

Nursing Excellence

ANNUAL REPORT MAY 2025

HICS Manages IV
Fluid Shortage
Caused by
Hurricane
Helene

New Programs Promote
Pursuing BSN and
Certification

Nurses Earn Privileges to Perform USGPIV
Virtual Reality Eases Parents' Apprehension



Valley
Children's
HEALTHCARE

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Transformational Leadership in Action

Vicky Tilton, DNP, MSN, RN, NEA-BC
Chief Nursing Officer
Vice President, Patient Care Services

To a Phenomenal Clinical Team,

In the ever-evolving landscape of healthcare, where challenges are relentless, and expectations continue to rise, I stand in awe of your unwavering dedication, resilience, and excellence. Every day, you bring skill, compassion, and innovation to the forefront of patient care, and for that, I am deeply grateful. As we reflect on this past year and look forward, I want to highlight the key areas where our collective efforts are driving transformation and ensuring excellence in patient outcomes.

Elevating Patient Care and Operational Efficiency

Through our steadfast commitment to patient- and family-centered care, we have made significant strides in reducing patient declines, improving timely discharges, and decreasing the percentage of patients leaving the emergency department without being seen. These achievements are a direct result of your vigilance, teamwork, and dedication to safe and effective patient flow.

Despite ongoing supply shortages and the persistent demand for care, you have maintained the highest standards of quality and safety. Your ability to innovate and adapt ensures our patients receive the best care possible, even in the face of adversity. This level of commitment sets us apart.

Building and Sustaining a Skilled Workforce

The future of nursing at Valley Children's Healthcare depends on our ability to attract, train, and retain top talent. This year, we have strengthened our onboarding and training programs, ensuring that new nurses receive the support they need to thrive. Through our invaluable partnership with Fresno State and the launch of the first ASN-to-BSN cohort, we are paving the way for educational advancement and professional growth. Additionally, our newly revised Clinical Advancement Program (CAP) provides a structured path for professional development, reinforcing our culture of excellence.

Encouraging certification and advanced degree attainment is more than an initiative; it is an investment in our future. Your continued pursuit of learning elevates our profession and enhances the care we provide.

Honoring Our Patients, Families, and Community

Healthcare is about people—the patients we serve, their families, and the broader community. Each day, you demonstrate deep compassion, navigating difficult interactions with grace and professionalism. Honoring our patients' understanding and wishes, even in challenging circumstances, reflects our core values. Your ability to

provide care with dignity, even when faced with uncooperative or unkind individuals, speaks to your extraordinary character.

Furthermore, our organization's presence in the community is vital. By strengthening our partnerships and advocating for health equity, we continue to make a profound impact beyond our hospital's walls.

Advancing Professional Practice and Leadership

Excellence is not a destination; it is a continuous journey. Our commitment to process improvement, patient safety, and clinical innovation remains steadfast. Whether initiating a patient safety alert with a well-thought-out solution or challenging existing processes to improve outcomes, your voices drive meaningful change.

Leadership presence, active listening, and valuing each of your insights are priorities for me. Your ideas and suggestions are not only welcome but essential. Clear and transparent communication ensures that critical needs—including equipment, tools, and training—are addressed swiftly.

A Future Defined by Excellence

Together, we have achieved remarkable milestones, and our journey is far from over. By upholding exemplary professional practice, fostering a culture of learning and innovation, and strengthening our community ties, we will continue to set new standards for nursing excellence.

I am profoundly honored to serve as your Chief Nursing Officer and to stand alongside such an exceptional team. Thank you for your commitment, compassion, and courage. Your impact is immeasurable, and your work is truly extraordinary.

With deep gratitude and admiration,

Vicky





TRANSFORMATIONAL Leadership

Nurse of the Year 2025 Excellence in Transformational Leadership

Bailey Rodriguez, BSN, RN, CPN,
Charge Nurse, Craycroft

A transformational nursing leader is a beacon of inspiration and change within the healthcare environment. Bailey embodies transformational leadership at both the organizational and unit level. She has a vision to improve patient care and outcomes for pediatric patients who may experience deteriorating conditions leading to an emergency medical response. A member of Valley Children's Emergency Medical Response Team Committee, Bailey reviews code blue documentation and presents individual cases, offering recommendations for improvements or enhancements. As the Heads Up committee chairperson, she plays a crucial role in the early assessment and recognition of deteriorating patient conditions, allowing for timely interventions that prevent Whole System Measure Codes outside the ICU. Bailey's effort to produce ambitious standards have led to a decrease in Whole System Measure Codes and improved patient outcomes. At the unit level, Bailey facilitates the Recruitment, Retention, and Recognition Committee. In this role, she supports the chairperson, influences staff engagement, and celebrates milestones and successes. The committee's dedication to fostering a positive and supportive work environment has enhanced team morale and cohesion.

Committed to staying at the forefront of nursing practice, Bailey is an engaged member of the Association of Pediatric Hematology/Oncology Nurses and the Oncology Nursing Society. She also remains informed on treatment protocols through the Children's Oncology Group.

Bailey's compassionate, family-centered approach to nursing makes her a favorite among patients and families. She provides not only medical care but also emotional support. Her ability to educate and empower families strengthens their confidence in making informed healthcare decisions. By integrating evidence-based knowledge into her practice, Bailey enhances patient care while mentoring new nurses, equipping them with the skills and expertise to grow professionally. She inspires the next generation of nurses. She told leadership about a patient's aspiration to become a nurse, which led to the patient's recognition as an

Honorary Nurse in the presence of more than 100 nurse leaders. This unforgettable moment highlighted Bailey's commitment to advocacy, compassionate care, and the power of nursing to transform lives. Bailey pays these attributes forward, mentoring other nurses striving for professional development through the Clinical Advancement Program at Valley Children's Hospital. She reviews advancement/maintenance applications as part of the Professional Development Council, and supports direct reports and other nurses in the organization who wish to grow professionally.

Bailey builds relationships with experienced colleagues and mentors, which has provided her with guidance, support, and opportunities for professional development. She not only networks with peers at Valley Children's, but also through professional organizations by fostering knowledge exchange and collaboration. Not everyone takes this path, but Bailey has embraced this necessary skill to move her practice and development forward.

Bailey continues to elevate the profession, leads by example, and remains committed to excellence. She enhances the quality of patient care and fosters a positive and dynamic work environment where team members are motivated to excel and contribute to the success of Valley Children's.



**We congratulate
Bailey Rodriguez, BSN, RN, CPN**

Valley Children's Nurse of the Year 2025
Excellence in Transformational Leadership

Valley Children's Healthcare Profiles

Fiscal Year 2024

Organizational Statistics

Licensed Beds: **358**

Average Daily Census: **194.8**

Inpatient Encounters: **10,336**

Day Surgery Encounters: **7,839**

Transports (Air & Ground): **1,228**

Emergency Department Visits: **97,114**

Valley Children's OB/GYN Visits: **8,178**

Regional Specialty Care Center Visits: **58,789**

Main Campus Specialty Pediatric Practice Visits: **158,322**

Primary Care Visits and Charlie's Clinic Encounters: **69,338**



Nursing Statistics

Clinical Nurses: **1,079**

Licensed Vocational Nurses: **22**

Nurse Leaders (CNO,
Directors and Managers): **26**

APRN (Nurse Practitioners
and Clinical Nurse Specialists): **69**

Other Specialty Nurses: **60**

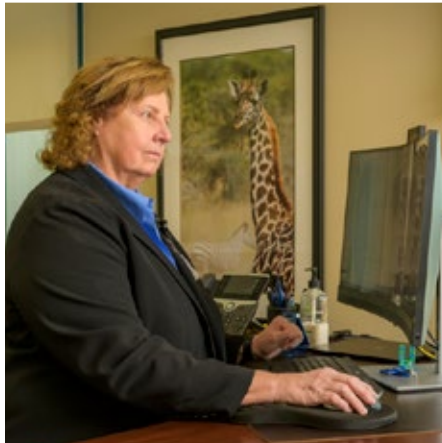
Includes Case Managers, Infection Control Nurses, Informatics Nurses, Nurse Educators, Occupational Health Nurses, Quality/Risk Nurses, and Ostomy Specialists



Total: **1,256**

Hurricanes, HICS, and Heroes

How Valley Children's Nurses Navigated the National IV Fluid Shortage



How does a hurricane in North Carolina impact patient care at 70% of hospitals nationwide? Hurricane Helene did just that when its unprecedented storm surge flooded the site where intravenous (IV) fluids are manufactured and distributed throughout the United States. When Kellie Dyer, MBA, Vice President, Supply Chain, Construction & Facilities heard the media report on flooding at the Baxter plant, she listened from the perspective of a vice president over supply chain management at Valley Children's Healthcare. Dyer was keenly aware the flood damage could jeopardize allocations of IV fluids on a massive scale. She sounded the alarm to fellow leaders at Valley Children's, who moved quickly to activate the Hospital Incident Command System (HICS).

Hurricane Helene hit North Carolina on September 28, 2024. Four days later on October 2, Cauryn Updegraff, MSN, RN, CNML stepped up as incident commander and Rougeh Awad,

MSN, RN, FNP-BC as operations chief. Together, they assembled the Hospital Incident Management Team (HIMT) to manage operational decisions and communications concerning all IV fluid supply chain issues caused by the disastrous hurricane.

"The day the Baxter plant got wiped out, Rougeh worked with the supply chain team to take inventory of our IV fluid," said Updegraff. "He and the operations team estimated the organization's days we needed to activate HICS because we only had two to three days of stock in the warehouse."



Incident Commander Updegraff worked diligently to approve plans crafted by the HIMT, manage the structure of the organization's emergency response, and coordinate activities with the executive sponsors. Awad's role called for spearheading operations. He dedicated countless hours to communicating with the team, collaborating with various departments to allocate resources, and daily monitoring of inventory and consumption. The Valley Children's Healthcare pharmacy worked closely with Awad to help match the volume to the need.



"We know the emergency department, the ICUs, OR, and oncology are heavy users of IV fluids," said Awad. "We had to evaluate needs so we could identify which departments we could redirect supplies from in order to allocate to the areas of greatest need."

To help protect patients during the national shortage of IV fluids, Updegraff and Awad established three priorities for HICS: sourcing, communication, and conservation.

Sourcing

The same day Valley Children's activated HICS, the hospital's liaison contacted other hospitals in the area to express concern over the looming shortage and take stock of local supply levels. "We initiated the whole command structure with HICS way in advance," said Awad. "So much so, that when our liaison reached out to other hospitals, many of them didn't know they had a problem with their IV fluid allotments."

"We have colleagues throughout the Valley," said Updegraff. "We checked with them and they said everything was fine. But it wasn't. They just didn't know yet."

Determining access to inventory and maintaining sufficient supply levels necessitated securing alternative sources from which to acquire IV fluids. "There are other fluid distributors besides Baxter," said Updegraff. "But if you don't have a contract, you're not getting fluid from them."

Senior executive leaders notified elected officials of the dire situation and the government initiated a process to approve international facilities. The HIMT worked with the California Hospital Association, Children's Hospital Association, and American Hospital Association to source more products.

