extensive fundraising and donations, the House Resource Pool sponsored two families, with every family member of both households receiving gifts to brighten the holidays.

The Central Staffing, House Resource Pool has grown from a small unit to a full house of 42 registered nurses and 29 unlicensed assistive personnel (UAP). Overseen and managed by two amazing Charge Nurses, this group of hard-working individuals is made up of positive go-getters who make a huge impact at Valley Children's Hospital.

We congratulate Central Staffing, House Resource Pool for being the honored recipient of the Valley Children's 2018 Team Excellence Award.

Valley Children's Healthcare

Friend of Nursing 2018

Sterile Processing Department and Plant Services Department

Two dedicated teams from Valley Children's Hospital exemplify the term collaboration. Both teams of skilled people are highly technical and have prescriptive standards under which they must function.

Among many other tasks, the Sterile Processing Department is responsible for the provision of sterile equipment to the operating room (OR), and Plant Services is responsible for ensuring the Hospital's sterile processing equipment works properly.

Both teams understand the urgency and importance of sterility in the OR. They worked closely with nurses as well as physicians to explain what they knew, listen to frustrations, and work through process changes with the OR nursing staff so that everyone understood the plans moving forward.

For the Sterile Processing Department, collaboration with nursing often came in the form of facilitating the timely reprocessing of surgical trays to support a patient care need. The team was challenged to figure out new ways to do things while maintaining sterility.

For Plant Services, support for nursing was demonstrated by their timely response to the OR Core's requests to fix a piece of equipment.

It has been humbling to see how amazingly well these teams worked together, and how they committed to doing so for the wellbeing of our patients.



During the last several months, these two teams worked tirelessly – including many hours of overtime – to address a need identified in the preparation of surgical trays, ensuring the continuation of surgery.

The Sterile Processing and Plant Services teams, which are typically charged with not straying far from their prescribed duties, came together to collaborate fully so that Valley Children's could continue providing the best care to our patients. In an extremely tense situation, these teams maneuvered to facilitate solutions with a smile, maintaining a strong can-do attitude. They remained flexible and patient with necessary changes while working through to a solution.



We congratulate Sterile Processing Department and Plant Services Department for being the honored recipient of the Valley Children's 2018 Friend of Nursing Award.



Exemplary

Professional Practice

Valley Children's Nursing Professional Practice Model

A dynamic framework that supports the clinical practice of nurses and promotes a professional practice environment

The Valley Children's Nursing Professional Practice Model demonstrates the integrated, interrelated relationship of the 12 components of the model, which weave around the patient and family. The Patient/Family is core. The components are reflected on a contiguous ribbon with no beginning and no end. Each component is equally weighted, flexible and adaptable. All components must be present to maintain balance in the structure.¹

¹ Adapted from a research study by Vermeltoort, D., Dragomanovich, M., and Mountcastle, K. Common Components of Current Nursing Professional Practice Models in the Hospital Setting in the United States of America – A Qualitative Study.

The 12 Components of the Model

Professional Values

Foundational beliefs of the organization and nursing services

Theoretical Framework

Conceptual foundation, which provides structure for nursing practice

Professional Practice

Structures, standards and regulations, which govern the practice of nursing

Governance

Organizational structure for the oversight of nursing practice

Collaborative Relationships

Partnerships between nursing and the patient/family, peers, the organization, academia and the community

Care Delivery

The application of the nursing process to the provision of patient care within a defined model of care

Outcomes

The achievement of measurable organizational, patient, workforce and community outcomes through quality, safety and performance improvement processes

Research/Evidence-Based Practice

A culture of clinical inquiry, which drives nursing research and results in evidence-based practice and sharing of new knowledge

Professional Development

Programs that support professional advancement, ongoing education, national certification, succession planning and mentorship/precepting

Reward and Recognition

Mechanisms to provide recognition of accomplishments and performance, which support nursing practice

Communication

Processes and methods, which support the sharing, receiving and exchanging of ideas and information

Operations

Management and leadership of programs and resources that support the provision of patient care and a professional practice environment



Valley Children's Healthcare

CLABSI

A Journey of Ongoing Excellence

Between fiscal year 2012 and 2017, Valley Children's Healthcare reduced the rate of central line-associated bloodstream infections (CLABSI) by 71.4 percent. The Hospital's oncology unit, Craycroft, has gone 220 days¹ since its last CLABSI.