With limited inventory on hand, the supply chain team prioritized urgent and critical needs while actively seeking alternative suppliers and exploring every option to replenish stock as quickly as possible. "We reached out to smaller entities in the community and they were able to contribute boxes in limited quantities," said Awad. "Their willingness to share their supply speaks to the public's high regard of our reputation as an organization." Strategically identifying alternative sources helped keep the IV fluid supply flowing to pediatric patients at Valley Children's.

Communication

Updegraff sent the first update of daily activities to the HIMT on October 4. "We sent the broad message out to the organization and Rougeh communicated with the individual teams to make sure they understood the messaging," said Updegraff. "He was there to answer questions like 'What do we flush the lines with?' and 'How much can we use to prime the line?' All those little things matter when you're trying to conserve."

Updegraff's desire for transparency with her team members was complicated by conflicting messages from Baxter and the media.

"Cauryn did a phenomenal job of showing that perceptions may be wrong based on competing information," said Awad. "I was really impressed with the organization and the staff because we were sending daily messages that changed every day based on the inventory and the shipment received each Wednesday from Baxter. We didn't want to give information if we couldn't count on it. The team was wonderful. Surgeons, supply chain, everybody was proactive, pivoting as needed."

Ambulatory, peri-operative and patient care teams were given a list of frequently asked questions to help them respond to families inquiring about the impact of the nationwide shortage. Updegraff and Awad sent regular emails to staff expressing their support through difficult conversations with families about the shortages and conservation protocols.

"We had to manage the dialogue," said Updegraff. "There was so much context behind the numbers. You couldn't just send numbers out in an email." Rather than trying to communicate the ever-changing inventory and consumption

Hospital Incident Management Team led by Incident Commander Cauryn Updegraff, MSN, RN, CNML

- Operations Section Chief: Rougeh Awad, MSN, RN, FNP-BC, Director Ambulatory Clinical Practice
- Logistics Section Chief: Jolinda Weston, Manager, Accreditation and Regulatory Compliance
- Medical Care Branch Director: John Kinnison, MD
- Planning Section Chief and Liaison Officer: Ashley Ave, Emergency Management Coordinator, Emergency Response Management
- Public Information Officer: Zara Arboleda, Director of Communications and Public Relations
- Situation Unit Leader: Michael Scahill, MD

rates, Updegraff shared triggers that would prompt the implementation of the disaster management plan. These triggers included having less than 15 days of IV fluid on hand and falling below a 50% conservation rate. The team initiated a HICS channel and monitored it daily to make sure triggers were not hit. "We never had to execute our disaster management plan," said Updegraff. "We were within a few days of having to execute it, but never did."

Through it all, the HIMT treaded a line between transparency and caution. "We wanted staff to know they needed to take this seriously, but not be in panic mode," said Updegraff. "As we got more confident in the supply chain and the inventory status, we were able to share more information knowing the numbers were reliable."

Conservation

Conservation efforts lowered the consumption rate of IV fluids an astounding 70% within two days. "We have a big team," said Updegraff. "We had many hands working to conserve. As soon as I got word from Kellie saying this was a big deal, I called the emergency department and said be absolutely judicious with IV fluid. Dial it back where it can be dialed back."

HIMT members met with Valley Children's medical directors to provide status updates and identify opportunities to prudently utilize IV fluids on hand and explore innovative alternatives in quality care delivery. Conservation strategies included postponing elective/nonurgent surgeries that required IV fluid. To minimize the number of postponements, surgeons assessed upcoming surgeries and procedures that routinely received IV fluids and identified those that could be safely managed with pre-operative oral hydration protocols.

Dr. Michael Scahill played an instrumental role in setting up sophisticated mapping to track utilization of IV fluids at the hospital. He also helped modify treatment protocols and provide guidance to other providers for their considerations. Other conservation tactics employed by Awad and his team included saving partially used bags of IV fluid and carefully storing them for future use on the same patient, adopting new NPO guidelines, and removing IV fluids from treatment plans in the infusion area. "None of the modifications pushed us outside of the regulatory requirements, but



all gave us new opportunities to conserve," said Updegraff. "Every patient who needed IV fluids got IV fluids. There were no quality-of-care concerns, ever." In light of how quickly Valley Children's was able to reduce IV fluid consumption by 70% with its conservation measures, Updegraff and her team realized the potential to improve stewardship. "The national shortage highlighted valuable opportunities for us to improve how we manage our resources and gave us a fresh perspective on maintaining high-quality patient care while also reducing costs for both our patients and the facility," said Updegraff.

The HIMT set up a task force comprising providers and nurses from high-use areas. The new task force will work to identify and implement conservation practices that can become the new standard. In addition, a resident is conducting a research project in the emergency department to explore alternative hydration, NPO guidelines, and judicious use of IV fluids.



Moving Forward

Many nursing leaders and patient care providers came together to successfully navigate the national IV fluids shortage under the dedicated leadership of Updegraff and Awad. "This was my first experience as Operations Chief with HICS," said Awad. "I'm impressed with the whole organization for implementing our plan so well and also for their support in standing alongside someone new to this role."

Updegraff and Awad are thankful for the many contributions of their hard-working team members.

"Dr. John Kinnison's approach with the doctors was exceptional," said Updegraff. "Physicians want to be spoken with face to face, and he made a point to meet with all the medical directors to ask them to socialize with their teams."

"Dr. Scahill brought in so much value with all his data collection," said Awad. "He helped us track how much was leaving our warehouse and how much was being utilized by patients every day."

The supply chain department fielded many phone calls and found innovative ways to source products. The education department assisted with communication and seamlessly connected the dots with the various teams. Danielle Barry, senior vice president and chief operating officer, and other senior executives expedited the approval process and provided much-appreciated support. Special thanks belong to senior members of the emergency management team, who successfully advocated for more supplies through the Children's Hospital Association.

"What sets us apart is that our internal compass is always set on our kids," said Awad. "I find that to be the case with everyone in the organization. We want what makes the best sense for our kids and especially the one who needs it the most."

Executive Sponsors for HIMT

- Danielle Barry, Senior Vice President, Chief Operating Officer
- Vicky Tilton, DNP, MSN, RN, VP, Patient Care Services and Chief Nursing Officer
- David Hodge, Jr., Vice President, Valley Children's Medical Group and Ancillary Services
- Kellie Dyer, MBA, Vice President, Supply Chain, Construction and Facilities



STRUCTURAL

Empowerment

Nurse of the Year 2025 Excellence in Structural Empowerment

Jenna Kuipers, MSN, RN, PPCNP-BC,
Nurse Practitioner, Gastroenterology Clinic

Jenna provides formal and informal support to nurses, enhancing their skills and equipping them to deliver exceptional care. She supports nurses through education on gastrostomy tubes (G-tubes) and gastrojejunostomy tubes (GJ tubes). Over the past year, she has delivered multiple lectures on topics essential for the care of patients with feeding tubes. These lectures include providing education to nurses attending GI Core twice a year and conducting training sessions for school nurses across the Central Valley. Session sizes varied from five to 40 participants, demonstrating her commitment to reaching a range of healthcare professionals. Additionally, Jenna presented at the Professional School Nurse Development Conference, where she lectured on G-tubes and GJ tubes to an audience of approximately 400 people. Widespread outreach helps equip nurses across different settings to care for patients with these medical devices, improving patient outcomes and safety.

Jenna plays a pivotal role at Valley Children's, supporting ongoing improvements within the organization and enhancing patient care. Her involvement in key committees and projects promotes high-quality, consistent, and safe care delivery. As a committee member of the Adult Transition Clinic, Jenna guides medically complex patients 18 and older through the transition from pediatric to adult care. Her efforts help patients receive continued, seamless care throughout this challenging and crucial transition. In her role as coordinator and data collector for Improve Care Now, Jenna manages a research database for inflammatory bowel disease (IBD) patients. By tracking patient outcomes and supporting evidence-based research, she contributes to improving care protocols and patient outcomes, fostering a deeper understanding of IBD and better treatments. Jenna serves on the Nurse Practitioner Council, monitoring standardized procedures for gastroenterology nurse practitioners (NPs) to ensure care is consistent and up to date with best practices.

Jenna collaborates with IT and nurse informatics teams to create therapy plans for new medications in the Ambulatory Treatment Center and contributes to creating an Epic order set for IBD patients. Both projects

streamline care processes, reduce errors, and ensure timely treatments to improve safety and efficiency.

Jenna encourages professional development by promoting involvement in professional nursing organizations. As the Continuing Education Chair for the National Association of Pediatric Nurse Practitioners, she encourages NPs and registered nurses to join and participate. She is particularly focused on involving NPs who are onboarding at Valley Children's Healthcare, fostering a sense of professional growth and collaboration within the organization. Jenna is a member of the North American Society for Pediatric Gastroenterology, Hepatology and Nutrition and the Association of Pediatric Gastroenterology and Nutrition Nurses. She is a published contributor for an NP textbook, "Pediatric Acute Care, A Guide for Interprofessional Practice." Jenna demonstrates exceptional leadership at the unit, organizational, and community levels, empowering others and influencing nursing practice. Through education, mentorship, and promotion of professional involvement, Jenna supports nursing practice and advances the quality of patient care in her organization and the community.

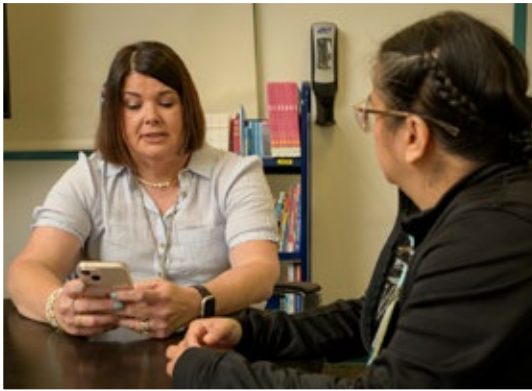


**We congratulate
Jenna Kuipers, MSN, RN, PPCNP-BC**

Valley Children's Nurse of the Year 2025
Excellence in Structural Empowerment

A Worthy Pursuit

New Initiative Helps Valley Children's Nurses Earn National Certification



Registered nurses with careers at Valley Children's Healthcare have numerous opportunities to grow. A new initiative aims to encourage professional development through the pursuit of national certification. According to the American Nurses Credentialing Center (ANCC), professional certification affirms advanced knowledge, skill, and practice to meet the challenges of modern nursing.¹ The Pediatric Nursing Certification Board (PNCB) has stated that certification demonstrates to patients and families, employers, and the public that a nursing professional has a deep commitment to the highest standards of care for children, adolescents, and young adults.²

"As a nurse, it is so important to commit to knowledge because we are in an industry that is constantly changing," said Amy Boling, RN, RNC-NIC, C-NPT. "How can we provide the best patient outcomes if we are not keeping our skills up?"

During the pandemic, many nurses with years of experience, advanced degrees, and certifications decided to retire. New nurses entered the practice of nursing in a season of transition. Nursing leaders at Valley Children's recognized the need to not only inform a new generation of nurses about national certification, but also give them solid reasons to pursue certification. "The outcomes we get from patient care show the value," said Stacie Venkatesan, MSN, CNS, RNC-NIC. "We not only encourage our nurses to get certified, but we also make sure they have the resources and support they need."

Support to Earn Certification

In recognition of Certified Nurses Day on March 19, the ANCC posted online that professional certification is a voluntary designation earned by individuals who demonstrate a level of competency, skill, and knowledge in their field.³

"Whenever we promote or celebrate Certified Nurses Day, our nurses get curious and talk about it," said Honey Monocillo, MBS, BSN, RN, CPN. "Department representatives and charge nurses are informed about national certification, and we give them fliers to share with staff so they can learn about it."

In April 2025, Valley Children's launched a monthly Nursing Excellence Newsletter that features information on professional certification, including the resources available to help nurses prepare and pay for the exam. While the literature shows that certified nurses have better outcomes, the investment of time and money, as well as the thought of studying and taking an exam, can discourage qualified nurses from pursuing certification. A new Valley Children's initiative designed especially for RNs of two years or more has simplified the process of pursuing and maintaining certification.



"We brought back a program called no pass/no pay," said Venkatesan. "It helps take the pressure off because Valley Children's will pay for nurses to take the certification exam even if they don't pass it." Providing this safety net for nurses helps mitigate apprehension associated with going after national certification. The Human Resources Department at Valley Children's added recertification as a covered benefit for education reimbursement. Nurses can apply for reimbursement not only to earn new certifications, but also to recertify. "The ability to maintain certification is as important as obtaining it," said Venkatesan.

Education reimbursement and no pass/no pay certainly help support nurses in the pursuit of professional certification, but financial assistance is not the only resource available to nurses interested in becoming certified.



Resources to Prepare for Certification

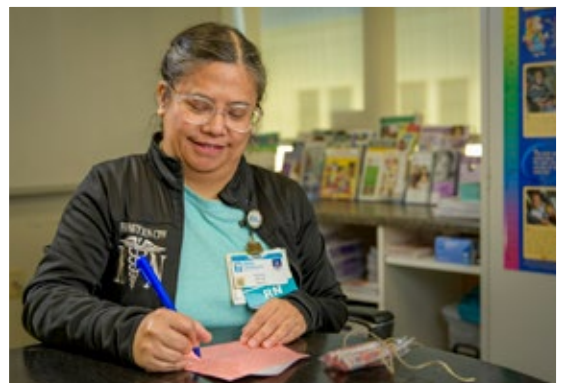
After being out of school for a while, jumping back into reading textbooks and studying for an exam presents a challenge for anyone—especially when working full time. Valley Children's encourages nurses to be life-long learners with a mindset to continually develop and grow. The hospital has a library where nurses can borrow books for an extended period of time. "We want them to have access to the books they need," said Monocillo. "They are able to check out books any time from the library. Additional review books that are in the departments can be kept until after their exam."

"We are prepping them to help them pass," said Venkatesan. "We're making sure they get their CEs and have access to study material and mentors who have already taken and passed the exam to learn from." Attaining continuing education (CE) units not only meets requirements for certification, but also expands a nurse's knowledge base. "We created a one sheet that has links to websites offering free CEs, so they can take classes at no charge." Valley Children's also offers free CE units through attending Lunch & Learn gatherings and other nursing events held onsite at Valley Children's Hospital. When nurses earn certification, Monocillo, as the chair of the Professional Development Committee, sends them a handwritten card with Smarties candy inside.

"Annually on Certified Nurses Day, we give a thank you gift to our nurses who are certified," said Venkatesan. "We hold an event in the Guilds Hall of Fame with a charcuterie board to celebrate. It's a lot of fun."

"As a part of our annual celebration, we interview certified nurses on video and post them on the George page," said Monocillo of the organization's intranet. "They answer the question, 'What does it mean to you to be certified?'" Responses from nurses who invested time and effort to further develop their knowledge, skill, and practice testify to the fact their hard work was worth it. "The value of certification is in the knowledge that nurses are able to use," said Monocillo. "There's value in certification—healing for the child."

"I chose to get certified because I wanted to demonstrate to the patients and families that I could bring my best every time I interact with them," said Amanda Flaherty, BSN, RN, RNC-NIC, C-NPT.



To learn more about national certification and how to begin the worthy pursuit, contact ProfessionalDevelopmentCouncil@valleychildrens.org

¹ <https://www.nursingworld.org/education-events/certified-nurses-day/> accessed March 13, 2025

² <https://www.pncb.org/> accessed March 13, 2025

³ <https://www.nursingworld.org/education-events/certified-nurses-day/> accessed March 13, 2025

RN and NP Professional Development Statistics (FY24)

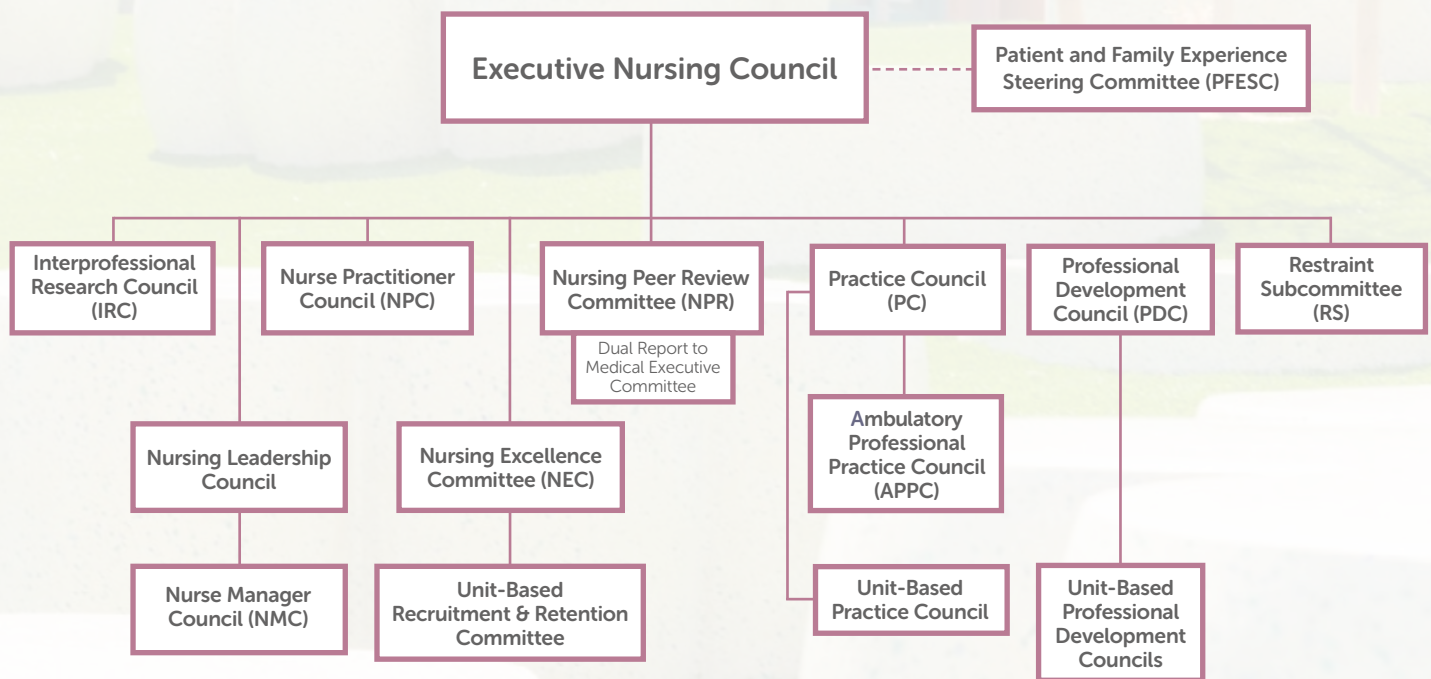
Percentage of Certified Nurses
Organization-Wide

42.32%



Valley Children's Healthcare Nursing Governance

Valley Children's Nursing Governance structure supports the nursing professional practice. The foundation for this structure is built upon shared decision-making and collaboration between all levels of nursing and interdisciplinary team members across a range of settings where nursing is practiced.



Council and Committee Accomplishments

Executive Nursing Council

Rougeh Awad, MSN, RN, FNP-BC, Chair
 Steve Odom, MSN, RN, CCRN, CPHQ, Chair-elect
 Denise Vermeltfoort, MSN, RN, NE-BC, Facilitator

Objective

Provide leadership and oversight for the governance of nursing services at Valley Children's Healthcare.

Accomplishments

- Clinical nurse membership recruited to ENC
- Supported and achieved our fifth Magnet Redesignation®
- Initiated Nursing Excellence Committee
- Ambulatory patient satisfaction with nursing outcomes has improved, and inpatient patient satisfaction with nursing outcomes continues to excel
- Monitored nursing quality outcomes, providing support and recommendations when indicated
- Selected Nurse of the Year in Exemplary Professional Practice, Transformational Leadership, Structural Empowerment, and New Knowledge, Innovations and Improvements
- Selected Team Excellence and Friend of Nursing award winners

Nurse Practitioner Council

Kelly Folmer, MSN, RN, CPNP, Co-Chair
Pamela Marsh, DNP, RN, CPNP, Co-Chair
Rough Awad, MSN, RN, FNP-BC, Facilitator

Objective

Responsible for determining the practice of Nurse Practitioners (NPs) within the organization, including development and approval of Standardized Procedures and Scope of Practice/Delineation Form, management of issues related to advanced practice nursing, and the promotion of nursing research and publication.

Accomplishments

- Developed specialty-specific furnishing lists
- Collaborated with leadership to help onboarding of NPs to have a seamless onboarding process
- Held annual meeting of co-chairs with ambulatory managers to improve NP onboarding processes
- Collaborated with other leaders to have speakers present to the council on topics that include clinical documentation and coding, EMR workflows, policy library updates, medical record delinquency, and reviewed informatics resource information
- Updated and approved 51 policies
- Held annual meeting with physician assistants (PAs) and NPs to ensure compliance, discussions on current patient care strategies, and reviewed effective ways to communicate within the organization

Practice Council

Eleana Martinez, BSN, RN, Chair
Michelle Clark, MSN, RN, CPN, CPHQ, Chair-elect
Stacie Licon, DNP, MSN, RN, CNS, ACCNS-P, CPN, Facilitator

Objective

Guide the ongoing development of nursing care at Valley Children's Healthcare.

Accomplishments

- Approved 119 policies, giving highest priority to Provision of Care in Nursing policies
- Transition to a new policy management system
- Practice Council participated in the Magnet® site visit and was instrumental in modeling shared governance for Valley Children's Healthcare

Ambulatory Professional Practice Council

Ines Hodzic, BSN, RN, Chair
Patricia Vargas, MSN, BSN, RN, CPN, Chair-elect
Rough Awad, MSN, RN, FNP-BC, Facilitator

Objective

Promote ambulatory standard of evidence-based patient care, clinical performance initiatives, education, and address patient and safety practices.