Reducing occurrences of this common infection can be attributed to the thorough, vigilant work of Valley Children's nurses serving on the CLABSI Committee, a subcommittee of the Infection Prevention Committee.

"We increased participation across the organization at a subcommittee level," said Jennifer Reyes, MSN, BSN, RN, RNC-NIC, director of acute care inpatient services at Valley Children's, and co-chair of the CLABSI Subcommittee. "We have expanded the multidisciplinary representatives to increase provider and ambulatory participation. These members then become the champion on their units or departments."

CLABSI team members actively engage in learning and implementing best practices.



"We work to standardize care of the central line so that no matter where the patient is, the care is the same," said Jennifer. "We seek out best practice and collaborate with other children's hospitals across the nation to eliminate this type of patient harm event. We are working to create a culture where every day there is a discussion about the necessity of the central line, and because that is a physician decision, we needed physician partners on the team to advocate for practice change."

The CLABSI Subcommittee has consistently been a dyad leadership between nursing and physicians. Dr. Nael Mhassein, pediatric infectious disease specialist and medical director of infection

¹As of April 23, 2018

Administrative Improvements:

- Expand CLABSI team membership
- Identify best practices within SPS²
- Standardize procedures based on best practices
- Extend education organization-wide
- Increase focus on identifying practice drift
- Begin real-time audits organization-wide
- Leverage documentation for enhanced audits

Practice Improvements:

- Daily CHG bathing³
- Wearing gloves when accessing lines
- Scrubbing between accesses
- Closed medication delivery
- Annual skill labs
- Line Care Carts on all units
- Remove line ASAP

²The Children's Hospitals' Solutions for Patient Safety Network (SPS Network) is a collaborative of over 100 children's hospitals that works to improve pediatric patient safety and represents the first and one of the most significant efforts by children's hospitals to eliminate harm to hospitalized children.

³Studies show daily bathing with CHG (Chlorhexidine Gluconate) helps reduce central line infection rates. In the fall of 2017, Valley Children's implemented daily CHG bathing for all patients over 2 months of age with a central line outside. Due to the fragile nature of the premature infant's skin, bathing in the NICU is done according to neonatal guidelines.

prevention at Valley Children's, is currently serving as co-chair. "Dr. Mhassein has been key to the increased physician participation," said Jennifer.



Taking the fight organization-wide

Raising awareness of the importance of standardized central-line care weighs heavily in reducing CLABSI infections.

"The focus in years past had been on the care delivered on the specific unit," said Jennifer. "But it was clear to the team that patients came into contact with many other services during a hospitalization." This prompted a drive to ensure standardization with line care extended throughout the organization.

"We expanded the CLABSI team to make sure we truly had representation not only from every area that sees inpatients, but also from ambulatory clinics that see our kids as outpatients," said Jennifer. "We partnered with Periop Services to ensure continuity when patients had surgical procedures. We are also privileged to have a parent on the team. This parent of a former oncology patient is very effective and involved in helping us get families on the team to prevent infections, including daily bathing with a special antimicrobial soap."

As one of several practice improvements identified by the team, daily bathing of high-risk patients with an antimicrobial soap has become standard practice. Researching best practices and implementing evidence-based care has been supported at Valley Children's by an increased focus on identifying practice drift by observing practice.

"We supplemented our documentation audits with real-time observation audits," said Jennifer. "We actually see the care being done rather than just looking for boxes that are checked."