Accomplishments

- Initiated review of clinical role/expectations
- Initiated review of orientation competencies
- EMR standardization

Nursing Peer Review Committee

Jane Henning, ASN, RN, Co-Chair
Natasha Reilly, BSN, RN, Co-Chair
Vicky Tilton, DNP, MSN, RN, NEA-BC, Facilitator

Objective

Promote the quality of nursing care by identifying and recommending opportunities for improvement.

Accomplishments

- Closely monitored traveler RNs and communicated with their managers to tailor orientations/rehire to their needs
- Identified opportunities to enhance "Transition to Practice" education based on case review

Restraint Subcommittee

Brandee Cruz, BSN, RN, CPEN, Co-Chair

Robb Smith, BSN, RN, Co-Chair

Cauryn Updegraff, MSN, RN, CNML, Facilitator

Objective

Monitor the quality of nursing care offered to patients and provide a venue for identifying and recommending opportunities for improvement.

Accomplishments

- Restraint documentation updates and improved flow of documentation
- Algorithms for post operative management (medical immobilization versus care management)
- Care Management order renewal reminder for care team within Epic

Nursing Leadership Council

Vicky Tilton, DNP, MSN, RN, NEA-BC, Chair

Denise Vermeltfoort, MSN, RN, NE-BC, Facilitator

Objective

Promote and guide the strategic direction of Nursing Services.

Accomplishments

- Developed and implemented Valley Children's Healthcare Nursing Strategic Plan
- Approved and adopted Nursing Learning Needs Assessment and associated Implementation Plan
- Initiated plan for Magnet® Source of Evidence alignment with Nursing Governance Councils/Committees
- Supported a successful Magnet® site visit resulting in a fifth Magnet Designation®
- Supported optimization for the Workload Acuity Scoring Tool and audit process

Nurse Manager Council

Brittany Meyer, BSN, RN, CPN, Chair

Brandee Cruz, BSN, RN, CPEN, Chair-Elect

Vicky Tilton, DNP, MSN, RN, NEA-BC, Facilitator

Objective

Promote a professional practice environment by engaging clinical nurses in the professional practice of nursing and ensuring nursing operational initiatives are effectively implemented.

Accomplishments

- Offered a space for collaborative interaction with the Chief Nursing Officer and clinical leaders
- Enhanced process for information sharing with multidisciplinary leaders
- Promoted opportunities to identify and share process gaps and performance improvement needs
- Guided organization-wide nursing operational initiatives
- Continue development of the Manager dashboard, which will provide a centralized location to find consistent data for all managers

Nursing Excellence Committee

Stacie Venkatesan, MSN, RN, CNS, RNC-NIC, Co-Chair
Marcia Frye, MS, BSN, RN, CNML, Co-Chair

Objective

Provides leadership, coordination, and delivery of strategies promoting a culture of recognition and celebration.

Accomplishments

- Organized and implemented the 2024 Magnet® celebration for successfully achieving the fifth Magnet® designation
- Organized and implemented the 2024 Nurses Week celebration
- Partnered with Human Resources to begin the implementation of the Daisy Award® recognition for our clinical staff

Professional Development Council

Nichole Hackbarth, MSN, RN, CPN, Chair
Honey Monocillo, MBA, BSN RN, CPN, Chair-elect
Stacie Venkatesan, MSN, RN, CNS, RNC-NIC, Facilitator

Objective

Promote national certification and ongoing academic progression for nurses. Evaluate the Clinical Advancement Program to promote standardization and support the clinical practice environment.

Accomplishments

- Exceeded goal for BSN or greater by reaching 72.49%
- Established a Clinical Advancement Program Subcommittee that focuses on evaluation and standardization of the program and equitable advancement and maintenance of teams
- Celebrated Certified Nurses Day with a T-shirt to recognize those certified nurses within the organization and held a well-attended event to appreciate the work of certified nurses
- Successfully raised funds for the Nursing Scholarship Fund

Interprofessional Research Council

Stacie Licon, DNP, RN, CNS, ACCNS-P, CPN, Co-Chair
Trish Regonini, CIP, Co-Chair

Objective

Promote and support the understanding and effective use of research and scholarly activity to enhance the provision of evidence-based nursing care. Advance research literacy and promote a spirit of inquiry throughout the organization.

Accomplishments

- Advanced understanding of research study challenges and complexities via the presentation of seven research studies
- Advanced the understanding of evidence-based practice by presenting one quality improvement project
- Provided four didactic training sessions for council members on scholarly activities
- Consulted with researchers preparing for a research proposal undergoing development

Pioneering Pathways of Innovation

Valley Children's Initiates Unique Partnership with Fresno State

Since its founding as the first dedicated pediatric hospital in Central California, Valley Children's Healthcare has maintained a reputation for pioneering firsts. From performing the Valley's first pediatric open-heart surgery in 1958 to becoming the first children's hospital west of the Rockies to receive distinction from the Magnet Recognition Program® in 2004, Valley Children's continually builds upon its reputation for innovation. In January 2025, the organization demonstrated its pioneering spirit yet again with another first.



Ratan Milevoj, vice president of innovation, marketing and communications, and assistant chief strategy officer; Kelly Beall, senior vice president, chief people officer; and Michelle Brunetti, director of workforce planning and benefits, were aware of studies showing that nurses with advanced degrees and more credentials not only have a higher skill set, but they also stay with the organization longer. They reached out to Vicky Tilton, DNP, MSN, RN, NEA-BC, vice president of patient care services and chief nursing officer, to discuss practical ways to encourage nurses to pursue higher education and increase the number of bachelor's prepared nurses at Valley Children's. These discussions paved the way for an innovative partnership with California State University, Fresno that forges a path for nurses currently working at Valley Children's to earn their Bachelor of Science in Nursing (BSN) degree.



ASN-to-BSN Pathway Program

"The idea for the new pathway stemmed from an ongoing partnership with Fresno State and a need to increase the workforce of nurses at Valley Children's," said Tilton. She called on Stacie Venkatesan, MSN, RN, CNS, RNC-NIC, director NICU and Patient Throughput; Jessica Moody, MSN, ANCC PED-RN, manager Apollo; and Nichole Hackbarth, MSN, RN, CPN, manager Clinical Education, to take the ball and run with it. "Stacie served as the executive sponsor," said Tilton. "She worked with Nichole and Jessica on all the particulars. They deserve the credit for getting this program off the ground."

Hackbarth, who chaired the Professional Development Council, seized the opportunity to enhance nursing practice. "One of our strategic goals is to increase the percentage of our nurses with BSNs or higher," she said. The BSN+ goal is motivated in part by the Magnet Recognition Program®, the highest benchmark for nursing excellence in the world. Magnet® designates organizations where nursing leaders align their strategic goals in pursuit of quality patient care and improved patient outcomes. Five consecutive designations serve as evidence that Valley Children's continually raises the bar to enhance nursing practice. Partnering with

Fresno State to streamline a pathway for nurses to earn their BSN aligns with the organization's goal to promote nursing excellence and support innovations in professional nursing practice.

"Our footprint in the community is defined by three local nursing programs: Fresno State, Fresno City College, and Madera Community College," said Tilton. "Most of the newly graduated nurses at Valley Children's are from Fresno City. Since community colleges don't offer BSN programs, the bulk of our newly graduated nurses don't have their BSN."



Leaders from Valley Children's approached Janine Spencer, EdD, RN, assistant chair, associate professor, baccalaureate program coordinator, RN-BSN program coordinator and Robert PageSmith, RN to BSN admissions coordinator, about forging a unique partnership. Fresno State embraced the idea and collaborated on paving a smooth educational route for RNs with an associate's degree in nursing (ASN) to earn their BSN while continuing to maintain their position, working at Valley Children's.

Program Offering

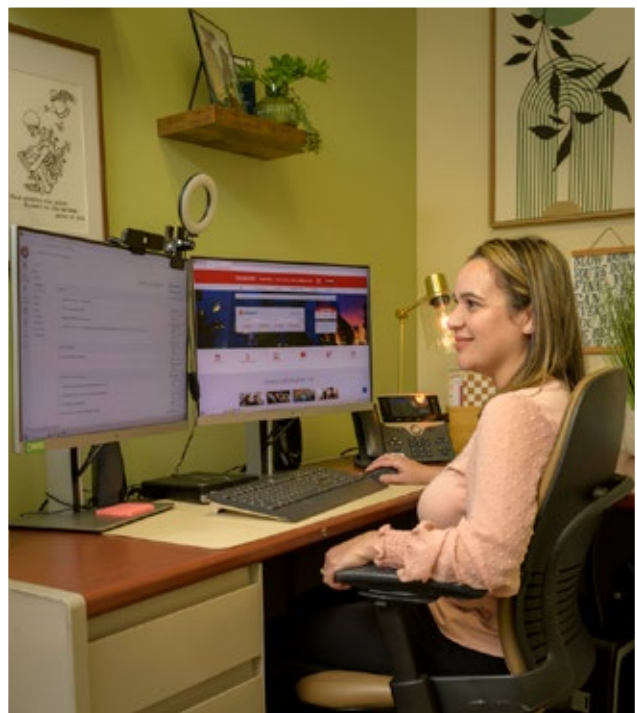
Valley Children's hosted an informational workshop on June 28, 2024, to explain the pathway to interested nurses. Spencer and PageSmith attended the event to represent Fresno State, and were joined by Dr. Kara Zografos, Fresno State Dean of the College of Health and Human Services. They described their online learning environment and flexible class schedules tailored to working nursing professionals. Leaders from Valley Children's in attendance included Hackbarth, Milevoj, and Beall. They explained the three areas of support enrollees could expect to receive: education reimbursement, paid education days, and mentorship.

Time and money can be tremendous roadblocks to earning an advanced degree, and so Valley Children's looked for ways to mitigate these obstacles. "Enrolled students receive a \$1,000 scholarship up front to pay tuition," said Hackbarth. "This is a big help and incentive.

Our current education reimbursement program involves reimbursing the students who submit costs for their class prior to the start date, and then we add the reimbursement to their paycheck in the next pay period."

"I just wanted to say how appreciative I am to have Valley Children's Healthcare's support with this endeavor," said Sarah Pacini, RN, CPN, compliance auditor-RN. "Nichole and the rest of the leadership team have made things so much easier for our cohort."

In addition to providing financial reimbursement, the ASN-to-BSN Pathway Program also offers allocated study time with pay. "Getting a paid education day is a huge win for the students," said Hackbarth. "If they work six 12-hour shifts a pay period, one shift per pay period is fully devoted to school work." "Getting one of my regular shifts



replaced with equally paid education time has been instrumental for my success in the BSN program," said Keri Gavaletz, BA, ASN, RN, CPEN, CPN, charge nurse Emergency Department. "Being not only reimbursed for books and expenses, but also getting paid time to study each pay period is an amazing benefit, and I feel so lucky to be employed by a hospital that values me enough to invest in my future. Without this opportunity, I don't think I would have taken the step to go back to school on my own." The third leg of support comes in the form of one-on-

one mentoring. "We want these nurses to be successful, so we are offering a mentor to support them," said Tilton. "With the mentor, nurses in the cohort have someone they can go to with questions. Their direct leader provides that support too, but aligning with a one-on-one mentor is more personal." Mentors are matched for a good fit with open lines of dialogue, which might mean having a hard conversation and shifting to another mentor if needed for better alignment. "We not only want them to enjoy their education and gain knowledge, but also have a great time," said Tilton. "We really are committed to giving our nurses the best experience."

"I am so thankful to Valley Children's for not only inspiring me to become a student again, but also for supporting me in every aspect along the way," said Gavaletz.

Along with defining the logistics of the program, Venkatesan, Moody, Hackbarth, and Tilton determined the eligibility criteria, what nurses needed to submit in order to apply, and parameters for the selection process. A scoring rubric was used to evaluate applications based on academics, letter of intent, and letter of recommendation. Applications were submitted in person or to the Professional Development Council via email. Hackbarth scanned each applicant's transcripts and sent them to PageSmith at Fresno State, who determined whether applicants had the pre-requisite courses to meet admissions requirements to enter the university's BSN program.

"Initially, Fresno State said we could approve 10 students for the inaugural cohort," said Hackbarth. "When 15 applied, they said we could accept all 15." The ASN-to-BSN Pathway Program is designed to be completed in three semesters, and Valley Children's aims to start a new cohort each Spring semester. The size of ensuing cohorts has not been determined.

"The process was seamless," said Tilton. "Fresno State had the resources to offer the program to our nurses and we provided the incentives to get them enrolled."

Inaugural Cohort

The first-of-its-kind cohort began classes in January 2025 for Fresno State's Spring semester with 14 students enrolled. Hackbarth sent a group email to students in the inaugural cohort on their first day of school. "I let them know we're here to support and encourage them, and I asked if they had any questions or concerns," she said. Every new program comes with its share of unknowns, and the ASN-to-BSN Pathway



Program is no exception. Hearing the students' concerns, Hackbarth offered them dinner at a touch-base meeting with voluntary attendance. "I invited a current third- semester BSN student at Fresno State who is further on her journey to come and talk about her experience in the program, to answer any questions, and provide words of encouragement." Hackbarth continues to check in with the students on a monthly basis.

"Every month we're highlighting their journey on our internal web page to demonstrate we're invested in our team," said Tilton. "We want to give them recognition because we know it's hard work to earn your BSN while working full time."

The ASN-to-BSN Pathway Program represents a significant opportunity for nurses to grow professionally and personally, while helping to elevate the overall standard of care at Valley Children's. Additionally, the students are representing Valley Children's to their classmates, opening the door to recruit graduates of Fresno State's BSN program who are not currently employed.

"This generation wants to get to work and start earning an income," said Tilton. "Other nursing students at Fresno State will see that our nurses are already working while attending their classes." In this way, the partnership will not only help Valley Children's further its goal of increasing the percentage of nurses with their BSN, but also help attract applicants who have earned their BSN.

"Our nurses will be ambassadors for Valley Children's to students who have not decided where they want to apply for a nursing position upon completion of their studies."

Several months into the inaugural cohort, the executive team has discovered ways to improve the program in the future. They plan to work through some of the obstacles encountered with the first cohort, including a lack of prerequisite courses to be accepted into Fresno State's BSN program.

With an eye toward the next application for Magnet® redesignation, nursing leadership at Valley Children's remains focused on increasing the number of nurses with BSN or higher degrees, and the ASN-to-BSN Pathway Program shows promise as a means of reaching this strategic goal.

"Having Magnet® status is really important to us because it demonstrates our commitment to best practices, which means we give the best care to our patients," said Tilton. "The motive behind this program is not only to support our staff to be their best, but also because we want to provide the best care."



Program Benefits

- Supports nurses currently working at Valley Children's in advancing their careers
- Furthers the organization's mission to provide the highest quality care
- Fully funds tuition for ASN-to-BSN program at Fresno State, including a \$1,000 advance
- Pays for Education Days (one 12-hour shift per pay period) to focus on academics
- Partners students in the cohort with a one-on-one mentor

Eligibility Criteria

- Fresno State's admission criteria
- Employment status
- Job performance
- Letter of intent for the program
- Letter of recommendation from the employee's leader

Interested Applicants

For specific questions about eligibility criteria, education reimbursement, and program information, contact Jessica Moody, Nichole Hackbarth, or Vicky Tilton.

For information about Fresno State's BSN curriculum, application process and timeline, visit <https://chhs.fresnostate.edu/nursing/degrees-programs/rn-bsn.html>

RN and NP Professional Development Statistics (FY24)

Percentage of RNs with BSN or Greater in Nursing Organization-Wide

72.49%





EXEMPLARY

Professional Practice

Nurse of the Year 2025 Excellence in Exemplary Professional Practice

Jenna Halliday, BSN, RN, RN III,
Neonatal Intensive Care Unit (NICU)

Jenna's involvement in the NICU's Safe Sleep initiative and participation in the NICU Quality, Patient Safety, and Clinical Effectiveness Committee showcase her commitment to quality improvement. She drove the implementation of sleep sacks within the NICU and developed a comprehensive hospital-wide audit tool to support safe sleep initiatives. She actively identifies areas for enhancement, modifies policies, updates K-Cards for effective auditing, and collaborates with the team to implement innovative solutions that drive patient safety and care improvements. Jenna helped optimize the Timeless system, which enhances the safety of breast milk administration and helps prevent errors. She led the nursing process and practice changes to integrate the electronic medical record (EMR) system.

Jenna has been an influential member of the statewide Motivating and Optimizing Maternal Milk in Safety Net NICUs (MOMMS) Collaborative, a group of safety net NICUs in California that works to improve human milk rates at discharge for premature infants. Jenna is an influential leader in the Neobrain Collaborative, a 30-NICU project focused on a neuroprotective approach to care. Her clinical expertise within these collaborative efforts has fostered a culture of continuous improvement and innovation.

Jenna is an active member of the National Association of Neonatal Nurses and the local chapter of Central California Association of Neonatal Nurses. She serves on the Executive Nursing Council, which provides leadership and oversight for the governance of nursing services across all practice settings. She is also a member of the Nursing Peer Review Committee, providing valuable recommendations related to the quality of patient care.

Jenna invests in the continuous growth and development of nurses, particularly within the NICU. Through her multiple engaging and insightful lectures, she inspires and educates nurses in the NICU core curriculum classes, keeping them up to date with the latest practices and knowledge. Her proactive approach to supporting her colleagues is further demonstrated

by facilitating simulations to enhance team skills and knowledge. These simulations are vital for improving clinical decision-making, teamwork, and patient safety, providing a safe space for staff to hone their skills in realistic, yet controlled, settings. Her leadership in simulations reflects a deep understanding of the importance of practical experience. Jenna is an active member of the NICU Mentor Program, guiding and supporting new nurses as they develop their skills and integrate into the unit.

Jenna made significant contributions to advancing the nursing profession through her national poster presentation at the Cool Topics in Neonatology Conference, where she discussed the impact of K-Cards in driving change and ensuring the implementation of best practices. Her presentation provided valuable insights that contributed to the professional development of her peers.

Jenna is a dedicated nurse in the NICU with a strong focus on patient safety and quality improvement. Her leadership and commitment have significantly impacted both the team and the healthcare community.



**We congratulate
Jenna Halliday, BSN, RN**

Valley Children's Nurse of the Year 2025
Excellence in Exemplary Professional Practice

Nursing Professional Practice Model

Nursing Excellence in Action



The Nursing Professional Practice Model (NPPM) forms the foundation for nursing practice, which comprises 12 components:

- Professional Values
- Theoretical Framework
- Professional Practice
- Governance
- Collaborative Relationships
- Care Delivery
- Communication
- Outcomes
- Research/Evidence-Based Practice
- Professional Development
- Reward and Recognition
- Operations

Each day in numerous ways, examples of nursing excellence illustrate the NPPM in action at Valley Children's. The stories below highlight five of the 12 NPPM components.

NPPM Component: Professional Development

School Health Provider Professional Development Day

By: Caitlin Bernard-Vincent, MSW, LCSW and
Nichole Hackbarth, MSN, RN, CPN

Valley Children's is focused on promoting the health and well-being of children in the places where they live, learn, and play. The quality of care received in the school environment significantly impacts a child's physical, mental, and emotional health. As part of our mission, Valley Children's works to equip Central Valley school staff with the knowledge and resources needed to provide high-quality care to more than 40% of students with chronic health conditions on school campuses. Through educational initiatives, we aim to empower school personnel to deliver the best possible care, creating an environment where every child can thrive. We are committed to investing in a healthier, safer future for children in the Central Valley.



In the spring, Valley Children's gathered a team of specialized hospital nurses and a respiratory care practitioner to host a School Health Provider Professional Development Day aimed at all levels of school campus care. This event educated more than 240 RNs and LVNs from 12 school districts across the Central Valley on managing five critical chronic health conditions affecting children and youth. In addition to providing practical knowledge, the training included hands-on clinical experience, allowing nursing staff to learn effective tools for managing these conditions on campus. This successful initiative strengthened the partnership between Valley Children's and local schools, reinforcing our commitment to collaboration in ensuring the well-being of students. Recognizing the complex and ongoing healthcare needs of children with chronic illnesses, including daily management and emergency care, the training provided valuable resources for the community. Together, these educational efforts are fostering a healthier future for children in the Central Valley, ensuring that every student receives the care and support they need to succeed while at school and beyond.

NPPM Component: Collaborative Relationships

ED Mock Codes and Clinical Partnerships

By: Brandee Cruz, BSN, RN, CPEN, Clinical Partnership Program Manager

Valley Children's Clinical Partnership Program offers pediatric clinical education, standards, policies, and other resources to 18 hospital partners in our region through pediatric-focused work groups. One of these work groups supports Emergency Departments (EDs) at partner hospitals. Cauryn Updegraff, MSN, RN, CNML, director Emergency, Trauma Services, Emergency Management and Nurse Informatics, engaged Kristina Pasma, BSN, RN, CPSI, trauma nurse liaison, and I to take that support to the next level.



Work group members in the monthly calls consistently requested mock codes on drowning incidents. I enlisted the assistance of Emily Hunt, CNS, RN, MSN, ACCNS-P, CCRN-P clinical nurse specialist Emergency and Trauma, and Amy Mauk-Fisher, BSN, RN ED charge nurse, to visit community hospital partners for what they coined the "Mock Code Road Show."

Emily, Amy, and I traveled throughout the Central Valley and as far as Tehachapi to provide education, clinical standards of care, and clinical debriefings on pediatric drowning. While planning a visit to a rural, community-based hospital, they learned about a recent pediatric drowning death and swiftly developed a plan to hold a supportive debriefing. This intervention allowed the rural hospital team to discuss their experiences and feelings about caring for the patient. The profoundly emotional and beneficial session reassured the team, solidifying their confidence and ability in providing pediatric care.