Real-time audits were piloted on the Explorer Unit in June 2016 and rolled out organization-wide in fiscal year 2017, which has resulted in measurable reductions in CLABSI rates throughout Valley Children's.

"The documentation audits have been ongoing, but had not been consistent across the organization," said Jennifer. "NICU, PICU and Craycroft were very consistent because of the high-risk patient population," she added, referring to the units treating neonatal and pediatric intensive care patients as well as the oncology unit. "But when we began to see central-line infections in other areas, we had to look at the patient as high risk unrelated to the unit."

The culture of safety at Valley Children's encourages everyone to support a questioning attitude and to support being questioned. Anyone should be able to ask for help and hold each other accountable.

"The fact is the data is out there now; it's publically available to see infection rates, and it should be," said Jennifer. "People are very savvy on finding information. You want to make sure you're getting the best care for your child. But for our team, one central line infection is one too many. We are committed to zero!"

Valley Children's is proud of our record of lowering CLABSI rates in our journey of ongoing excellence.

Three-Year Reduction in CLABSI Rates

	FY 16	FY 17	FYTD 18 ⁴
Craycroft	9	3	0
Organization	28	18	11

"But for our team, one central line infection is one too many. We are committed to zero!"

— Jennifer Reyes, Director of Acute Care Inpatient Services, Valley Children's

⁴As of April 23, 2018



New Knowledge

Improvements & Innovations

Patient Throughput New Role, New Processes

Last year, the continuous improvement journey at Valley Children's ventured into the Hospital's patient throughput processes with a goal to develop and implement ways to initiate our patients' admission, discharge, or transfer in a more timely fashion. A dedicated team of staff, from bedside to leadership, worked over a period of several months to identify gaps between current patient flow and ideal patient flow.

"Lean/Continuous Improvement gives us a disciplined approach to look at our work in a different way and to make everything we do more efficient, while still putting patients first," said Danny Davis, MHA, BSN, RN, Vice President Patient Care, Valley



Children's Healthcare. "We hadn't tackled patient throughput across the organization, and wanted a more robust initiative to improve the process."

Valley Children's began by holding a series of Value Stream alignment sessions, a key strategy in Lean methodology for understanding, organizing and delivering value. Multidisciplinary teams were identified based on their roles in the patient throughput process. Team members gathered at a number of alignment sessions over the summer to analyze the flow of information and chain of activities in our patient throughput process.

"The Value Streams were about looking at the whole continuum of care," said Tina Costello, Director, Project Management, Valley Children's Healthcare. "From whatever point the patient enters our organization, through where they will be during their entire stay, to discharge."

The review of existing procedures and information management helped the team determine that closing gaps between current patient flow and ideal patient flow called for a new role and new processes. With this methodology, frontline staff not only identifies improvement activities for implementation, but also becomes the implementation team.

"Value Streams have been the most efficient and effective way to engage the nursing leadership and bedside team on process improvement," said Tina. "We are still in the infancy of this initiative, but we have the ability to sustain the improvements we are implementing, and sustainability proves this process will work in the long term."

The Role of the Inpatient Flow RN and the Interim Transition Unit

The team developed a creative solution that involved setting up an interim transition unit (ITU) for inpatients and establishing a new nursing role called the Inpatient Flow RN. Nurses working in this fluid position transition between the emergency department (ED) and the ITU, based on the number of admitted patients in the ED holding for an inpatient room.

"The Inpatient Flow Nurse is a nurse from our House Resource Pool," said Danny. "These nurses are the ones that float all over the Hospital and are well suited for this transitional position."

The new role is designed to support patients during the high-census months of January through April. One Inpatient Flow RN is scheduled each shift, 24 hours a day, seven days a week. This keeps Valley Children's from being squeezed into holding patients in the ED, declining patients from outside referral sources, or delaying patient transfers.

"If there are four holds in the ED, the nurse moves with the patients into the unit," said Danny. "We have been good at keeping this position true, and are now adding an on-call Inpatient Flow RN if we have three patients holding in ED."

Dedicated to helping streamline patient throughput, the on-call Inpatient Flow RN will supplement the Inpatient Flow RN role. These nurses facilitate admissions, discharges and transfers by providing and documenting inpatient care for children holding in the ED, and by admitting and discharging patients to and from the ITU. If patients on ED hold do not meet the criteria for receiving care in the ITU and instead require beds in one of the Hospital's inpatient units, the lowest acuity patients pending discharge who do meet ITU criteria will be moved there to make room for those ED hold patients.



Zone 0 for Rapid Processing

Another process improvement coming out of this initiative involved setting up Zone 0 operations in the ED.

"We focused on a process to enhance our ability to see the lowest acuity patients on the emergency severity index in an efficient manner to provide rapid, quality clinical care," said Danny. "This population is our highest risk for leaving without being seen. The creation of Zone 0 has enabled us to move this patient population through more efficiently."

Zone 0 can operate with a nurse practitioner or physician's assistant, who can rapidly see the patients while physicians attend to the higher acuity patients in ED.



"We changed workflows and have had really good results with that," said Danny. Additionally, the team identified an opportunity to create nursing Zone leads responsible for advancing flow in the ED. "We also redesigned the way we keep supplies. We now have supply carts with needed items spread throughout ED. Reducing the number of steps saves time."

With a 12 percent increase in overall ED volume from January 2016 to January 2017 and more than 13,000 ED patients treated each month, providing value to our patients and their families depends on efficient patient throughput. The continuous improvement journey that led to establishing our new role and new processes has brought Valley Children's closer to achieving ideal patient flow.

Qualities of RNs in New Role

- Able to prioritize and critically think
- Adapts easily to different departments
- Enjoys experiencing various situations
- Flexible, works easily with diverse teams
- Navigates distinct units with skill and ease

Benefits of New Processes

- Improves patient care and safety
- Provides inpatient standard of care upon admit orders
- Decreases number and duration of ED holds
- Increases patient and family satisfaction
- Increases employee engagement

RESEARCH, PRESENTATIONS & POSTERS

Research

HSC902 – Childhood Cancer Survivorship Program – PI John Gates, MD; Sub-investigators Vinod Balasa, MD; Vonda Crouse, MD; Karen Fernandez, MD; J. Daniel Ozeran, MD, PhD; Latha Rao, MD; Faisal Razzaqi, MD; David Samuel, MD; Wendy Tcheng, MD; Ruetima Titapiwatanakun, MD; Therese Hinz, NP

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 Dragmonanovich, 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; and 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

HSC982 – RadART-PRO: A prospective multi-institutional study to assess the risk of radiation induced vasculopathy and stroke as well as stroke recurrence in children with cancer who received radiation therapy to the neck and/or brain – Local PI David Samuel, MD; Sub-investigators Vinod Balasa, MD; Vonda Crouse, MD; Karen Fernandez, MD; John Gates, MD; J. Daniel Ozeran, MD, PhD; Latha Rao, MD; Faisal Razzaqi, MD; Wendy Tcheng, MD; Ruetima Titapiwatanakun, MD; Malynda (Gonzalez) Kemmer, NP; Katherine Baker, NP; Kimberly Ling, RN

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

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

HSC1127 – My Life Our Future: A Hemophilia Genotyping Initiative Data and Sample Research Repository – Local PI Vinod Balasa; Sub-investigators Faisal Razzaqi, MD; J. Daniel Ozeran, MD, PhD, Wendy Tcheng, MD; Latha Rao, MD; Ruetima Titapiwatanakun, MD; Terea Giannetta, CPNP; Kelly Folmer, CPNP

HSC1138 – The Electronic Medical Record from the Nurse Perspective (Exempt) – PI Candice Biberston, BSN, RN – Retired June 2017