Our hospital partners have consistently embraced the collaboration and resources offered through the Clinical Partnership Program, which is tailored to meet the needs of each partner with the goal of optimizing pediatric care.

NPPM Component: Care Delivery

RN Transition Program Coordinator Supporting Transition to Adult Healthcare

Tracy Gong, BSN, RN, Transition Program Coordinator

The transition from pediatric to adult healthcare is a significant step for young patients, especially those with chronic or complex medical conditions. This shift can be a challenging and stressful process for both the patients and their families. The Adult Transition Clinic launched in 2018 and focuses on care coordination for pediatric patients moving to adult-oriented healthcare. The clinic collaborates with Valley Children's Specialty Care Centers and Primary Care Group to identify "high transition-risk" patients older than 17.



The team consists of the medical director, program coordinator (registered nurse), transition navigator (social worker), and team assistant (Ambulatory Service Representative). Teamwork is essential.

The RN Transition Program Coordinator plays a unique role, working directly with patients and their families to assist them with establishing an adult primary care physician (PCP) who will manage their health once they leave pediatric care. This includes patients who have received care from Valley Children's for their entire lives. The RN Transition Program Coordinator serves as a primary liaison between our team and the patient's new adult PCP, engaging in comprehensive care coordination, facilitating referrals, and assisting with insurance navigation to ensure the effective transfer of relevant information and care needs. This transition process helps reduce the risk of gaps in care, ultimately promoting better health outcomes during this critical period.

Today, more than ever, children with complex pediatric conditions are not only surviving but thriving as they enter adulthood. Learning how to manage their medical conditions and healthcare needs as adults is key. The RN Transition Program Coordinator works with the Adult Transition Clinic team to facilitate a smooth transition to adult care, making a difference in the health of patients Valley Children's has cared for throughout their childhood.

NPPM Component: Reward and Recognition

Magnet Recognition®, Celebrating Excellence

By: Cathy Hinds, BSN, RN, CPAN, CPA, Manager Nursing Practice

In April 2024, Valley Children's Healthcare achieved a remarkable milestone—our fifth consecutive Magnet® Recognition, marking 20 years of excellence in providing exceptional healthcare. Awarded by the American Nurses Credentialing Center (ANCC), Magnet® is the highest honor for nursing excellence, recognizing hospitals that excel in patient care, nursing innovation, and overall quality of care.

For two decades, Valley Children's Healthcare has been at the forefront of nursing excellence. The healthcare team's commitment to high standards and continuous improvement, safety, and innovation, has ensured the best possible outcomes for patients and families. Magnet® is a prestigious recognition of the tireless efforts of every staff member. It reflects a culture of excellence, empowering nurses to thrive and enhancing exceptional patient- and family-centered care.



To celebrate this milestone, staff gathered for a BBQ on the South Lawn of Valley Children's Hospital, providing an opportunity to connect, reflect, and express pride in their collective contributions. It was a moment to celebrate the hard work of all staff members and their role in achieving this significant accomplishment.

In October, a team of 10 representatives attended the 2024 ANCC National Magnet Pathway to Excellence Conference®, a global event recognizing healthcare organizations excelling in nursing practice. This event allowed Valley Children's to showcase our dedication to nursing excellence, exchange ideas with leaders in the field, and learn about the latest advancements in nursing.

With a focus on professional development, innovation, and patient- and family-centered care, Valley Children's remains committed to continuous improvement and maintaining the highest standards of healthcare for the children and families we serve. This fifth consecutive Magnet Recognition® is a testament to the dedication of every staff member and a promise to continue offering exceptional care to children and families for many years to come.

NPPM Component: Operations

Nursing Strategic Plan Guides the Achievement of Outcomes

By: Denise Vermeltfoort, MSN, RN, NE-BC, Nursing Excellence Officer

The Valley Children's Healthcare Nursing Strategic Plan is established annually by the Nursing Leadership Council. The Plan guides the practice of nursing in achieving exemplary outcomes. Strategy and tactics combine to align with organizational priorities to focus efforts. The Plan is built on the foundation of the organization's mission, vision, core values, best goals, nursing professional practice model, and Magnet® components. Priority strategies and outcomes achieved in fiscal year 2024 included:



- Promote and support a culture of professional nursing excellence. The goal of increasing the percentage of RNs with BSN or greater was achieved at 72.49%. The Nursing Governance structure was enhanced to include the launch of the Nurse Manager Council and Nursing Excellence Committee.
- Eliminate harm and safety events. Excellence was achieved with zero serious safety events and catheter-associated urinary tract infections (CAUTIs).
- Be the top 10% in customer experience. All inpatient units exceeded the benchmark the majority of the time in 4/4 categories. MyChart activation rate achieved an all-time high of 64%.
- Efficient care delivery model, which provides access to care when the patient needs and expects. Clinical staffing models were optimized through enhancement to shift lengths and nursing roles such as navigators, coordinators, and enhanced discharge planning.
- Educate and/or develop the next generation of clinical staff to support the care delivery and customer-experience needs of the organization. Through collaboration with Fresno State, the first Valley Children's cohort was initiated with the acceptance of 14 RNs to the ASN-to-BSN Program for the Spring 2025 semester.

Nursing is committed to achieving "best" through purposeful planning, shared decision-making, and evaluation of outcomes, striving continually toward excellence.



Friend of Nursing Award

Karla Au Yeung, MD

With great admiration, we recognize Dr. Karla Au Yeung as the recipient of the Valley Children's Friend of Nursing Award for 2025. She exemplifies collaboration, excellence, and compassionate care across inpatient, outpatient, and procedural settings. Dr. Au Yeung makes a profound impact on both patients and the nursing team. She is a true partner in patient care, fostering strong relationships with bedside nurses, ambulatory teams, procedural staff, and leadership.

Dr. Au Yeung ensures open communication, answers questions with patience, and makes certain that nursing staff feels supported at every level. Beyond expectations, she dedicates time to educate, mentor, and advocate for both patients and colleagues. Her leadership and commitment elevate the entire team, particularly the inpatient staff on Discovery, the Endoscopy unit, and those in ambulatory and procedural areas, where her presence leaves a lasting mark. Her dedication goes beyond the bedside—she collaborates with leadership, advocates tirelessly for patients, and challenges insurance companies to ensure patients receive the care they deserve. She is a fierce advocate, never hesitating to navigate complex systems, lobby for services, and challenge the process to remove barriers to patient care. Dr. Au Yeung's persistence and expertise helps ensure patients gain access to the treatment they need. Her compassion extends to all—she listens to concerns, fosters a culture of trust and respect, and goes out of her way to ensure patients receive the best care possible.

Dr. Au Yeung not only advocates for her colleagues, but also strengthens the profession by sharing her knowledge beyond the hospital walls. Despite her demanding schedule, she made time to present to the Society of Pediatric Nurses, demonstrating her commitment to advancing nursing education and growth.

When it comes to the nursing team, Dr. Au Yeung is all about integrity, collaboration, and teamwork. She does this not because it is asked of her, but because it is her natural way of being.

According to a colleague in the gastroenterology clinic, "Dr. Au Yeung is a true advocate for nurses. She empowers us to become even better providers and leads with a kind heart. She serves as a true role model for all. I can't wait to grow up and be just like Dr. Au Yeung!"

Dr. Au Yeung embodies everything this award stands for—a mentor, an advocate, and an invaluable team member. She has made an enduring impact on all who work with her, and we are incredibly fortunate to have her as a partner and Friend of Nursing.



We congratulate Dr. Karla Au Yeung
Valley Children's 2025 Friend of Nursing Award

Team Excellence Award

Vascular Access Team, Patient Care Support



The Vascular Access Team is a high-functioning team that has gained a reputation for quality care with exceptional success rates for peripherally inserted central catheters (PICC) and ultrasound guided peripheral IV (USGPIV) insertion. The team consistently exceeds target performance metrics with increasing procedure volumes. They implemented a comprehensive program to train unit staff in USGPIV placement, and now three dozen registered nurses support difficult vascular access patients across multiple units/departments, including the Ambulatory Treatment Center, Hematology/Oncology Clinic, Emergency Department, Perioperative Services, Discovery, Explorer, NICU and PICU.

The Vascular Access Team collaborates and brainstorms to generate ideas, seek viable solutions to identified issues, and experiment with novel strategies to improve patient care. Solutions include the use of an automatic blood pressure cuff to reposition a malpositioned PICC. This non-invasive maneuver uses blood flow and turbulence to redirect the PICC, avoiding the need for catheter exchange/replacement. The team learned about this innovative strategy at the Association for Vascular Access Scientific Meeting.

The team follows best practice standards and prioritizes needlestick pain management to enhance the patient and family experience. In collaboration with child life specialists, they offer distraction and procedural support. They introduced the J-Tip Needle-Free Injection System for phlebotomy in the Outpatient Lab and use real-time ultrasound to guide PICC placements in neonates. Additionally, they incorporate Smileyscope virtual reality goggles to improve patient experiences during needlestick procedures. As part of the Innovation Lab project, "Reimagining the Isolette," they provided a vascular access specialist's perspective to help redesign the isolette for better access during procedures.

The Vascular Access Team has built collaborative, interdisciplinary relationships that have become the driving force behind many significant, essential, and lasting improvements including:

- Partnership with NICU medical staff leadership to develop a standardized procedure for ultrasound-guided arterial catheterization in the NICU
- Joint effort with Anesthesiology and Critical Care Medicine leaders and hospitalists to develop and implement an algorithm for determining procedure location for scheduling PICCs
- Collaboration with Medical Imaging, Oncology, and PICU leaders to advocate for and support policy revision and process change to eliminate unnecessary insertion of a peripheral IV for patients with an existing central line
- Worked with hospitalists on an initiative to revise the Vascular Access Device Selection Algorithm to incorporate the use of midline catheters as an alternative to PICC placement for prolonged therapies that do not require central venous access
- Utilize the Vascular Positioning System for precise catheter tip confirmation during PICC insertion to decrease number of portable x-rays and time needed to complete the procedure
- Assist staff in all inpatient and ambulatory care settings with troubleshooting concerns and issues related to peripheral IV and PICC catheter care, maintenance, and removal

The Vascular Access Team is a valuable resource to Valley Children's Hospital. The team has gained families' trust as an advocate and resource for their children with difficult IV access. Physicians, nurses, and other healthcare providers frequently commend the team for their high level of service.



We congratulate the Vascular Access Team
Valley Children's 2025 Team Excellence Award

A Proactive Move Expands Specialized Care

Valley Children's Nurses Collaborate on Ultrasound-Guided Peripheral Intravenous Catheter (USGPIV) Insertion Training

When a new professional building on the sprawling campus of Valley Children's Hospital was under construction in April 2022, the possibility circulated of relocating the Ambulatory Treatment Center (ATC). The ATC's patient population utilizes the Vascular Access Team (VAT) frequently, which initiated problem-solving conversations regarding logistics. Could VAT efficiently serve the new location? The move did not take place, but finding a solution to a problem that never materialized paved the way to train and equip seven ambulatory nurses in ultrasound-guided peripheral IV (USGPIV) insertion procedures.