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; Sheena Keding, MSN, CNS

HSC1182 – A Phase II Study of Pazopanib (GW786034, NSC# 737754) in Children, Adolescents and Young Adults with Refractory Solid Tumors – Local PI – Ruetima Titapiwatanakun, MD; Sub-Investigators – Vinod Balasa, MD; Vonda Crouse, MD; Karen Fernandez, MD; John Gates, MD; J. Daniel Ozeran, MD, PhD; Latha Rao, MD; Faisal Razzaqi, MD; David Samuel, MD; Wendy Tcheng, MD; Katherine Baker, RN, CPNP; Malynda (Gonzales) Kemmer, RN, MSN, NP-C

HSC2006 – ADVL1621, A Phase I/II Study of Pembrolizumab (MK-3475) in Children with advanced melanoma or a PD-L1 positive advanced, relapsed or refractory solid tumor or lymphoma (KEYNOTE-051) – Local PI – Ruetima Titapiwatanakun, MD; Sub-Investigators – Vinod Balasa, MD; Vonda Crouse, MD; Karen Fernandez, MD; John Gates, MD; J. Daniel Ozeran, MD, PhD; Latha Rao, MD; Faisal Razzaqi, MD; David Samuel, MD; Wendy Tcheng, MD; Katherine Claire Baker, RN, CPNP; Malynda (Gonzales) Kemmer, RN, MSN, NP-C

HSC2012 – INCB 18424-269 (COGAALL1521), A Phase 2 Study of the JAK1/JAK2 Inhibitor Ruxolitinib With Chemotherapy in Children with De Novo High-Risk CRLF2-Rearranged and/or JAK Pathway-Mutant Acute Lymphoblastic Leukemia - Local PI – J. Daniel Ozeran, MD, PhD; Sub-Investigators – Vinod Balasa, MD; Vonda Crouse, MD; Karen Fernandez, MD; John Gates, MD; Latha Rao, MD; Faisal Razzaqi, MD; David Samuel, MD; Wendy Tcheng, MD; Ruetima Titapiwatanakun, MD; Katherine Baker, RN, CPNP; Malynda (Gonzales) Kemmer, RN, MSN, NP-C

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

HSC2028 – The Implementation, User Testing and Validation of the Web-based Application for the Population Pharmacokinetic Service – Local PI – Vinod Balasa, MD; Sub-Investigators Latha Rao, MD; Terea Giannetta, CPNP; Kelly Folmer, CPNP

HSC2030 – The Impact of Concurrent Care for Medically Fragile Children – PI Sean Hunt, BSN, RN, CPN – Retired November 2017

HSC2033 – Extracorporeal Membrane Oxygenation (ECMO) Simulation – PI – Tara Lemoine, DO; Sub-Investigators Emily Geller, RN; Leslie Catron, RN – Retired September 2017

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, CNP; Sub-investigators Jolie Limon, MD; Stephen D. Roberts, PhD, MBA, CRC, CLCP, CCC-A, FAAA – Retired January 2018

HSC2053 – Risk-based, response-adapted, Phase II open-label trial of nivolumab + brentuximab vedotin (N + Bv) for children, adolescents, and young adults with relapsed/refractory (R/R) CD30 + classic Hodgkin lymphoma (cHL) after failure of first-line therapy, followed by brentuximab + bendamustine (Bv + B) for participants with a suboptimal response. CheckMate 744: CHECKpoint pathway and nivolumab clinical Trial Evaluation – Local PI – Wendy Tcheng, MD; ; Vinod Balasa, MD; Vonda Crouse, MD; Karen Fernandez, MD; John Gates, MD; J. Daniel Ozeran, MD, PhD; Latha Rao, MD; Faisal Razzaqi, MD; David Samuel, MD; Ruetima Titapiwatanakun; Sub-Investigators Katherine Baker, PNP; Malynda (Gonzalez) Kemmer, FNP

HSC2059 – Development in Children with Intrauterine Drug Exposure – PI Jennifer Nelson, BSN, RN