Kim Sutters, PhD, RN, VA-BC, clinical nurse specialist, met with Rougeh Awad, MSN, RN, FNP-BC, director Ambulatory Clinical Practice, about providing ambulatory nurses with USGPIV training. Awad initially identified three who were interested in learning this specialized skill. However, before training could proceed, they needed to purchase their own ultrasound machine.

Capital Investment Supported

Sutters compiled the data tracked by VAT that showed the large number of USGPIV insertion procedures performed in the ambulatory locations. "Part of my role as a facilitator was sharing the data with executive leadership to justify the need," she said.

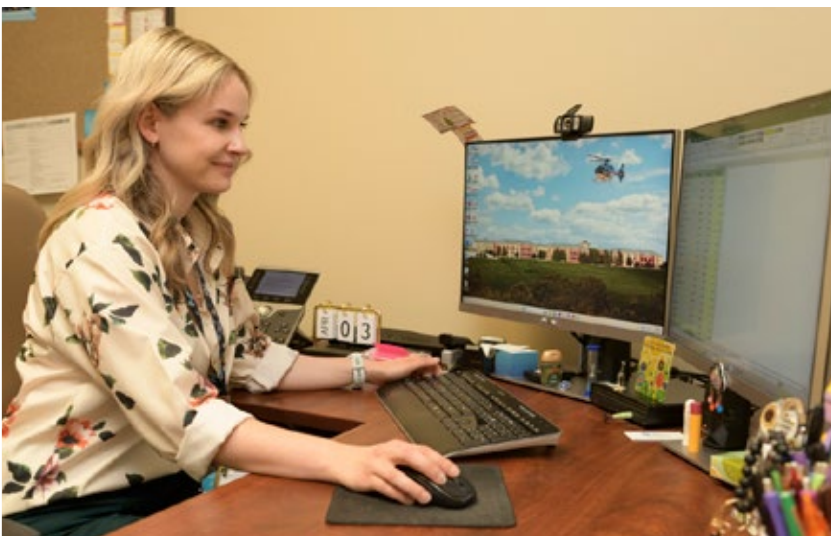
Ines Hodzic, BSN, RN, nurse manager, Ambulatory Treatment Center, Hematology, Oncology, used the data to prepare a budget request for executive leadership to substantiate the purchase of an ultrasound machine exclusively for the ambulatory patient population. "I was able to show the volume justified the expense," said

Hodzic. Executive leadership agreed and approved the purchase of a new machine. "Leadership saw the need, our ATC nurses saw the need, and Michael really saw the need. He and the whole Vascular Access Team were eager to support us in acquiring this new skill."

Education Streamlined

Upon securing the equipment purchase, plans were made to include some of the nurses from ambulatory in the next class offering. That's when Michael Volkov, ADN, RN, VA-BC, CNPI, vascular access specialist, approached Sutters with an idea prompted by an article he had read.

Published in *Oncology Nursing News*, the article contained research demonstrating how teaching oncology nurses to insert USGPIV had reduced dependency on VAT and decreased peripheral access wait times for patients.¹ Volkov saw an opportunity to increase patient satisfaction and logistically support the ambulatory nursing team—regardless of whether the ATC relocated. "Improving efficiency is part of best practices



because it improves patient care," he said.

"Michael keeps current with the literature," said Sutters. "He saw an opportunity to improve our own clinical practice by replicating and translating what he learned from the article."



Sutters turned her attention to streamlining USGPV training for Hematology, Oncology, and ATC nursing team members. With sufficient procedure volume to support proctored training within their department, Sutters, Volkov and Hodzic agreed they could expedite completion by scheduling a USGPV class offering exclusively for interested ambulatory nurses.

"It didn't make sense to have an entire department that would do USGPVs consistently come to a regularly scheduled class offering only one or two at a time," said Volkov. "I said, 'Let's hold a dedicated class to get them all trained together so they can start doing procedures,' and we did."

Hodzic took the lead in identifying more nurses interested in the training, and then helped facilitate scheduling so that all of them would be available for the training. In January 2024, seven RNs from the Hematology Clinic, Oncology Clinic, and ATC attended the four-hour USGPV didactic/simulation class. "We

selected nurses from the three areas and looked at how impacted the team was to make sure they were focused on learning when they were in their clinic," said Hodzic. All who attended completed training successfully. "Those seven nurses love doing this. They feel incredibly empowered and it's building up the whole team."

Volkov also commended the nurses who participated. "They are the stars because they committed themselves to the training and got it done in such a short amount of time," he said. "Now we say, 'Look to Hematology, Oncology, and ATC because they are the poster child for how it should be done.'"

Hodzic noted that newer nurses in her department want the training as well and will have an opportunity to attend future classes. "Because we function under a standardized procedure, USGPV is an extended practice," said Hodzic. "Nurses have to demonstrate competence on an annual basis."

"The training is intensive," said Sutters. "It is not a skill easily learned. It is a skill that takes practice. It takes time to become proficient."

Training requirements include the following:

- Attend half-day class of lecture and simulation training
- Partner hands-on with a proctor to observe and perform procedures with assistance, as needed
- Perform procedures for patients on their own

"We try to set them up for success, so we have them initially do the procedure on patients who are not as challenging to gain confidence," said Sutters. "Some patients have very small or deep veins, which makes the procedure more complicated. During their training, RNs must complete a minimum of 10 procedures successfully, and then complete five consecutive procedures successfully



to show consistency. If they do four and then miss on the fifth, they have to start over.”

“Because of the volume of procedures performed in those three areas each day, the nurses were able to get great exposure with the proctors and build on their skillset in a short period of time,” said Volkov.

In the Spring of 2024, all seven RNs met initial competency validation requirements and had been granted initial expanded-role privileges. “They were committed to the process and really focused on learning this procedure, which contributed to their success,” said Hodzic.

Ambulatory RNs who completed USGPiV training and received expanded-role privileges include:

Jennifer Cook, BSN, RN, CPN, Oncology
Patricia Vargas, MSN, RN, CPN, Oncology
Mayra Albor, BSN, RN, Hematology
Morgan Riordan, BSN, RN, Hematology
Reagan Amorino, BSN, RN, Hematology
Lindsey Sutherland, BSN, RN, CPN, ATC
Jenny Merryman, RN, ATC

Nursing Practice Enhanced

As ambulatory nurses mastered USGPiV insertion, patients saw less of VAT nurses like Volkov. “There’s one patient who has a special relationship with me,” he said. “Even though she misses seeing me, she welcomes having the procedure done by the ATC nurses. What a testament to how great the ATC team is doing!”

“The VAT team continues to support Hematology, Oncology, and ATC,” said Volkov. “We still partner together to support whatever patient care needs there might be.”

Lindsey Sutherland, BSN, RN, CPN, ATC charge nurse noted how USGPiV training has fostered collaboration in patient care between Hematology, Oncology, and ATC. “Overall, the training has not only improved individual skills but has also strengthened our collective effort to provide the best possible patient care,” she said. “This advanced technique has not only reduced the discomfort and anxiety associated with multiple needle sticks but also increased the success rate of IV placements on the first attempt.”

FY24 statistics for USGPiV insertions completed by Hematology, Oncology, and ATC nurses document the team’s remarkable achievements since earning their expanded-role privileges.

- Performed nearly 50% of all USGPiV insertions
- Significantly reduced wait times
- FY24 success rate: 90%
- Current success rate: 96%

“Ines helped drive acquiring this new skill in her department,” said Sutters, who noted other departments have embraced it as well. “Currently 36 RNs throughout the hospital have been trained to do USGPiVs,” she said. “The use of this technology, in combination with measures to mitigate needlestick pain, makes a big difference in the patient experience—especially for patients who have repeated visits to the hospital.”

Solving a logistical problem that never materialized resulted in exemplary professional practice through collaboration. “We are overly impressed with how Ines’s team embraced this idea and helped make it happen,” said Volkov. “I tell others in the organization, ‘If you really want to see good results, look to ATC, Hematology, and Oncology.’ These nurses show evidence that learning this skill and offering this procedure can have impactful results.”



Benefits of USGPIV Training

Shorter Procedure Times

USGPIV insertions previously required VAT. Now, trained ambulatory RNs perform the procedure themselves.

Better Stewardship

Equipping ambulatory RNs with their own ultrasound machine promotes a more efficient use of clinical resources.

Increased Patient Satisfaction

Patients and families have expressed reduced discomfort and an improved care experience during IV insertions.

Collaboration

VAT training contributed to greater collaboration among Hematology, Oncology, and ATC team members.



¹ <https://www.oncnursingnews.com/view/patient-wait-times-reduced-by-teaching-oncology-nurses-to-insert-ultrasound-guided-peripheral-iv>, accessed February 28, 2025



NEW KNOWLEDGE, Innovations & Improvements

Nurse of the Year 2025 Excellence in New Knowledge, Innovations & Improvements

Adriana Nole, BSN, RN,
Clinical Manager, Home Care

Adriana is a highly engaged and dedicated nurse leader who contributes to multiple committees and initiatives that enhance patient safety and care quality. She chairs the Ambulatory Safety Committee and participates in the Infection Prevention Sub-Committee, Hand Hygiene Committee, and Practice Council. As a key member of the Home Care/Respiratory Care Collaboration Group, she fosters interdepartmental synergy. Adriana actively engages in interprofessional collaboration, leveraging technology to facilitate virtual case discussions and shared decision-making. She played a critical role implementing sodium bicarbonate blocks into policy and standardizing care through collaborating with key stakeholders in revising the Central Venous Catheter booklet. Family education was developed and implemented for Blincyto bag changes and the use and troubleshooting of the infusion pump at home, helping families better understand durable medical equipment.

Adriana collects and monitors monthly central line-associated bloodstream infection (CLABSI) data. Blincyto patients demonstrate a 0% infection rate to date. She participates in the Solutions for Patient Safety Ambulatory CLABSI Cohort, advancing infection prevention practices. She helped integrate digital tracking tools to streamline infection surveillance, enhancing real-time data analysis and early intervention. She collaborated on the implementation of a smart infusion pump system to improve medication safety and reduce administration errors. A champion for telehealth implementation, Adriana spearheaded E-visits to assess central lines via video, providing families with real-time support. She also helped develop virtual training modules for families, enhancing their confidence in managing central lines at home.