HSC2065 – Utility of post-operative parathyroid hormone (PTH) to detect hypocalcemia in children undergoing thyroidectomy – PI Animesh Sharma, MD; Sub-investigator Victor Duarte, MD; Rachelle Wareham, MD; Swati Banerjee, MD; Pamela Marsh, CNP

HSC2077 – AML16, A Phase II Trial of Epigenetic Priming in Patients with Newly Diagnosed Acute Myeloid Leukemia – Local PI – Faisal Razzaqi, MD; Sub-Investigators Vinod Balasa, MD; Vonda Crouse, MD; Karen Fernandez, MD; John Gates, MD; J. Daniel Ozeran, MD, PhD; Latha Rao, MD; David Samuel, MD; Ruetima Titapiwatanakun, MD; Wendy Tcheng, MD; Katherine Baker, RN, CPNP; Malynda (Gonzalez) Kemmer, RN, CFNP

HSC2080 – Validation of Best Practice Guidelines for Prevention of Surgical Site Infections in Neuromuscular Scoliosis Spine Surgery – PI Joseph Gerardi, MD; Sub-investigator Joseph Humpherys, DO; Lori Ricci, RNFA

HSC2109 – Understanding Hemophilia A and B Drug Dosage Administration Patterns – Local PI Vinod Balasa, MD; Sub-investigators Latha Rao, MD; Terea Giannetta, RN, DNP, CPNP; Kelly Folmer, NP, MSN, CPNP

Presentations & Posters

Biberston, Candace, MSN, RN, CPN

Podium Presentation:

“Generational Differences”, Educators of Central California Health Organizations Conference, Fresno, CA (April 2017)

Bilskey, Kimberly, BSN, RN

Podium Presentation:

“Pediatric Trauma Center Designation: Assess Team Preparedness Using In Situ Simulation”, International Meeting on Simulation in Healthcare, Orlando, FL (January 2017)

Burnett, Kristin, RN

Podium Presentation:

“Treating the Survivor, Domestic Violence Awareness: A Practical Guide to Understanding Domestic Abuse”, Family Violence Lecture Series at Fresno Pacific University, Fresno, CA (July 2017)

Catron, Leslie, MAED, BSN, RN, FAHCEP, CHSE

Poster Presentation

“SIMCamp: A Way to Use Rapid Cycle Simulation to Train and Assess Large Groups”, International Nursing Association for Clinical Simulation and Learning Conference, Washington, D.C. (June 2017)

Chaney, Emily, BSN, RN

Poster Presentation

“Using Interprofessional Simulation Training for Building a New Pediatric ECLS Center”, 28th Annual Extracorporeal Life Support Organization Conference, Baltimore, MD (September 2017)

Dragomanovich, Margarita, BSN, RN, NE-BC

Podium Presentation

“School Orders: Increasing Safe Days and Improving Efficiency”, Quality and Safety in Children’s Health Conference, Orlando, FL (March 2017)