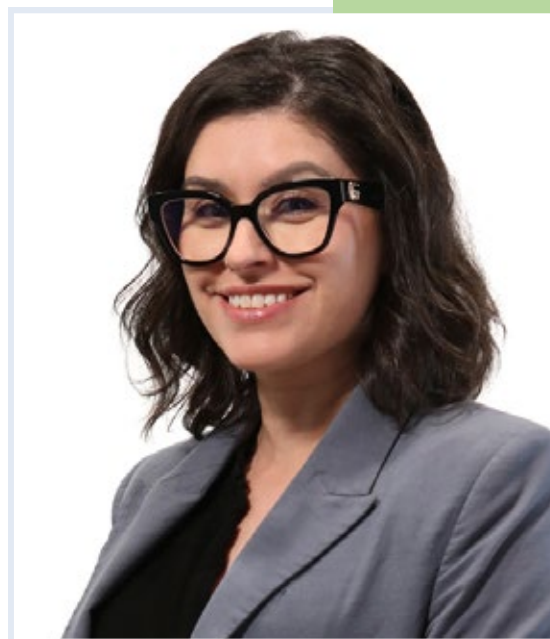
As a member of the National Association of Hispanic Nurses, Adriana advocates for increased representation for Hispanic nurses and patients. She is also a member of the American College of Healthcare Executives. Adriana leverages her leadership roles to develop culturally tailored patient education materials and digital resources to improve health literacy among Hispanic communities. She is exploring the integration of AI-driven language translation tools in clinical settings, as well as exploring AI-driven symptom assessment

tools within telehealth to improve early detection of complications. Additionally, she is piloting remote patient monitoring technologies to track vital trends in high-risk patients, enabling proactive interventions and reducing hospital readmissions.

Adriana volunteers as an educator, teaching childhood care classes for teen mothers through the Mighty Community Advocacy Organization, empowering underserved families with knowledge. She also educates on patient rights, trust-building, and health literacy within minority communities. As an instructor for the biannual Gastroenterology Core program, she provides specialized education to healthcare providers.

An advocate for the safety of the care delivery team, Adriana collaborated with leadership to implement the Guardian Mobile Personal Safety security fobs for all clinical and field staff who conduct home visits. The fobs have GPS monitoring, audio recording capabilities, and can contact local police with the push of a button.

A passionate and dedicated nurse leader, Adriana's innovations enhance clinical excellence, patient safety, and professional development. With unwavering commitment to empower others and implement evidence-based practices, she contributes significantly to innovations in professional nursing.



**We congratulate
Adriana Nole, BSN, RN**

Valley Children's Nurse of the Year 2025
Excellence in New Knowledge, Innovations
& Improvements

Making Patient Safety Fun

Virtual Reality Transforms Patient and Family Education

Patient safety is a priority at Valley Children's Healthcare. Since patient and family education helps promote patient safety, a great deal of time and effort go into offering comprehensive education prior to discharge. In addition to equipping parents to safely care for their child, a robust education plan also helps make nursing flow more efficiently. For these reasons, education plays a crucial role in Explorer, a unit that specializes in post-surgical patient care at Valley Children's Hospital.



"Explorer has a fast-paced turnover of patients," said Rita Santiago, BSN, RN, CMSRN, CPN, RN IV, Explorer. "We want more time to give education, but unfortunately, we don't have that time. Parents have to learn what to do when they take their child home with a medical device. They may not want to learn. They didn't want this for their child. But now they have to learn. Education ensures parents have the information they need and time to practice before going home."

Parents may be overwhelmed with the volume of information in their education packets. Faced with a plethora of important instructions, they may struggle to fully grasp how to care for their child at home.

"I have a passion for teaching and for finding alternative ways of providing patient and family education," said Santiago. "Part of my role is to learn about digital technology and how we can apply it in practice."

An Introduction to Virtual Reality

Santiago attended an online Hackathon in 2021 and discovered the cutting-edge capabilities of virtual reality education. "There were many things presented that were of interest, and all the innovations were wonderful. I thought it was a long shot, but I picked the top three that interested me and asked what we could do in our unit."

One of the innovations presented at the conference that had intrigued Santiago also appealed to others at Valley Children's. "I can tell Rita has a passion for patient and family education, and she's really good at putting things together," said Brittany Meyer, BSN, RN, CPN, manager Explorer. "She brought me the idea of offering virtual reality education and then pitched it to the President's Fund."



Santiago secured the funds needed to support an educational platform available through BioflightVR, a company that builds customized virtual reality (VR) experiences to teach processes and skills.

Initially, Santiago planned to use VR to educate families caring for a child with a percutaneous endoscopic gastrostomy (PEG) tube. "The GI surgery clinic said the PEG-tube was not a robust population," said Santiago of the gastroenterology department. "We have more patients receiving the G-tube, so we decided to go with that." The patient population receiving new G-tubes includes failure-to-thrive babies and babies who have undergone cardiac surgery and are not tolerating their feeding. "The condition of these patients gives parents so much anxiety," said Santiago. "We want to take away the worries they have about caring for their child when they go home. The virtual environment reduces anxiety because it lets them practice."

The online conference that set everything in motion for Santiago had featured Dr. Ashish Chogle, a pediatric gastroenterologist at Children's Hospital of Orange County (CHOC). At the time, Dr. Chogle was working with BioflightVR to develop a platform for PEG VR training. During the development phase, Santiago and others from Valley Children's collaborated with healthcare professionals at CHOC via email and virtual conferencing. Santiago also collaborated with Maria Tamayo BSN, RN IV, CPN and Brandi Hale BSN, RN IV, CPN, from the gastroenterology clinic, who assisted Santiago with formatting the VR content to match preferences and practices at Valley Children's.



"We were part of the development," said Meyer. "Rita helped tailor the program from CHOC to fit the needs of our GI clinic." CHOC became the first hospital in California to offer VR training, and Valley Children's followed close behind.

"We pitched the idea in December 2021," said Santiago. "There were many channels to go through to get approval and develop the training. The modules took three years to develop, but by June 2024 it was ready." Valley Children's became the first hospital in the Central Valley to offer VR education on a medical device, going live with G-tube VR training in July 2024. "It was Bioflight's brain child," said Santiago. "I'm just like a nanny helping the baby to walk and grow."

"Rita brought all the experts together," said Meyer. "She met with interdisciplinary team members from Bioflight and CHOC. She is like a mini project manager. It's not an official title, but she collaborated with physicians and nurse practitioners here at Valley Children's and at CHOC. She has fine-tuned her collaboration skills."

Implementation of Virtual Reality

Santiago recruited 10 nurses from Explorer to serve as champions and trained them to run the VR system. She keeps a schedule in order to ensure every shift has a champion available. Santiago also works with nurses in the surgery clinic, under the leadership of Kelsey Ockerman, manager Ambulatory Services, to monitor the

CAREXR Team:

Project Lead

Rita Santiago, BSN, RN IV, CMSRN, CPN

Explorer RN Champions

Joanna Alvarado, BSN, RN, CPN, Clinical Coordinator

Brittney Becerra, BSN, RN II

Ginger Bellisario, BSN, RN II, PHN

Olivia Boxer, BSN, RN II

Toby Her, BSN, RN, CPN, Charge Nurse

Marissa Huerta, RN III

Teresa Juarez, BSN, RN III, CPN

Honey Monocillo, MBA, BSN, RN III, CPN

Reet Pabla, BSN, RN II

Sandy Phomphiphak, BSN, RN III, CPN, PHN

schedule and watch for upcoming GI cases. "When the patient and family arrive on Explorer, I give the parents a heads up that we're going to educate them on how to care for a G-tube," said Santiago. "When the day comes and the surgery happens, if the parents are here, we ask if they are ready for the training." Santiago encourages parents to practice with the VR education before they complete their 24-hour rooming-in process on Explorer. "I don't want them to be overwhelmed because they will need to be concentrating and focus on initiating care for their child in that period," she said.



There are three stages to the process of patient and family education:

1. Listen and learn from the nurse
2. Watch the instructions on the procedure
3. Return-demonstrate the task

Traditionally, this process involves sharing an information packet brimming with reading materials and demonstrating the care process. VR training complements the standard form of education with all activity taking place in a virtual environment monitored by a nurse on an iPad.

"When I present VR training to parents, they might say, 'Oh, I read about how to do that,'" said Santiago. "But I tell them, 'This doesn't take over the education the nurses have already given you. It is a supplement.' And then they're open to trying it."

Valley Children's purchased three VR goggles and worked with Information Technology (IT) to pair one set of goggles with an iPad. Santiago teaches the parents how to use the triggers from the hand control while wearing goggles to activate the simulation. "Once they learn, I leave the room and watch what they're doing on my iPad," she said. IT enabled the system to cast what the parents see while wearing the goggles onto the iPad. "If I see that they are getting blocked at a certain phase, I go in and show them how to do it correctly." Santiago expressed



amazement at the parents' ability to learn the first module and then apply their skills to additional modules. "We have parents who teach it in turn to their parents, since they are the alternate caregivers when the parents are at work."

Families have embraced VR training. One family was encouraged to discover the grandfather of the patient could learn to provide care. "Virtual gaming is a fun thing for kids," said Meyer. "And now their parents put on a virtual mask and the kids get a kick out of it."

The VR training program has helped increase awareness of how critical patient education is to prevent gaps in care at home. Meyer and Santiago agree this training will help reduce readmissions and complications from wrong care and misuse of the G-tube. "Parents go from saying, 'I never thought I could' to 'I see now,'" said Santiago. "It's fun. And for education to be fun is huge. It really makes a difference."

"This will help us with our department goals in the long run," said Meyer. "We expect to see earlier discharges and higher patient satisfaction and employee satisfaction."

Recent surveys contain the following comments from parents:

- "It's very helpful because of the visual."
- "I'm impressed."
- "It is a very good way for anyone to learn G-tubes."
- "I really enjoyed it. I haven't gotten experience with some modules hands-on, and so getting that exposure was great for me."
- "The videos helped being hands-on. It's well put together. Confident. Practice makes perfect."
- "Totally awesome. So helpful and informative. I wish all parents got to use this for all home care skills."

The Future of Virtual Reality

"Rita never stops bringing tech and innovation into our world," said Meyer. "From the time she brought me the idea and pitched it to the President's Fund to go-live, Rita took this idea and made it happen. Even when this program launched, she didn't stop. She keeps moving into other areas."

Santiago is working on developing VR training on the peripherally inserted central catheter (PICC) with the PICC team next. Families will be able to download a companion app to their Apple or Android device and watch the video simulation without the goggles. This will allow them to see and practice the steps and procedures and share with other family members who can take care of the child. Additionally, Santiago is collaborating with the safety coordinator regarding the possibility of creating a fire extinguisher safety module for the safety team. She is also hoping to offer the original G-tube training in Spanish soon.

The innovative VR training available to GI surgery patients at Valley Children's has made learning how to safely provide care more fun. Patient safety is a priority at Valley Children's Healthcare, but that doesn't mean patients, families, and the healthcare team can't have fun.

Special Thanks:

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 Kelsey Ockerman, Manager, Ambulatory Services, Gastroenterology, and Pediatric Surgery
 Brandi Hale, BSN, RN IV, CPN
 Maria Tamayo, BSN, RN IV, CPN

SCHOLARLY AND COMMUNITY ACTIVITIES STATISTICS (FY24)

375

Nurses involved in an external professional nursing/healthcare organization

34

Nurses presented external poster or podium presentations

99

Nurses enrolled in an academic program (8.4%)

17

Nurses serving as adjunct faculty or clinical instructors

7

Nurses published in external professional literature

206

Nurses providing community service impacting children's health

1

New nursing research study



9300 Valley Children's Place
Madera, CA 93636-8762

559-353-3000
valleychildrens.org