Flores, Carlos, RN

Podium Presentation

- "Suicide Prevention and First Aid", 29th Annual Diocesan Congress, Visalia, CA (October 2017)
- "Be Not Afraid- Teen Suicide Prevention", St. Mary's Catholic Church Youth Group, Cutler, CA (January 2017)
- "A Discussion on Teen Depression and Suicide Prevention", New Covenant Community Church Teen Parent Group, Fresno, CA (January 2017)
- "A Discussion on Teen Depression and Suicide Prevention", Community Forum Teen Depression and Suicide Prevention, Valley Children's Hospital, Madera, CA (February 2017)
- "Teen Depression and Suicide Prevention", St. Helen's Catholic Church Confirmation Class, Fresno, CA (March 2017)
- "Teen Depression and Suicide Prevention", Staff In-Service, St. Anthony's Retreat Center, Three Rivers, CA (March 2017)
- "Teen Depression and Suicide Prevention", Staff In-Service, Santa Teresita Youth Conference Center, Three Rivers, CA (March 2017)
- "Suicide Prevention", Clovis West High School Parent Night, Clovis, CA (April 2017)
- "Abusive Head Trauma", Fresno County Migrant Head Start Staff Education, Fresno, CA (April 2017)
- "Teen Depression and Suicide Prevention", Doctors Medical Center Trauma Symposium, Modesto, CA (April 2017)
- "Teen Depression and Suicide Prevention", Fresno/Madera Youth for Christ Campus Life Club, Fresno, CA (April 2017)
- "Teen Depression and Suicide Prevention", CALWORKS Women's Program, Fresno, CA (May 2017)
- "Teen Depression and Suicide Prevention", St. Joaquim Catholic Church Youth Group, Madera, CA (May 2017)
- "Abusive Head Trauma", Fresno Head Start Training, Fresno, CA (May 2017)
- "Pediatric Trauma and Child Maltreatment", Paramedic Technical Training, Fresno City College, Fresno, CA (June 2017)

Frederickson, Lana, MSN, RN, CDE

Podium Presentation

- "Certified Diabetes Educator", School of Nursing Job Fair, Modesto Junior College, Modesto, CA (April 2017)

Hernandez, Deborah, BSN, RN

Poster Presentation

- "Using Interprofessional Simulation Training for Building a New Pediatric ECLS Center", 28th Annual Extracorporeal Life Support Organization Conference, Baltimore, MD (September 2017)

Hill, Angela, RN, BSN

Poster Presentation

- "Hospital Transition Panel", ENFit Adoption Summit, Children's Hospital Los Angeles, Los Angeles, CA (January 2017)
- "ENFit Go-Live", 21st Annual Synova Associates NICU Leadership Forum, Litchfield Park, AZ (April 2017)

Webinar Presentation

- "ENFit Go-Live", Making the Transition: New Tubing Connectors [Webinar] in California Hospital Association Webinars Series (November 2017)

Hinz, Therese, MSN, NP

Podium Presentation

"Common Childhood Cancers and Survivorship", School Nurse Conference, Valley Children's Hospital, Madera, CA (September 2017)

Hunt, Sean, MSN, RN, PNP, CPN

Podium Presentation

"The Impact of Concurrent Care for Medically Fragile Children", St. Agnes Research Conference, Fresno, CA (April 2017)

Poster Presentation

"The Impact of Concurrent Care on Medically Fragile Children", Center for Advancing Palliative Care National Seminar, Phoenix, AZ (November 2017)

Lingenfelter, Deborah, RN, RNC-NIC

Poster Presentation

"Valley Children's Hospital", First 5 Children's Summit, Merced, CA (April 2017)

Loo, Kamela, FNP-BC, NNP-BC

Podium Presentation

"PDA Prevention and Treatment", Central California Association of Neonatal Nurses Conference, Valley Children's Hospital, Madera, CA (November 2017)

Martinez, Ruthrolen, BSN, RN-BC

Poster Presentation

"A 'Genotyping Day' to Facilitate Efficient Enrollment for a National Project", Western States/Region IX Regional Hemophilia Network Conference, San Diego, CA (April 2017)

Mejia, Dana, MSN, RN, CPHON

Podium Presentation

"Test Construction and Analysis", Educators of Central California Health Organizations Conference, Fresno, CA (April 2017)

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

Poster Presentation

Untitled (Focus: Networking for Valley Children's Services)
First 5 Children's Summit, Merced, CA (April 2017)

Nasrudin, Freshta, RN

Podium Presentation

"Hereditary Spherocytosis", School Nurse Conference, Valley Children's Hospital, Madera, CA (September 2017)

Quintero, Mary Jo, RN, CCRN, CPN

Podium Presentations

"CCEMSA Collaborative Tape Reviews"

At area hospitals in Fresno, Hanford, Madera, Porterville, and Visalia (7 presentations, 2017)

"CCEMSA MICN Class/Pediatrics"

Program Director for a five-day Central Valley regional Course,

At area hospitals in Fresno, Hanford, Madera, and Visalia (14 presentations, 2017)

"Water Safety in the Central Valley", California Statewide Injury Prevention Summit, Sacramento, CA (March 2017)

"Water Safety 101", Moms of Pre-Schoolers, Monterey, CA (April 2017)

"Fresno County Paramedic Class/Pediatrics", Fire Academy, Fresno, CA (June 2017)

"Drownings... Please Tell Me There is Something New", South Valley Pediatric Conference, Bakersfield, CA (June 2017)

"Water Safety", Safe Kids Kings County, Hanford, CA (June 2017)

"Drownings... Please Tell Me There is Something New", Sacramento Injury Prevention Conference, Sacramento, CA (July 2017)

"Dry Drowning in Children: Urban Legend... Mostly", Central Valley Update, Modesto, CA (August 2017)

"Dry Drowning in Children: Urban Legend... Mostly", Western Regional Conference, Monterey, CA (August 2017)

"Central Valley Pediatric Surge Plan", Disaster Planning Conference 2017, Sacramento, CA (September 2017)

"Fresno County Paramedic Class/Pediatrics", Fire Academy, Fresno, CA (December 2017)

Rodriguez, Elza, BSN, RN, CCRN

Poster Presentation

"Using Interprofessional Simulation Training for Building a New Pediatric ECSL Center", 28th Annual Extracorporeal Life Support Organization Conference, Baltimore, MD (September 2017)

Salazar, Jane, MSN, FNP-C

Podium Presentations

"Pursuing Liberty: Community Discussion on Human Trafficking", Kings County DA Office and Community Partners Against Sex Trafficking, Hanford, CA (January 2017)

"Medical Concerns of Child Trafficking Victims", Kings County DA Office and Community Partners Against Sex Trafficking, Hanford, CA (January 2017)

"Forensic Medical Evaluation of the Sexual Assault Victim", Rape Crisis Service Advocate Training Program, Fresno, CA (January 2017)

"Sexual Abuse and Commercial Sexual Exploitation of Children: The Medical Concerns of Trafficked Children", Central La Familiar, Fresno, CA (June 2017)

"Valley Children's Hospital- Child Advocacy Clinic Services", Kings County DA's Office, Prosecutors, Advocates and Forensic Interviewers, Hanford, CA (August 2017)

"Medical Forensic Evaluation of Sexual Assault and Sex Trafficked Victims", St. Agnes Medical Center, Fresno, CA (December 2017)

"Forensic Medical Evaluation of the Sexual Assault Victim", Rape Crisis Service Advocate Training Program, Fresno, CA (December 2017)

"Acute and Non-Acute Sexual Assault Forensic Examinations", Valley Crisis Center Advocate Training Program, Merced, CA (December 2017)

"Child Sexual Abuse and the Medical Forensic Evaluations", Mountain Crisis Center Advocate Training Program, Mariposa, CA (December 2017)

Sayaseng, Kammi, DNP, RN, PNP-BC, IBCLC

Podium Presentations

"Pathophysiology and Management of Mild to Moderate Pediatric Atopic Dermatitis", National Association of Pediatric Nurse Practitioners Symposium, Denver, CO (March 2017)

"When Skin Goes Bumpy: Care of the Infant Skin", National Association of Pediatric Nurse Practitioners Symposium, Denver, CO (March 2017)

Sepulveda, Linda, BSN, RN, PHN, CLNC

Podium Presentation

"Legalities of Documentation", Central California Association of Neonatal Nurses Conference, Valley Children's Hospital, Madera, CA (March 2017)

Shadle, Randy, BSN, RN

Poster Presentation

"Effect of Regulations and Education on Timeliness in Newborn Screening in California", Newborn Screening and Genetic Testing Symposium, New Orleans, LA (September 2017)



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